



POLICY BOOK

February 2021

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	These Criteria for Accreditation remain in effect after September 1, 2020, only as long as necessary to complete the evaluations of institutions begun under these Criteria prior to September 1, 2020, or to complete evaluations originally scheduled to occur prior to September 1, 2020, but which were postponed due to the COVID-19 pandemic.



SECTION 1: CRITERIA AND REQUIREMENTS

Policy Title: Eligibility Requirements

Number: CRRT.A.10.010

An institution must meet all Eligibility Requirements before it is granted Candidate status. It must present *initial* evidence that it meets these requirements before a pre-application interview is scheduled with HLC. Through submission of the Eligibility Filing it must present *full* evidence that it meets these requirements before a site visit for Candidacy is scheduled.

1. Jurisdiction of HLC

The institution falls within HLC's jurisdiction as defined in HLC's Bylaws (Article III). HLC extends accreditation and candidacy for accreditation to higher education institutions that are (1) incorporated in Arizona, Arkansas, Colorado, Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota, Missouri, Nebraska, New Mexico, North Dakota, Ohio, Oklahoma, South Dakota, West Virginia, Wisconsin, and Wyoming, or operating under federal authority within these states, and (2) have substantial presence, as defined in HLC policy, within these states.

2. Legal Status

The institution is appropriately authorized in each of the states, sovereign nations, or jurisdictions in which it operates to award degrees, offer educational programs, or conduct activities as an institution of higher education. At least one of these jurisdictions must be in the HLC region.

3. Governing Board

The institution has an independent governing board that possesses and exercises the necessary legal power to establish and review the basic policies that govern the institution.

4. Stability

The institution demonstrates a history of stable operations and consistent control during the two years preceding the submission of the Eligibility Filing.

5. Mission Statement

The institution has a statement of mission approved by its governing board and appropriate for a degree-granting institution of higher education. The mission defines the nature and purpose of the higher learning provided by the institution and the students for whom it is intended.

6. Educational Programs

The institution has educational programs that are appropriate for an institution of higher education. HLC may decline to evaluate an institution for status with HLC if the institution's mission or educational programs fall outside areas in which HLC has demonstrated expertise or lacks appropriate standards for meaningful review.

In appropriate proportion, the institution's programs are degree-granting and involve coursework provided by the institution, establishing the institution's commitment to degree-granting higher education.

The institution has clearly articulated learning goals for its academic programs and has strategies for assessment in place.

The institution:

- maintains a minimum requirement for general education for all of its undergraduate programs whether through a traditional practice of distributed curricula (15 semester credits for AAS degrees, 24 for AS or AA degrees, and 30 for bachelor's degrees) or through integrated, embedded, interdisciplinary, or other accepted models that demonstrate a minimum requirement equivalent to the distributed model. Any exceptions are explained and justified.
- has a program of general education that is grounded in a philosophy or framework developed by the institution or adopted from an established framework. It imparts common knowledge and intellectual concepts to students and develops skills and attitudes that the institution believes every college-educated person should possess. The institution clearly and publicly articulates the purposes, content and intended learning outcomes of its general education program.
- conforms to commonly accepted minimum program length: 60 semester credits for associate's degrees, 120 semester credits for bachelor's degrees, and 30 semester credits beyond the bachelor's for master's degrees. Any exception to these minima must be explained and justified.

- meets the federal requirements for credit ascription described in HLC’s Federal Compliance Program.

7. Information to the Public

The institution makes public its statements of mission, vision, and values; full descriptions of its program requirements; its requirements for admission both to the institution and to particular programs or majors; its policies on acceptance of transfer credit, including how credit is applied to degree requirements; clear and accurate information on all student costs, including tuition, fees, training and incidentals, and its policy on refunds; its policies regarding good standing, probation, and dismissal; all residency requirements; and grievance and complaint procedures.

The institution portrays clearly and accurately to the public its accreditation status with national, specialized, and professional accreditation agencies as well as with the Higher Learning Commission, including a clear distinction between candidate or accredited status and an intention to seek status.

8. Financial Capacity

The institution has the financial base to support its operations and sustain them in the future. It demonstrates a record of responsible fiscal management, including appropriate debt levels.

The institution:

- has a prepared budget for the current year and the capacity to compare it with budgets and actual results of previous years; and
- undergoes external financial audit by a certified public accountant or a public audit agency. For private institutions the audit is annual; for public institutions it is at least every two years. (Institutions under federal control are exempted provided that they have other reliable information to document the institution’s fiscal resources and management.)

9. Administration

The institution has a Chief Executive Officer appointed by its governing board.

The institution has governance and administrative structures that enable it to carry out its operations.

10. Faculty and Other Academic Personnel

The institution employs faculty and other academic personnel appropriately qualified and sufficient in number to support its academic programs.

11. Learning Resources

The institution owns or has secured access to the learning resources and support services necessary to support the learning expected of its students (research laboratories, libraries, performance spaces, clinical practice sites, museum collections, etc.).

12. Student Support Services

The institution makes available to its students support services appropriate for its mission, such as advising, academic records, financial aid, and placement.

13. Planning

The institution demonstrates that it engages in planning with regard to its current and future business and academic operations.

14. Policies and Procedures

The institution has appropriate policies and procedures for its students, administrators, faculty, and staff.

15. Current Activity

The institution has students enrolled in its degree programs. (To be granted initial accreditation, an institution must have graduated students from at least one degree program.)

16. Integrity of Business and Academic Operations

The institution has no record of inappropriate, unethical, and untruthful dealings with its students, with the business community, or with agencies of government. The institution complies with all legal requirements (in addition to authorization of academic programs) wherever it does business.

17. Consistency of Description Among Agencies

The institution describes itself consistently to all accrediting and governmental agencies with regard to its mission, programs, governance, and finances.

18. Accreditation Record

The institution has not had its accreditation revoked and has not voluntarily withdrawn under a show-cause order or been under a sanction with another accrediting agency recognized by CHEA or USDE within the five years preceding the initiation of the Eligibility Process.

19. Good Faith and Planning to Achieve Accreditation

The board has authorized the institution to seek membership with HLC and indicated its intention, if a member of HLC, to accept the Obligations of Membership.

The institution has a realistic plan for achieving accreditation with HLC within the period of time set by HLC policy.

- If the institution offers programs that require specialized accreditation or recognition in order for its students to be certified or sit for licensing examinations, it either has the appropriate accreditation or discloses publicly and clearly the consequences of the lack thereof. The institution always makes clear to students the distinction between regional and specialized or program accreditation and the relationships between licensure and the various types of accreditation.
- If the institution is predominantly or solely a single-purpose institution in fields that require licensure for practice, it demonstrates that it is also accredited by or is actively in the process of applying to a recognized specialized accrediting agency for each field, if such agency exists.

Policy Number Key

Section CRRT: Criteria and Requirements

Chapter A: Establishing Institutional Eligibility

Part 10: General

Last Revised: November 2020

First Adopted: February 2003

Revision History: June 2006, June 2011, November 2020

Notes: Former policy number 1.1(c), 2013 – 1.1(e). In February 2021, references to the Higher Learning Commission as “the Commission” were replaced with the term “HLC.”

Related Policies:



Policy Title: Criteria for Accreditation

Number: CRRT.B.10.010

The Criteria for Accreditation are the standards of quality by which HLC determines whether an institution merits accreditation or reaffirmation of accreditation. They are as follows:

Criterion 1. Mission

The institution's mission is clear and articulated publicly; it guides the institution's operations.

Core Components

1.A. The institution's mission is articulated publicly and operationalized throughout the institution.

1. The mission was developed through a process suited to the context of the institution.
2. The mission and related statements are current and reference the institution's emphasis on the various aspects of its mission, such as instruction, scholarship, research, application of research, creative works, clinical service, public service, economic development and religious or cultural purpose.
3. The mission and related statements identify the nature, scope and intended constituents of the higher education offerings and services the institution provides.
4. The institution's academic offerings, student support services and enrollment profile are consistent with its stated mission.
5. The institution clearly articulates its mission through public information, such as statements of purpose, vision, values, goals, plans or institutional priorities.

1.B. The institution's mission demonstrates commitment to the public good.

1. The institution's actions and decisions demonstrate that its educational role is to serve the public, not solely the institution or any superordinate entity.

2. The institution's educational responsibilities take primacy over other purposes, such as generating financial returns for investors, contributing to a related or parent organization, or supporting external interests.
3. The institution engages with its external constituencies and responds to their needs as its mission and capacity allow.

1.C. The institution provides opportunities for civic engagement in a diverse, multicultural society and globally connected world, as appropriate within its mission and for the constituencies it serves.

1. The institution encourages curricular or cocurricular activities that prepare students for informed citizenship and workplace success.
2. The institution's processes and activities demonstrate inclusive and equitable treatment of diverse populations.
3. The institution fosters a climate of respect among all students, faculty, staff and administrators from a range of diverse backgrounds, ideas and perspectives.

Criterion 2. Integrity: Ethical and Responsible Conduct

The institution acts with integrity; its conduct is ethical and responsible.

Core Components

2.A. The institution establishes and follows policies and processes to ensure fair and ethical behavior on the part of its governing board, administration, faculty and staff.

1. The institution develops and the governing board adopts the mission.
2. The institution operates with integrity in its financial, academic, human resources and auxiliary functions.

2.B. The institution presents itself clearly and completely to its students and to the public.

1. The institution ensures the accuracy of any representations it makes regarding academic offerings, requirements, faculty and staff, costs to students, governance structure and accreditation relationships.
2. The institution ensures evidence is available to support any claims it makes regarding its contributions to the educational experience through research, community engagement, experiential learning, religious or spiritual purpose and economic development.

2.C. The governing board of the institution is autonomous to make decisions in the best interest of the institution in compliance with board policies and to ensure the institution's integrity.

1. The governing board is trained and knowledgeable so that it makes informed decisions with respect to the institution's financial and academic policies and practices; the board meets its legal and fiduciary responsibilities.
2. The governing board's deliberations reflect priorities to preserve and enhance the institution.
3. The governing board reviews the reasonable and relevant interests of the institution's internal and external constituencies during its decision-making deliberations.
4. The governing board preserves its independence from undue influence on the part of donors, elected officials, ownership interests or other external parties.
5. The governing board delegates day-to-day management of the institution to the institution's administration and expects the institution's faculty to oversee academic matters.

2.D. The institution is committed to academic freedom and freedom of expression in the pursuit of truth in teaching and learning.

2.E. The institution's policies and procedures call for responsible acquisition, discovery and application of knowledge by its faculty, staff and students.

1. Institutions supporting basic and applied research maintain professional standards and provide oversight ensuring regulatory compliance, ethical behavior and fiscal accountability.
2. The institution provides effective support services to ensure the integrity of research and scholarly practice conducted by its faculty, staff and students.
3. The institution provides students guidance in the ethics of research and use of information resources.
4. The institution enforces policies on academic honesty and integrity.

Criterion 3. Teaching and Learning: Quality, Resources and Support

The institution provides quality education, wherever and however its offerings are delivered.

Core Components

3.A. The rigor of the institution's academic offerings is appropriate to higher education.

1. Courses and programs are current and require levels of student performance appropriate to the credential awarded.

2. The institution articulates and differentiates learning goals for its undergraduate, graduate, post-baccalaureate, post-graduate and certificate programs.
3. The institution's program quality and learning goals are consistent across all modes of delivery and all locations (on the main campus, at additional locations, by distance delivery, as dual credit, through contractual or consortial arrangements, or any other modality).

3.B. The institution offers programs that engage students in collecting, analyzing and communicating information; in mastering modes of intellectual inquiry or creative work; and in developing skills adaptable to changing environments.

1. The general education program is appropriate to the mission, educational offerings and degree levels of the institution. The institution articulates the purposes, content and intended learning outcomes of its undergraduate general education requirements.
2. The program of general education is grounded in a philosophy or framework developed by the institution or adopted from an established framework. It imparts broad knowledge and intellectual concepts to students and develops skills and attitudes that the institution believes every college-educated person should possess.
3. The education offered by the institution recognizes the human and cultural diversity and provides students with growth opportunities and lifelong skills to live and work in a multicultural world.
4. The faculty and students contribute to scholarship, creative work and the discovery of knowledge to the extent appropriate to their offerings and the institution's mission.

3.C. The institution has the faculty and staff needed for effective, high-quality programs and student services.

1. The institution strives to ensure that the overall composition of its faculty and staff reflects human diversity as appropriate within its mission and for the constituencies it serves.
2. The institution has sufficient numbers and continuity of faculty members to carry out both the classroom and the non-classroom roles of faculty, including oversight of the curriculum and expectations for student performance, assessment of student learning, and establishment of academic credentials for instructional staff.
3. All instructors are appropriately qualified, including those in dual credit, contractual and consortial offerings.
4. Instructors are evaluated regularly in accordance with established institutional policies and procedures.

5. The institution has processes and resources for assuring that instructors are current in their disciplines and adept in their teaching roles; it supports their professional development.
6. Instructors are accessible for student inquiry.
7. Staff members providing student support services, such as tutoring, financial aid advising, academic advising and cocurricular activities are appropriately qualified, trained and supported in their professional development.

3.D. The institution provides support for student learning and resources for effective teaching.

1. The institution provides student support services suited to the needs of its student populations.
2. The institution provides for learning support and preparatory instruction to address the academic needs of its students. It has a process for directing entering students to courses and programs for which the students are adequately prepared.
3. The institution provides academic advising suited to its offerings and the needs of its students.
4. The institution provides to students and instructors the infrastructure and resources necessary to support effective teaching and learning (technological infrastructure, scientific laboratories, libraries, performance spaces, clinical practice sites and museum collections, as appropriate to the institution's offerings).

Criterion 4. Teaching and Learning: Evaluation and Improvement

The institution demonstrates responsibility for the quality of its educational programs, learning environments and support services, and it evaluates their effectiveness for student learning through processes designed to promote continuous improvement.

Core Components

4.A. The institution ensures the quality of its educational offerings.

1. The institution maintains a practice of regular program reviews and acts upon the findings.
2. The institution evaluates all the credit that it transcripts, including what it awards for experiential learning or other forms of prior learning, or relies on the evaluation of responsible third parties.
3. The institution has policies that ensure the quality of the credit it accepts in transfer.
4. The institution maintains and exercises authority over the prerequisites for courses, rigor of courses, expectations for student learning, access to learning resources, and faculty qualifications for all its programs, including dual credit programs. It ensures that its dual credit

courses or programs for high school students are equivalent in learning outcomes and levels of achievement to its higher education curriculum.

5. The institution maintains specialized accreditation for its programs as appropriate to its educational purposes.
6. The institution evaluates the success of its graduates. The institution ensures that the credentials it represents as preparation for advanced study or employment accomplish these purposes. For all programs, the institution looks to indicators it deems appropriate to its mission.

4.B. The institution engages in ongoing assessment of student learning as part of its commitment to the educational outcomes of its students.

1. The institution has effective processes for assessment of student learning and for achievement of learning goals in academic and cocurricular offerings.
2. The institution uses the information gained from assessment to improve student learning.
3. The institution's processes and methodologies to assess student learning reflect good practice, including the substantial participation of faculty, instructional and other relevant staff members.

4.C. The institution pursues educational improvement through goals and strategies that improve retention, persistence and completion rates in its degree and certificate programs.

1. The institution has defined goals for student retention, persistence and completion that are ambitious, attainable and appropriate to its mission, student populations and educational offerings.
2. The institution collects and analyzes information on student retention, persistence and completion of its programs.
3. The institution uses information on student retention, persistence and completion of programs to make improvements as warranted by the data.
4. The institution's processes and methodologies for collecting and analyzing information on student retention, persistence and completion of programs reflect good practice. (Institutions are not required to use IPEDS definitions in their determination of persistence or completion rates. Institutions are encouraged to choose measures that are suitable to their student populations, but institutions are accountable for the validity of their measures.)

Criterion 5. Institutional Effectiveness, Resources and Planning

The institution's resources, structures, processes and planning are sufficient to fulfill its mission, improve the quality of its educational offerings, and respond to future challenges and opportunities.

Core Components

5.A. Through its administrative structures and collaborative processes, the institution's leadership demonstrates that it is effective and enables the institution to fulfill its mission.

1. Shared governance at the institution engages its internal constituencies—including its governing board, administration, faculty, staff and students—through planning, policies and procedures.
2. The institution's administration uses data to reach informed decisions in the best interests of the institution and its constituents.
3. The institution's administration ensures that faculty and, when appropriate, staff and students are involved in setting academic requirements, policy and processes through effective collaborative structures.

5.B. The institution's resource base supports its educational offerings and its plans for maintaining and strengthening their quality in the future.

1. The institution has qualified and trained operational staff and infrastructure sufficient to support its operations wherever and however programs are delivered.
2. The goals incorporated into the mission and any related statements are realistic in light of the institution's organization, resources and opportunities.
3. The institution has a well-developed process in place for budgeting and for monitoring its finances.
4. The institution's fiscal allocations ensure that its educational purposes are achieved.

5.C. The institution engages in systematic and integrated planning and improvement.

1. The institution allocates its resources in alignment with its mission and priorities, including, as applicable, its comprehensive research enterprise, associated institutes and affiliated centers.
2. The institution links its processes for assessment of student learning, evaluation of operations, planning and budgeting.
3. The planning process encompasses the institution as a whole and considers the perspectives of internal and external constituent groups.

4. The institution plans on the basis of a sound understanding of its current capacity, including fluctuations in the institution's sources of revenue and enrollment.
5. Institutional planning anticipates evolving external factors, such as technology advancements, demographic shifts, globalization, the economy and state support.
6. The institution implements its plans to systematically improve its operations and student outcomes.

Policy Number Key

Section CRRT: Criteria and Requirements

Chapter B: Criteria for Accreditation

Part 10: General

Last Revised: February 2019

First Adopted: August 1992

Revision History: Criterion Three revised August 1998; revised February 2002; revised February 2007. New Criteria for Accreditation adopted February 2003, effective January 2005; New Criteria for Accreditation adopted February 2012, effective January 2013; Revised June 2013, June 2014; revised February 2019, effective September 2020.

Notes: In February 2021, references to the Higher Learning Commission as “the Commission” were replaced with the term “HLC.”



Policy Title: Assumed Practices

Number: CRRT.B.10.020

Foundational to the Criteria and Core Components is a set of practices shared by institutions of higher education in the United States. Unlike the Criteria for Accreditation, these Assumed Practices are (1) generally matters to be determined as facts, rather than matters requiring professional judgment and (2) not expected to vary by institutional mission or context. Every institution must be in compliance with all Assumed Practices at all times.

Because institutions are assumed to be adhering to the Assumed Practices on an ongoing basis, peer review teams will not review their compliance with these requirements except as follows:

1. When an institution is seeking HLC accreditation, and has not yet been granted initial accreditation by the Board of Trustees, the institution must provide evidence of its compliance with all the Assumed Practices as part of any reports to gain and maintain candidacy, and to gain initial accreditation.
2. When an accredited institution's compliance with one or more Criteria for Accreditation raises questions concerning its compliance with related Assumed Practices, the institution must be prepared to provide evidence that it is in compliance with such related Assumed Practices.
3. When the Board of Trustees has placed an institution on the sanction of Probation and has cited the institution for being out of compliance with one or more Assumed Practices, the institution must provide evidence of its compliance with the cited Assumed Practices as part of its report to have Probation removed.
4. When the Board of Trustees has placed an institution under a Show-Cause Order the institution must provide evidence of its compliance with all the Assumed Practices as part of its report to have the Show-Cause order removed.
5. When otherwise required by HLC as circumstances warrant.

In every case, peer reviewers and any applicable decision-making body will determine whether the institution meets or does not meet the Assumed Practices under review and institutions will thus be determined to be in compliance or out of compliance with HLC requirements accordingly.

A. Integrity: Ethical and Responsible Conduct

1. The institution has a conflict of interest policy that ensures that the governing board and the senior administrative personnel act in the best interest of the institution.
2. The institution has ethics policies for faculty and staff regarding conflict of interest, nepotism, recruitment and admissions, financial aid, privacy of personal information, and contracting.
3. The institution provides its students, administrators, faculty, and staff with policies and procedures informing them of their rights and responsibilities within the institution.
4. The institution establishes and publicizes clear procedures for receiving complaints from students and other constituencies, responding to complaints in a timely manner, and analyzing complaints to improve its processes. The institution does not retaliate against those who raise complaints.
5. The institution makes readily available to students and to the general public clear and complete information including:
 - a. statements of mission, vision, and values
 - b. full descriptions of the requirements for its programs, including all pre-requisite courses
 - c. requirements for admission both to the institution and to particular programs or majors
 - d. its policies on acceptance of transfer credit, including how the institution applies such credit to its degree requirements. (Except for courses articulated through transfer policies or institutional agreements, the institution makes no promises to prospective students regarding the acceptance of credit awarded by examination, credit for prior learning, or credit for transfer until the institution has conducted an evaluation of such students' credits in accordance with its transfer policies.)
 - e. all student costs, including tuition, fees, training, and incidentals; its financial aid policies, practices, and requirements; and its policy on refunds
 - f. policies regarding academic good standing, probation, and dismissal; residency or enrollment requirements (if any)
 - g. a full list of its instructors and their academic credentials
 - h. its relationship with any parent organization (corporation, hospital, or church, or other entity that owns the institution) and any external providers of its instruction.

6. The institution assures that all data it makes public are accurate and complete, including those reporting on student achievement of learning and student persistence, retention, and completion.
7. The institution portrays clearly and accurately to the public its current status with the Higher Learning Commission and with specialized, national, and professional accreditation agencies.
 - a. An institution offering programs that require specialized accreditation or recognition by a state licensing board or other entity in order for its students to be certified or to sit for the licensing examination in states where its students reside either has the appropriate accreditation and recognition or discloses publicly and clearly the consequences to the students of the lack thereof. The institution makes clear to students the distinction between regional and specialized or program accreditation and the relationships between licensure and the various types of accreditation.
 - b. An institution offering programs eligible for specialized accreditation at multiple locations discloses the accreditation status and recognition of the program by state licensing boards at each location.
 - c. An institution that provides a program that prepares students for a licensure, certification, or other qualifying examination publicly discloses its pass rate on that examination, unless such information is not available to the institution.
8. The governing board and its executive committee, if it has one, include some “public” members. Public members have no significant administrative position or any ownership interest in any of the following: the institution itself; a company that does substantial business with the institution; a company or organization with which the institution has a substantial partnership; a parent, ultimate parent, affiliate, or subsidiary corporation; an investment group or firm substantially involved with one of the above organizations. All publicly-elected members or members appointed by publicly-elected individuals or bodies (governors, elected legislative bodies) are public members.¹
9. The governing board has the authority to approve the annual budget and to engage and dismiss the chief executive officer.¹
10. The institution remains in compliance at all times with all applicable laws, including laws related to authorization of educational activities and consumer protection wherever it does business.
11. The institution documents outsourcing of all services in written agreements, including agreements with parent or affiliated organizations.
12. The institution takes responsibility for the ethical and responsible behavior of its contractual partners in relation to actions taken on its behalf.

¹ Institutions operating under federal control and authorized by Congress are exempt from these requirements. These institutions must have a public board that includes representation by individuals who do not have a current or previous employment or other relationship with the federal government or any military entity. This public board has a significant role in setting policy, reviewing the institution's finances, reviewing and approving major institutional priorities, and overseeing the academic programs of the institution.

B. Teaching and Learning: Quality, Resources, and Support

1. Programs, Courses, and Credits

- a. The institution conforms to commonly accepted minimum program length: 60 semester credits for associate's degrees, 120 semester credits for bachelor's degrees, and 30 semester credits beyond the bachelor's for master's degrees. Any variation from these minima must be explained and justified.
- b. The institution maintains structures or practices that ensure the coherence and quality of the programs for which it awards a degree. Typically institutions will require that at minimum 30 of the 120 credits earned for the bachelor's degree and 15 of the 60 credits for the associate's degree be credits earned at the institution itself, through arrangements with other accredited institutions, or through contractual relationships approved by HLC. Any variation from the typical minima must be explained and justified.
- c. The institution's policy and practice assure that at least 50% of courses applied to a graduate program are courses designed for graduate work, rather than undergraduate courses credited toward a graduate degree. (Cf. Criterion 3.A.1 and 2.)
(An institution may allow well-prepared advanced students to substitute its graduate courses for required or elective courses in an undergraduate degree program and then subsequently count those same courses as fulfilling graduate requirements in a related graduate program that the institution offers. In "4+1" or "2+3" programs, at least 50% of the credits allocated for the master's degree – usually 15 of 30 – must be for courses designed for graduate work.)
- d. The institution adheres to policies on student academic load per term that reflect reasonable expectations for successful learning and course completion.
- e. Courses that carry academic credit toward college-level credentials have content and rigor appropriate to higher education.
- f. The institution has a process for ensuring that all courses transferred and applied toward degree requirements demonstrate equivalence with its own courses required for that degree or are of equivalent rigor.

- g. The institution has a clear policy on the maximum allowable credit for prior learning as a reasonable proportion of the credits required to complete the student's program. Credit awarded for prior learning is documented, evaluated, and appropriate for the level of degree awarded. (Note that this requirement does not apply to courses transferred from other institutions.)
- h. The institution maintains a minimum requirement for general education for all of its undergraduate programs whether through a traditional practice of distributed curricula (15 semester credits for AAS degrees, 24 for AS or AA degrees, and 30 for bachelor's degrees) or through integrated, embedded, interdisciplinary, or other accepted models that demonstrate a minimum requirement equivalent to the distributed model. Any variation is explained and justified.

2. Faculty Roles and Qualifications

- a. Qualified faculty members are identified primarily by credentials, but other factors, including but not limited to equivalent experience, may be considered by the institution in determining whether a faculty member is qualified. Instructors (excluding for this requirement teaching assistants enrolled in a graduate program and supervised by faculty) possess an academic degree relevant to what they are teaching and at least one level above the level at which they teach, except in programs for terminal degrees or when equivalent experience is established. In terminal degree programs, faculty members possess the same level of degree. When faculty members are employed based on equivalent experience, the institution defines a minimum threshold of experience and an evaluation process that is used in the appointment process. Faculty teaching general education courses, or other non-occupational courses, hold a master's degree or higher in the discipline or subfield. If a faculty member holds a master's degree or higher in a discipline or subfield other than that in which he or she is teaching, that faculty member should have completed a minimum of 18 graduate credit hours in the discipline or subfield in which they teach.
- b. Instructors teaching in graduate programs should hold the terminal degree determined by the discipline and have a record of research, scholarship or achievement appropriate for the graduate program.
- c. Instructors teaching at the doctoral level have a record of recognized scholarship, creative endeavor, or achievement in practice commensurate with doctoral expectations.
- d. Faculty participate substantially in:

- i. oversight of the curriculum—its development and implementation, academic substance, currency, and relevance for internal and external constituencies;
 - ii. assurance of consistency in the level and quality of instruction and in the expectations of student performance;
 - iii. establishment of the academic qualifications for instructional personnel;
 - iv. analysis of data and appropriate action on assessment of student learning and program completion.
3. Support Services
 - a. Financial aid advising clearly and comprehensively reviews students' eligibility for financial assistance and assists students in a full understanding of their debt and its consequences.
 - b. The institution maintains timely and accurate transcript and records services.

C. Teaching and Learning: Evaluation and Improvement

1. Instructors (excluding for this requirement teaching assistants enrolled in a graduate program and supervised by faculty) have the authority for the assignment of grades. (This requirement allows for collective responsibility, as when a faculty committee has the authority to override a grade on appeal.)
2. The institution refrains from the transcription of credit from other institutions or providers that it will not apply to its own programs.
3. The institution has formal and current written agreements for managing any internships and clinical placements included in its programs.
4. A predominantly or solely single-purpose institution in fields that require licensure for practice is also accredited by or is actively in the process of applying to a recognized specialized accrediting agency for each field, if such agency exists.
5. Instructors communicate course requirements to students in writing and in a timely manner.
6. Institutional data on assessment of student learning are accurate and address the full range of students who enroll.
7. Institutional data on student retention, persistence, and completion are accurate and address the full range of students who enroll.

D. Resources, Planning, and Institutional Effectiveness

1. The institution is able to meet its current financial obligations.
2. The institution has a prepared budget for the current year and the capacity to compare it with budgets and actual results of previous years.
3. The institution has future financial projections addressing its long-term financial sustainability.
4. The institution maintains effective systems for collecting, analyzing, and using institutional information.
5. The institution undergoes an external audit by a certified public accountant or a public audit agency that reports financial statements on the institution separately from any other related entity or parent corporation. For private institutions the audit is annual; for public institutions it is at least every two years.²
6. The institution's administrative structure includes a chief executive officer, chief financial officer, and chief academic officer (titles may vary) with appropriate credentials and experience and sufficient focus on the institution to ensure appropriate leadership and oversight. (An institution may outsource its financial functions but must have the capacity to assure the effectiveness of that arrangement.)
7. The institution's planning activities demonstrate careful and detailed consideration of student needs (including but not limited to the preservation of student records) and protocols to be followed in the event an orderly institutional closure becomes necessary.

² Institutions under federal control are exempted provided that they have other reliable information to document the institution's fiscal resources and management.

Policy Number Key

Section CRRT: Criteria and Requirements

Chapter B: Criteria for Accreditation

Part 10: General

Last Revised: November 2020

First Adopted: February 2012

Revision History: June 2013, June 2014, June 2016, September 2017, November 2020

Notes: See Appendix A for the immediately preceding version of the Assumed Practices that remains in effect only as long as necessary to complete the evaluations of institutions begun under such Assumed Practices. For all other institutions, the current Assumed Practices apply. Institutions that received HLC extensions to bring

their dual credit faculty into compliance with Assumed Practice B.2. are responsible to do so before such extensions have expired. In all other respects, the current Assumed Practices apply to such institutions. In February 2021, references to the Higher Learning Commission as “the Commission” were replaced with the term “HLC.”



Policy Title: Recruiting, Admissions and Related Institutional Practices

Number: CRRT.C.10.010

1. The institution treats students ethically, respectfully and professionally in the marketing, recruiting and admissions process so that students can make an informed enrollment decision without being subjected to high-pressure tactics from the institution or a related contractor.
2. All institutional recruiters and admissions personnel have appropriate education, job titles, and training from the institution for their role and are overseen by the institution, which enforces a formal code of conduct for all such personnel; the institution also oversees any third-party contractors who provide recruiting and admissions services and assures that any personnel who work with their prospective students have similar education, and experience as personnel employed by the institution and are trained by the institution to provide a similar level of service.
3. Information provided to prospective students in the recruiting and admissions process is accurate, complete and up-to-date and is provided to all prospective students without any requirement that such students provide contact information to receive basic information about the institution. The institution also makes its policies related to consumer protection accessible and transparent.
4. The institution also promptly honors any request from such student to remove that student's name from phone, email or other contact lists; student information collected through the admissions, recruiting or lead process will be maintained as outlined in the institution's data privacy policy, which must be prominently posted on the institution's website.
5. Any job placement, salary information, or other student outcome data publicized as part of the recruiting process are based on all students in a cohort or class who completed the program; completing students are not excluded from the published data because they did not utilize the institution's career, advising or other services; an institution will maintain back-up documentation related to any such publicized outcome data and will make that back-up data available to HLC, the public or governmental agency upon request. If an institution publicizes for recruiting purposes outcome data based on student survey or other partial information about a cohort or class of students, it will indicate clearly wherever it publicizes the rate the number of students in the cohort or class and the number of students whose outcome data is included; if job placement or other

related data are drawn from an external database, economic forecasting or other source, the institution will indicate in conjunction with the publication of the data its source and will direct students to the original source of the information where applicable (e.g., Department of Labor website).

6. Institutional recruiters, admissions officers or appropriate third parties may answer questions about the student application process for admissions and financial aid, but in no case will such personnel complete these applications or apply the signature of the prospective student.
7. If an institution requires a student to sign an enrollment agreement, the enrollment agreement will be limited to basic information about a student's course of study, tuition and fees, and other related information and in no case will that agreement include any language limiting that student's ability to: (1) file a complaint with an accrediting or state agency; (2) take legal action in the event that any dispute resolution processes agreed to by the institution and the student are unsuccessful in resolving the dispute to the satisfaction of the parties; or (3) seek to discharge a student loan through remedies available to borrowers under state or federal law. Students will be provided sufficient time, as determined by the situation and any mandates in state law, to review any enrollment agreement and to consult with others as a part of that review process before being required to sign the document or lose an offer of admission and related financial assistance.
8. Students will have the right and responsibility to register for each academic term in which they are enrolled, and in no case will the institution automatically register a student in the next term without that student's affirmative consent to such registration or the opportunity for the student to cancel that registration before the student is assessed tuition or fees for that term.
9. Prior to enrolling a prospective student in a program or major, the institution should ensure that the student has had sufficient time to review the institution's policies and procedures, to understand the amount of federal, state and institutional financial aid the student is eligible to receive, and to learn how many credits, if any, will transfer and whether they will be applied to requirements of the major or general education or the process and timeline for evaluation of those credits; in no case will the institution use high-pressure tactics to get a student to enroll or matriculate before it provides this basic information.
10. The institution shall not induce or pressure a student to enroll by a specific deadline with the promise of cash or free goods or services outside of the regular process of scholarship monies, institutional discounting, fee waivers, financial aid or other assistance; an institution shall not promise that employment is being directly or indirectly offered or is more likely related to its education or provide any guarantees of employment related to that education.

11. In addition to a policy related to return of Title IV funds, the institution has a refund policy to assure that students receive a refund where appropriate if they withdraw from an academic term or from an institution.

HLC may look into an allegation of a violation of the student consumer protection policies during an evaluation visit, through the complaint process, or through any other appropriate mechanism. An institution that has engaged in violations of HLC policy on student consumer protection, as outlined in this policy, shall be considered to be in violation of HLC standards related to institutional integrity and may be found to be in violation of other HLC standards as well, and may also be subject to HLC sanctions or withdrawal of accreditation as outlined in those policies.

Policy Number Key

Section CRRT: Criteria and Requirements

Chapter C: Student Protection

Part 10: General

Last Revised: November 2017

First Adopted: November 2017

Revision History: Adopted November 2017, effective September 2019

Notes: In February 2021, references to the Higher Learning Commission as “the Commission” were replaced with the term “HLC.”



SECTION 2: POLICIES RELATED TO COMPLIANCE WITH FEDERAL REGULATION

Policy Title: Federal Compliance Requirements

Number: FDCR.A.10.010

An institution accredited by HLC or seeking accreditation or candidate status shall demonstrate that it meets each of HLC's federal compliance requirements. This expectation shall apply to an institution regardless of whether the institution is participating in the Title IV program. However, an institution that does not participate in the Title IV program shall be exempted from that federal compliance requirement related to demonstrating that the institution is meeting its Title IV program responsibilities.

An institution shall provide evidence of meeting these requirements in preparation for a comprehensive evaluation for Candidacy, Initial Accreditation and Reaffirmation of Accreditation and upon demand by HLC. The comprehensive evaluation or other team will weigh the information and its relationship to the Criteria for Accreditation, and/or the requirements of the Candidacy program. If a team determines that an institution has failed to meet these requirements or if the team determines that issues in meeting these requirements raise concerns about the institution's ability to meet the Criteria for Accreditation, Core Components or Assumed Practices, it may recommend further monitoring, sanction, the issuance of a Show-Cause Order, or withdrawal of accreditation or candidacy.

HLC reserves the right to call for special monitoring related to an institution's status with regard to these requirements and any implications for its compliance with the Criteria for Accreditation, Core Components, Assumed Practices or other HLC requirements, as appropriate, when findings by the U.S. Department of Education or by another recognized accreditor indicate there may be significant noncompliance with the Higher Education Act, as amended, or that the integrity of the institution and its educational programs might be in jeopardy.

Policy Number Key

Section FDCR: Policies Required by Federal Regulation

Chapter A: Federal Compliance

Part 10: General

Last Revised: November 2020

First Adopted: February 1996

Revision History: Adopted February 1996, effective September 1996; revised February 1999, edited October 2003; renumbered November 2010; revised and split between policies 4.0 and 4.0(d) June 2012; revised June 2019, effective September 1, 2019; June 2020, November 2020

Notes: Former policy: 1.7 “Institutional Compliance with the Higher Education Reauthorization Act”; see also new Policy 4.5 “Institutional Compliance with Title IV Program Responsibilities.” In February 2021, references to the Higher Learning Commission as “the Commission” were replaced with the term “HLC.”

Related Policies:



Policy Title: Assignment of Credits, Program Length and Tuition

Number: FDCR.A.10.020

An institution shall be able to equate its learning experiences with semester or quarter credit hours using practices common to institutions of higher education, to justify the lengths of its programs in comparison to similar programs found in accredited institutions of higher education, and to justify any program-specific tuition in terms of program costs, program length, and program objectives. Institutions shall notify HLC of any significant changes in the relationships among credits, program length, and tuition.

Assignment of Credit Hours. The institution's assignment and award of credit hours shall conform to commonly accepted practices in higher education. Those institutions seeking, or participating in, Title IV federal financial aid, shall demonstrate that they have policies determining the credit hours awarded to courses and programs in keeping with commonly-accepted practices in higher education and with any federal definition of the credit hour, as may appear in federal regulations and that institutions also have procedures that result in an appropriate awarding of institutional credit in conformity with the policies established by the institution.

HLC Review. HLC shall review an institution's compliance with this policy in conjunction with a comprehensive evaluation for Candidacy, Initial Accreditation or Reaffirmation of Accreditation during HLC's assurance process. Institutions shall also produce evidence of compliance with this policy upon demand in accordance with HLC policy. HLC may sample or use other techniques to review selected institutional programs to ensure that it has reviewed the reliability and accuracy of the institution's assignment of credit. HLC shall monitor, through its established monitoring processes, the resolution of any concerns related to an institution's compliance with this policy as identified during that evaluation and shall require that an institution remedy any deficiency in this regard by a date certain but not to exceed two years from the date of the action identifying the deficiency.

HLC Action for Systemic Noncompliance. In addition to taking appropriate action related to the institution's compliance with the Federal Compliance Requirements, HLC shall notify the Secretary of Education if, following any review process identified above or through any other mechanism, HLC finds systemic noncompliance with HLC's policies in this section regarding the awarding of academic credit.

HLC shall understand systemic noncompliance to mean that an institution lacks policies to determine the appropriate awarding of academic credit or that there is an awarding by an institution of institutional credit across multiple programs or divisions or affecting significant numbers of students not in conformity with the policies established by the institution or with commonly accepted practices in higher education.

Policy Number Key

Section FDCR: Policies Required by Federal Regulation

Chapter A: Federal Compliance

Part 10: General

Last Revised: November 2020

First Adopted: February 1996

Revision History: Adopted February 1996, effective September 1996; revised November 2011; revised and combined with policies 3.10, 3.10(a), 3.10b), and 3.10(c) June 2012; revised June 2019, effective September 1, 2019; revised November 2020

Notes: Former policy number 4.0(a). In February 2021, references to the Higher Learning Commission as “the Commission” were replaced with the term “HLC.”

Related Policies: INST.B.20.020 Candidacy and Initial Accreditation, INST.C.10.010 Substantive Requirements for Reaffirmation of Accreditation, INST.E.20.010 Probation, INST.E.30.010 Show-Cause, INST.F.20.010 Special Monitoring, INST.F.20.040 Substantive Change.



Policy Title: Institutional Records of Student Complaints

Number: FDCR.A.10.030

An institution shall be able to demonstrate that it keeps an account of the student complaints it has received, including its processing of those complaints, and how that processing comports with the institution's policies and procedures on the handling of grievances or complaints. Upon request, an institution shall make available to HLC evidence that, at regular intervals, it analyzes data related to student complaints received and identifies opportunities for institutional improvement.

Policy Number Key

Section FDCR: Policies Required by Federal Regulation

Chapter A: Federal Compliance

Part 10: General

Last Revised: June 2019

First Adopted: February 1998

Revision History: Adopted February 1998; revised August 1999; revised and renumbered June 2012; revised June 2019, effective September 1, 2019

Notes: Former policy number: 4.o(b). In February 2021, references to the Higher Learning Commission as "the Commission" were replaced with the term "HLC."

Related Policies:



Policy Title: Publication of Transfer Policies

Number: FDCR.A.10.040

Each institution shall determine its own policies and procedures for accepting transfer credits, including credits from accredited and non-accredited institutions, from foreign institutions, and from institutions which grant credit for experiential learning and for non-traditional adult learner programs in conformity with any expectations in HLC's Assumed Practices. An institution's periodic review of its transfer policies and procedures should include evaluation of their clarity to those who administer them, to the students who follow them, and to employers and other stakeholders. It should also include the consistency of their interpretation and application throughout the institution, as well as their responsiveness to new types of learning opportunities outside institutions of higher education.

An institution shall demonstrate that it has transfer policies that are publicly disclosed and that such policies include a statement of criteria established by the institution regarding transfer of credit earned at another institution. An institution shall also demonstrate that it publishes a list of institutions or programs with which the institution has established articulation agreements to receive and send credit.

Policy Number Key

Section FDCR: Policies Required by Federal Regulation

Chapter A: Federal Compliance

Part 10: General

Last Revised: April 2013

First Adopted: October 1988

Revision History: Adopted October 1988, revised February 2011, revised February 2009, revised and renumbered June 2012, April 2013

Notes: Former policy number: 4.0(c). In February 2021, references to the Higher Learning Commission as "the Commission" were replaced with the term "HLC."

Related Policies:



Policy Title: Practices for Verification of Student Identity

Number: FDCR.A.10.050

An institution offering distance education or correspondence education, as such terms may be defined in federal regulations shall have processes through which the institution establishes that the student who registers in the distance education or correspondence education courses or programs is the same student who participates in and completes and receives the academic credit.

Institutional Practices. In verifying the identity of students who participate in class or coursework the institution may make use of a one or more methods, at the option of the institution, which may include but need not be limited to: (1) secure login and pass code; (2) proctored examinations; and (3) new or other technologies and practices that are effective in verifying the identity of students. Such method(s) must have reasonable and appropriate safeguards to protect student privacy. Institutions must notify students at the time of registration or enrollment of any projected additional student charges associated with the verification of student identity such as separate fees charged by proctoring services, etc.

HLC Review. HLC will review an institution’s student identity verification protocols when an institution requests permission to add programs in distance delivery as well as during a comprehensive evaluation. HLC will also require that institutions submit information about student identity verification protocols on HLC’s Institutional Update.

Policy Number Key

Section FDCR: Policies Required by Federal Regulation

Chapter A: Federal Compliance

Part 10: General

Last Revised: June 2019

First Adopted: February 2009

Revision History: Adopted February 2009; revised February 2011; revised and renumbered June 2012; revised June 2019, effective September 1, 2019

Notes: Former policy number: 4.0(d). In February 2021, references to the Higher Learning Commission as “the

Commission” were replaced with the term “HLC.”

Related Policies:



Policy Title: Title IV Program Responsibilities

Number: FDCR.A.10.060

An institution shall demonstrate that it complies if required with the Title IV program responsibility requirements of the Higher Education Reauthorization Act as most recently amended. Therefore, institutions will make available for HLC review any documents it requests concerning the institution's program responsibilities under Title IV of the Act, including any results of financial or compliance audits and program reviews, audits reports by the Office of Inspector General of the U.S. Department of Education, and any other information related to its fulfillment of its Title IV responsibilities.

Default rate. An institution shall make reasonable efforts to ensure that its students do not take on excessive debt either through federal or private loans. An institution shall also demonstrate that it is appropriately fulfilling its Title IV responsibilities to manage its student loan program, to minimize student default on such loans, and to provide accurate information to the U.S. Department of Education when required in conjunction with its loan program. Therefore, an institution will make available to HLC information it requests about its participation in federal and private loan programs as well as its three-year Title IV default rates and any default reduction plans provided to the U.S. Department of Education.

Policy Number Key

Section FDCR: Policies Required by Federal Regulation

Chapter A: Federal Compliance

Part 10: General

Last Revised: June 2019

First Adopted: February 1996

Revision History: Adopted February 1996, effective September 1996; revised February 1998; edited October 2003; renumbered November 2010; revised and renumbered June 2012; revised June 2019, effective September 1, 2019

Notes: Former policy number 4.0(e). In February 2021, references to the Higher Learning Commission as “the

Commission” were replaced with the term “HLC.”

Related Policies:



Policy Title: Public Information

Number: FDCR.A.10.070

Required Information for Students and the Public

An institution demonstrates that it makes available to students and the public fair, accurate and complete information in catalogs, student handbooks, and other publications that include, at a minimum, information about the institution's calendar, grading, admissions, academic program requirements, tuition and fees, and refund policies.

Information About Student Achievement

An institution's information for students and the public shall include information regarding student achievement. This information shall include student retention rates, completion rates or other information appropriate for the mission of the institution and its goals for students.

Advertising and Recruiting Materials and Other Public Information

An institution's public information including its advertising and recruiting materials shall evidence the same fairness and accuracy HLC expects in an institution's catalog and other documents for students.

Disclosure of Accreditation Status

If the institution chooses to reference its accreditation status in advertising and recruiting materials or other document or location, such as its website, that disclosure will accurately explain its status with HLC and the academic programs, locations and other institutional activities included in its accreditation. This obligation includes accurately disclosing when an action affecting its accreditation status has been taken by any other institutional or programmatic accrediting body. Institutions under HLC sanction shall comply with additional disclosure requirements pertaining to the applicable sanction as described elsewhere in these policies and as required by HLC's Board of Trustees.

The institution will accompany any reference to accreditation status with information on how to contact HLC. It shall provide HLC's address and telephone number, or it may use HLC's website address in lieu of this information. Electronic materials shall use HLC's collective membership mark. HLC reserves the right to issue

a public statement or Public Disclosure Notice (PDN) correcting any incorrect or misleading information HLC determines that an institution has publicized about its accreditation status, recent actions by HLC or other information.

Public Opportunity to Comment

HLC shall seek comment from third parties about institutions being evaluated through a comprehensive evaluation.

Policy Number Key

Section FDCR: Policies Required by Federal Regulation

Chapter A: Federal Compliance

Part 10: General

Last Revised: November 2020

First Adopted: August 1990, February 1996, and June 2012

Revision History: Adopted August 1990, revised August 1996, effective September 1996, renumbered February 2010, revised and renumbered June 2012, October 2014; revised June 2019, effective September 1, 2019; revised November 2020

Notes: Policies combined November 2012 – 4.0(f), 4.0(g), 4.0(j). In February 2021, references to the Higher Learning Commission as “the Commission” were replaced with the term “HLC.”

Related Policies:



Policy Title: Review of Student Outcome Data

Number: FDCR.A.10.080

An institution shall demonstrate that, wherever applicable to its programs, its consideration of outcome data in evaluating the success of its students and its programs includes course completion, job placement, and licensing examination information.

Policy Number Key

Section FDCR: Policies Required by Federal Regulation

Chapter A: Federal Compliance

Part 10: General

Last Revised:

First Adopted: June 2012

Revision History:

Notes: Former policy number 4.0(h). In February 2021, references to the Higher Learning Commission as “the Commission” were replaced with the term “HLC.”

Related Policies:



Policy Title: Standing With State and Other Accrediting Agencies

Number: FDCR.A.10.090

An institution has a responsibility to remain in good standing with each state in which it is authorized or licensed as well as with any other institutional or programmatic accrediting agency recognized by the U.S. Department of Education by which it is accredited or pre-accredited up to the point that it voluntarily withdraws from such relationships. An institution shall fairly represent to HLC and to the public its history or current or previous status with other institutional or programmatic accrediting bodies and with each state in which it is authorized or licensed. This obligation includes accurately disclosing when an action affecting its accreditation status has been taken by any other institutional or programmatic accrediting bodies.

An institution shall disclose to HLC any pending or final state actions that affect the institution's legal status or authority to grant degrees or offer programs and any pending or final actions by an accrediting agency to withdraw accredited or pre-accredited status, impose a sanction or deny an application for such status. Such disclosure shall take place at the time of the action by the other entity and on HLC's Institutional Update as well as in preparation for a comprehensive evaluation by HLC.

HLC Review. If another such accrediting agency or if a state has taken any of these actions, HLC will undertake a prompt review of the institution and the related action.

With regard to an applying institution, HLC, through its decision-making processes and subject to the limitations in the Eligibility Requirements, will carefully weigh these matters in reaching its own decision to grant candidacy or accreditation. If it chooses to grant candidacy or accreditation to such an institution, it will provide the Secretary of Education a written explanation of why that action is appropriate within thirty days of taking the action.

With regard to an accredited institution, HLC will determine whether additional review or HLC action, including sanction or withdrawal of accreditation, is appropriate. HLC may undertake its review in any way provided for in HLC policy.

Policy Number Key

Section FDCR: Policies Required by Federal Regulation

Chapter A: Federal Compliance

Part 10: General

Last Revised: June 2019

First Adopted: January 1983

Revision History: Policy 9.1 (Adopted January 1983, revised February 1996, effective June 1996, revised February 1998, revised June 2008); Policy 9.2 (Adopted February 1986, revised February 1996, effective July 1996, revised June 2001, revised June 2008); Policy 9.3 (Adopted February 1988, revised February 1996, revised February 1998); Policy 9.4 (Adopted February 1998, revised June 2008); combined, revised, and renumbered June 2012; revised June 2019, effective September 1, 2019

Notes: Former policy number 4.0(i). In February 2021, references to the Higher Learning Commission as “the Commission” were replaced with the term “HLC.”

Related Policies: CRRT.B.10.010 Criteria for Accreditation (Core Component 2.B)



Policy Title: Fraud and Abuse

Number: FDCR.A.20.010

An institution shall not engage in fraud and abuse, as outlined in state and federal law and regulation, or in practices or procedures that are designed or have the tendency to create a falsification or deceive students. If HLC receives an allegation of fraud and abuse concerning an institution from the federal government, any state entity or other party, HLC will determine whether the alleged fraud and abuse constitutes a violation of the Criteria for Accreditation, particularly related to institutional integrity. In considering any allegation of fraud and abuse, HLC may consider the nature of the allegation, whether the alleged fraud and abuse appears to meet HLC’s understanding of fraud and abuse as outlined in this policy or in federal or state definitions of fraud and abuse, and whether the source of the allegation has provided any evidence of such fraud and abuse. HLC will review such allegations through its complaint process or through other mechanisms provided for in HLC policy and practice. An institution that has been determined through those processes to have engaged in fraud and abuse as outlined in this policy shall be considered to be in violation of HLC standards related to institutional integrity and may be found to be in violation of other HLC standards as well, and shall be subject to HLC sanctions or withdrawal of accreditation as outlined in those policies.

HLC shall report suspected incidents of fraud and abuse to the U.S. Department of Education as outlined in its policy on the Relation with the U.S. Government.

Policy Number Key

Section FDCR: Policies Required by Federal Regulation

Chapter A: Federal Compliance

Part 20: Fraud and Abuse

Last Revised: February 2017

First Adopted: February 2017

Revision History: Adopted February 2017

Notes: In February 2021, references to the Higher Learning Commission as “the Commission” were replaced with the term “HLC.”



Policy Title: HLC Approval of Institutional Teach-Out Arrangements

Number: FDCR.B.10.010

HLC approval of various aspects of an institution's teach-out arrangements shall be required when an institution must teach-out one or more students.

Institutional Situations Requiring Submission of Provisional Plans for Approval

An institution shall be required to submit a written Provisional Plan in any of the following circumstances:

1. the U.S. Department of Education notifies HLC of an emergency action, or a limitation, suspension or termination or similar action against the institution;
2. the U.S. Department of Education notifies HLC of a determination by a non-profit or proprietary institution's independent auditor expressing doubt regarding the institution's ability to operate as a going concern or indicating an adverse opinion or a finding of material weakness related to such institution's financial stability;
3. the U.S. Department of Education notifies HLC that the institution is participating in Title IV, HEA programs under a provisional program participation agreement and is required to have a teach-out plan as a condition of participation;
4. the U.S. Department of Education notifies HLC that it has placed the institution on the reimbursement payment method or heightened cash monitoring payment method under federal regulations;
5. HLC grants candidacy to an institution or places an institution on Probation or issues a Show-Cause Order or acts to withdraw, terminate or suspend the status of an institution;
6. the institution notifies HLC that it intends to cease or suspend operations entirely or permanently close an additional location where it offers at least 100% of either a Certificate or degree program before all students have completed their program of study, including if the additional location is being moved and is considered by the U.S. Department of Education to be a closed institution;

7. a state licensing or authorizing agency notifies HLC that an institution's license or legal authorization to provide an educational program in that state has been or will be revoked;
8. HLC staff determines in its sole discretion that closure or suspension of one or more academic programs at an institution raises concerns about the well-being of students in these programs; or
9. HLC staff determines that the institution is at risk for a sudden closure or suspension of its operations because it is in financial distress, under governmental investigation, undergoing Change of Control, Structure or Organization, or facing other significant challenges.

Without limitation, an institution is required to immediately contact HLC through its HLC staff liaison if it anticipates any of the above occurrences or any other circumstance that will jeopardize currently enrolled students' ability to complete their programs of study as originally anticipated.

HLC Requirements for Provisional Plans

The institution shall submit the Provisional Plan to HLC for approval; the plan must meet the following minimum requirements:

1. The Provisional Plan provides for equitable treatment of students by ensuring that they are able to complete the educational program in which they were enrolled immediately prior to the situation requiring submission of a Provisional Plan within a reasonable period of time;
2. The Provisional Plan provides for prompt notification of additional costs to students, if any;
3. The Provisional Plan contains:
 - a. A complete list of currently enrolled students (redacting personally identifiable information) in each affected program at the institution, and the program requirements each student has completed;
 - b. A complete list of the academic programs offered by the institution, and the names of other institutions that offer similar programs that could potentially enter into a Teach-Out Agreement with the institution;
 - c. A communication plan that provides all potentially eligible students with information about how to obtain a closed school discharge and, if applicable, information on state refund policies;
 - d. A record retention plan to be provided to all enrolled students that delineates the final disposition of teach out records (e.g., student transcripts, billing, financial aid records);

- e. Information on the number and types of credits any teach-out receiving institution is willing to accept prior to the student's enrollment; and
- f. A clear statement to students of the tuition and fees of the educational program and the number of types of credits that will be accepted by each teach-out receiving institution.

Institutions preparing Provisional Plans are required to ensure that they comply with HLC's Teach-Out Requirements prior to submitting them for approval.

Note: If a closing institution plans to teach-out its own students, the period for teach-out shall typically not exceed 12–18 months, particularly in cases where there are other institutions in the area that offer similar programs available to students of the closing institution, unless the closing institution can assure HLC that the closing institution continues to meet all of the Criteria for Accreditation during the extended teach-out period.

HLC Requirements for Teach-Out Agreement

HLC may require that the institution required to submit a Provisional Plan under this policy submit one or more Teach-Out Agreements for HLC's review and approval in conjunction with such Provisional Plan if the institution must rely on the assistance of one or more institutions (each a teach-out receiving institution) to complete the Provisional Plan. A teach-out receiving institution must be accredited by an agency recognized by the U.S. Department of Education and, where appropriate, eligible for Title IV financial aid. The teach-out receiving institution must also: be approved by an appropriate state higher education and accrediting agency to offer the programs offered by the institution closing or suspending operations; have the necessary experience, resources and support services to provide an educational program that is of acceptable quality and reasonably similar in content, structure and scheduling to that provided by the institution closing or ceasing operations; demonstrate that it can provide students access to such programs and services without requiring them to move or travel substantial distances and; be stable, carrying out its mission and meeting all obligations to its existing students.

A Teach-Out Agreement must meet the following minimum requirements:

1. The Teach-Out Agreement contains an affirmation that it is consistent with all applicable state and federal regulations;
2. The Teach-Out Agreement is fair and equitable to students and provides students with reasonable opportunities to complete their education without additional charges and includes a notification provision to ensure that students have complete information about the tuition and fees of the teach-out receiving institution;

3. The Teach-Out Agreement must include a live link to a downloadable copy of the applicable Provisional Plan and a commitment from a teach-out receiving institution to be familiar with the requirements of the Provisional Plan;
4. The Teach-Out Agreement must contemplate (a) a firm commitment to a specific list of students who are currently enrolled in one or more programs at the institution requiring the teach-out receiving institution's assistance and (b) the program requirements such students have completed;
5. The Teach-Out Agreement must include a plan to provide all potentially eligible students with information about how to obtain a closed school discharge and, if applicable, information on state refund policies;
6. The Teach-Out Agreement must include information on the number and types of credits the teach-out receiving institution is willing to accept prior to each student's enrollment;
7. The Teach-Out Agreement must make a clear statement to students of the tuition and fees of the educational program and the number and types of credits that will be accepted by the teach-out receiving institution.

Approval of Teach-Out Receiving Institutions Accredited by HLC

Any institution accredited and in good standing with HLC that enters into a Teach-Out Agreement with another institution, regardless of whether the latter institution has presented a Provisional Plan to HLC or is accredited by HLC, shall notify HLC of its intended participation in the teach-out prior to its implementation so that HLC may determine whether the accredited institution has the capacity to undertake its responsibilities under the teach-out, is not on sanction with HLC, and has already in place the necessary approvals from HLC and other entities to offer the necessary programs. For the avoidance of doubt, only the institution required to submit a Provisional Plan for approval under this policy is responsible for submitting any applicable Teach-Out Agreement.

HLC staff shall review and may act to approve additional teach-out receiving institutions' participation in a teach-out arrangement, or the participation of an HLC member in a teach-out arrangement required by a non-HLC institution. An institution affected by circumstances that would require it to submit a Provisional Plan under this policy or that is under investigation, or being prosecuted for an issue related to academic quality, misrepresentation, fraud, or other severe matters by a law enforcement agency is not eligible to serve as a teach-out receiving institution. HLC also reserves the right to disqualify any potential teach-out receiving institution based on other risk factors it identifies.

HLC Approvals Related to Teach-Out

Where HLC is approving a teach-out plan for an academic program or where HLC is approving an institution's participation as a teach-out receiving institution, staff may act to review and provide approval; all other necessary approvals related to teach-out shall be provided by a decision-making body of HLC recognized by the U.S. Department of Education. If HLC approves a Provisional Plan or Teach-Out Agreement that includes a program accredited by a specialized or professional accreditor, HLC shall notify that accreditor.

Institutional Closure Without Approved Provisional Plan or Teach-Out Agreement; Failure to Comply With Teach-Out Policy

In the event of an institutional closure without an approved Provisional Plan, HLC shall work with the U.S. Department of Education, the appropriate state agency, if any, and any applicable programmatic accreditor, in the event any member institution closes without a Provisional Plan approved by HLC, to the extent feasible, to assist students in finding reasonable opportunities to complete their education without additional charges.

An institution that does not close entirely, but that fails to comply with HLC Teach-out policy when otherwise required, may be subject to sanction for noncompliance with HLC requirements.

Policy Number Key

Section FDCR: Policies Required by Federal Regulation

Chapter B: Teach Out

Part 10: General

Last Revised: November 2020

First Adopted: June 2008

Revision History: revised February 2009, February 2010, November 2010, August 2016, June 2017, June 2020, November 2020

Notes: Policies combined November 2012: 3.9, 3.9(a), 3.9(b), 3.9(c), 3.9(d). In February 2021, references to the Higher Learning Commission as “the Commission” were replaced with the term “HLC.”

Related Policies:



SECTION 3: INSTITUTIONAL PROCESSES

Policy Title: Temporary Emergency Policy Related to COVID-19

Number: INST.COVID.10.010

Due to the exigent circumstances surrounding the novel coronavirus (COVID-19), the Higher Learning Commission (HLC) has adopted a temporary emergency policy designed to allow the agency to implement, when appropriate, certain flexibilities afforded the President by the HLC Board of Trustees as well as flexibilities permitted based on significant documents issued by the U.S. Department of Education related to COVID-19, including, for example, the *Guidance for Interruptions of Study Related to Coronavirus (COVID-19)* issued on March 5, 2020 and as periodically updated (“USDE March 5 Guidance”), and *Information for Accrediting Agencies Regarding Temporary Flexibilities Provided to Coronavirus Impacted Institutions or Accrediting Agencies* issued on March 17, 2020 and as periodically updated (“USDE March 17 Guidance”). As further provided by the U.S. Department of Education on May 15, 2020, HLC extends the effective period articulated in such documents through December 31, 2020, with the limitations provided in this policy.

Distance Education Waivers

As authorized by the USDE March 5 Guidance, HLC may temporarily allow institutions to initiate or expand distance education beyond the extent of their current approvals, solely to accommodate interruptions in study related to COVID-19. Institutions must affirmatively seek a waiver from HLC for this purpose, which is granted at HLC’s discretion. Waivers will be made available to institutions regardless of their status as an accredited institution or a candidate.

Institutions are required to follow HLC’s process for seeking such waiver as communicated by HLC. Institutions are also required to notify HLC in a timely fashion of any decision to resume on-ground instruction or operations. All waivers are granted for a specified time period. If required by HLC, institutions must provide HLC with ongoing updates to ensure any waiver of distance education approvals remains effective for the time period required. Once the public health emergency is no longer present, institutions are required, no later than the end of the applicable academic term, to operate within the distance education stipulations that were in effect immediately preceding the issuance of the waiver. Institutions

must continue to meet all HLC's expectations related to the conduct of distance education, including requirements for regular and substantive interaction between faculty and students. The decision to revoke a distance education waiver at any time remains solely within HLC's discretion.

Virtual Visits

As authorized by the USDE March 17 Guidance, HLC may temporarily conduct virtual visits in accordance with the Department's requirements. HLC will determine in its sole discretion on a case-by-case basis whether it is appropriate to conduct a virtual visit for an institutional evaluation that would otherwise be conducted on-site. Each virtual visit will include interaction with representatives of the institution under review and in all other respects, to the extent reasonably practicable, resemble the format, expectations, and documentation requirements associated with on-site visits. An on-site follow-up visit will occur within a reasonable period following each virtual visit. Decision-making will occur in accordance with guidance from the U.S. Department of Education related to such virtual visits, and/or follow-up visits, as required.

Extensions for Good Cause

In accordance with the USDE March 17 Guidance, HLC may extend, for good cause, an institution's reaffirmation beyond the maximum allowable timeframes currently provided for in standard HLC policies. Likewise, HLC may extend, for good cause, an institution's sanction or show-cause order beyond the maximum allowable timeframes currently provided for in standard HLC policies, including for any previous good cause extensions. The decision to extend any institution's reaffirmation, sanction, or show-cause order beyond the maximum allowable timeframe remains solely within HLC discretion.

Modification of Monitoring

Consistent with broad authority granted to the President of HLC on March 13 to take such precautionary emergency measures with respect to accreditation activities, evaluation procedures, and other operations as may be needed on a temporary basis to reduce the risk of community transmission of COVID-19, HLC may modify any evaluations, through postponements or the use of virtual visits with onsite verification. Specifically, HLC may postpone visits, reports or other evaluations that were scheduled to occur during a period affected by COVID-19 interruptions. Postponements may occur for a reasonable period until the public health risk is no longer present. Other modifications may include the use of a virtual visit with onsite follow-up visit within a reasonable period to satisfy the requirements of an Advisory Visit.

Effective Date of Board Actions

When the HLC Board's actions are delayed by circumstances related to COVID-19, the HLC Board shall make determinations as to an appropriate effective date for any action it takes that changes an institution's

accreditation status. When making this determination, the Board shall take into account circumstances such as the impact on graduating students. For example, the Board may determine that the effective date of any action granting initial accreditation shall be deemed to be a graduation date that preceded the Board's action by more than 30 days, as typically provided for in HLC policy, so long as the effective date does not predate the Board's action granting such institution candidacy or any previous Board action denying initial accreditation to such institution.

Conflicts With Other Policies

Other than as stated in this temporary emergency policy, all other HLC policies will apply. Where any pre-existing HLC policy conflicts with this temporary emergency policy, this policy will supersede pre-existing policy. HLC reserves the right to modify its procedures on a temporary basis in a manner intended to align with this policy and to implement any guidance, whether current and future, related to COVID-19 as provided by the U.S. Department of Education. HLC shall communicate such modifications to institutions in a timely manner.

Applicability; Periodic Updates; Duration

This policy shall not be construed to apply to any other emergency situation (natural disasters, other epidemics, war, acts of God etc.) and is exclusively related to COVID-19. Should HLC seek to adopt a permanent policy related to emergency situations, it will adhere to regulatory requirements related to the approval and publication of proposed policies on first reading and, following a period of public comment by the membership, adoption on second reading. This policy may be updated from time to time related to ongoing guidance or additional requirements by the U.S. Department of Education. To the extent permissible, such updates shall also be adopted on single reading. As warranted by the progress of the COVID-19 pandemic, HLC reserves the right to extend the flexibilities available in this policy pending confirmation from the U.S. Department of Education.

Repeal

The HLC President is authorized to repeal this policy without further action by the Board when circumstances warrant.

Policy Number Key

Section INST: Institutional Processes

Chapter COVID: Temporary Emergency Policy Related to COVID-19

Part 10: General

Last Revised: June 2020

First Adopted: March 2020

Revision History: June 2020

Notes: In February 2021, references to the Higher Learning Commission as “the Commission” were replaced with the term “HLC.”

Related Policies:



Policy Title: Determining Institutional Quality

Number: INST.A.10.010

HLC shall determine institutional quality using Criteria for Accreditation and Assumed Practices.

HLC's Board of Trustees shall grant institutions one of two statuses: accreditation or candidate for accreditation (candidacy) based on that determination.

Policy Number Key

Section INST: Institutional Processes

Chapter A: Implementation of HLC Criteria and Requirements

Part 10: General

Last Revised: February 2012

First Adopted: August 1992

Revision History: February 2011, February 2012, effective January 2013

Notes: Former policy number 1.1, 2013 – 1.1(a). In February 2021, references to the Higher Learning Commission as “the Commission” were replaced with the term “HLC.”

Related Policies:



Policy Title: Evaluative Framework for the HLC Criteria

Number: INST.A.10.020

An institution must be judged by HLC to have met each of the Criteria for Accreditation, the Core Components and the Federal Compliance Requirements to merit the grant of initial accreditation or the reaffirmation of accreditation.

In preparation for accreditation and reaffirmation of accreditation, an institution shall provide evidence through a self-study or self-evaluation process that it meets each of the Criteria and the Core Components. The distinctiveness of an institution's mission may condition the strategies it adopts and the evidence it provides that it meets each Core Component. The institution shall also provide evidence with regard to those sub-components of the Criteria that apply to the institution. An institution in its evidence or a team in its review may identify topics or issues related to a Core Component other than those specified in the sub-components to be included in evaluating the institution's meeting of the Core Component.

For institutions applying for initial accreditation the submission of evidence from the self-study or self-evaluation process constitutes the official application for accreditation. An institution applying for initial accreditation shall also demonstrate conformity with the Assumed Practices.

The judgment that the organization meets the Criteria for Accreditation and Core Components is based on detailed information about all parts of the institution. Such information may be acquired through evidence provided to HLC by the institution or acquired by HLC from other sources prior to, during, or subsequent to an evaluation process. This information will be confirmed in the written report of the visiting team or in other review documents identified by HLC as core elements of a process for reaffirmation of accreditation.

In the evaluation process, HLC will review the institution against the Criteria and Core Components according to the following evaluative framework.

Core Components. The institution meets the Core Component if:

- a. the Core Component is met without concerns, that is the institution meets or exceeds the expectations embodied in the Component, or to the extent opportunities for improvement exist, peer review or a decision-making body has determined that monitoring is not required; or

- b. the Core Component is met with concerns, that is the institution demonstrates the characteristics expected by the Component, but performance in relation to some aspect of the Component must be improved, and peer review or a decision-making body has determined that monitoring is required to assure that the institution ameliorates the concerns.

The institution does not meet the Core Component if the institution fails to meet the Component in its entirety or is so deficient in one or more aspects of the Component that the Component is judged not to be met.

Criteria for Accreditation. The institution meets the Criterion if:

- a. the Criterion is met without concerns, that is the institution meets or exceeds the expectations embodied in the Criterion, or to the extent opportunities for improvement exist, peer review or a decision-making body has determined that monitoring is not required; or
- b. the Criterion is met with concerns, that is the institution demonstrates the characteristics expected by the Criterion, but performance in relation to some Core Components of the Criterion must be improved, and peer review or a decision-making body has determined that monitoring is required to assure that the institution ameliorates the concerns.

The Criterion is not met if the institution fails to meet the Criterion in its entirety or is so deficient in one or more Core Components of the Criterion that the Criterion is judged not to be met.

The institution meets the Criterion only if all Core Components are met. The institution must be judged to meet all five Criteria for Accreditation to merit accreditation. For purposes of compliance with the Criteria for Accreditation, findings of “met” and “met with concerns” both constitute compliance.

HLC will grant or reaffirm accreditation (with or without conditions or sanctions), deny accreditation, or withdraw accreditation based on the outcome of this evaluation.

Policy Number Key

Section INST: Institutional Processes

Chapter A: Implementation of HLC Criteria and Requirements

Part 10: General

Last Revised: November 2018

First Adopted: February 2003

Revision History: February 2012 (effective January 2013), November 2018

Notes: Formerly policy number 1.1(a)2, 2013 – 1.1(a)1, 1.1(a)1.1. In February 2021, references to the Higher

Learning Commission as “the Commission” were replaced with the term “HLC.”

Related Policies: INST.F.10.010 Routine Monitoring and Data Collection



Policy Title: Institutional Conformity With HLC Requirements

Number: INST.A.10.030

When HLC discovers that an accredited or candidate institution is not following an Assumed Practice, HLC initiates a review, in accordance with its policy and procedure, to determine whether the institution remains in compliance with the Criteria for Accreditation. If the institution is found to be not meeting the Criteria, including any Core Component, HLC may proceed to act under any applicable policy.

HLC also requires that the institution take action to bring its practice into conformity with the Assumed Practices. An accredited institution that finds through its own processes that its practice is departing from the Assumed Practices should take immediate steps to correct the deficiency; it is not required to disclose its finding to HLC provided that it moves quickly to initiate a remedy.

HLC may also re-examine, as specified in HLC policies, any candidate or accredited institutions' ability to meet Eligibility Requirements.

Policy Number Key

Section INST: Institutional Processes

Chapter A: Implementation of HLC Criteria and Requirements

Part 10: General

Last Revised: November 2020

First Adopted: February 2003

Revision History: June 2006, June 2011, November 2020

Notes: Formerly policy number 1.1(c)1, 2013 – 1.1(d), 1.1(f). In February 2021, references to the Higher Learning Commission as “the Commission” were replaced with the term “HLC.”

Related Policies:



Policy Title: Jurisdiction

Number: INST.B.10.010

An institution applying for or holding accredited or candidate status with HLC shall demonstrate that it meets HLC's jurisdictional requirements, as established in the *Bylaws of the Higher Learning Commission*, related to (1) incorporation and (2) substantial presence.

Incorporation

An institution shall demonstrate that it is incorporated in one of the 19 states of the north central region or operating under federal authority in conjunction with an executive branch or independent federal agency or branch of the U.S. military. An institution applying for or holding accredited or candidate status with HLC shall demonstrate that its primary purpose is higher education.

(Note that an institution that was accredited by, or a candidate for accreditation with, HLC prior to July 1, 2010, may be incorporated outside the region provided that it is registered to do business in at least one of the 19 states of the north central region. A charter or other form of authorization from the state legislature shall constitute incorporation for public institutions for the purpose of this policy.)

Substantial Presence

An institution shall demonstrate that its operations are substantially in the 19-state north central region. An institution shall provide evidence that the majority of its educational administration and activity, business operations, and executive and administrative leadership are located or are operating within the North Central region. Institutions that have campuses or additional locations must demonstrate that at least one campus and one additional location (if the institution has additional locations) are located in the region. HLC shall make the decision regarding whether the institution is substantially in the region based on the preponderance of the evidence regarding the operations of the institution. HLC shall consider evidence presented by the institution as well as evidence available from public sources and from evaluations undertaken by HLC in making a judgment about the institution's presence in the region.

Establishing Substantial Presence

Institutions must establish that they meet the substantial presence requirement according to the implementation provisions established in HLC's Bylaws. The appropriate provisions derived from Article III, Section 4 are provided below for reference:

All institutions submitting Preliminary Information Forms or other documentation to establish eligibility for Commission evaluation on or after July 1, 2010, or having evaluation visits for initial candidacy or accreditation in 2010-11 or thereafter shall comply with jurisdictional requirements for incorporation and substantial presence in the region, as identified in Section 2 of this Article.

All institutions accredited by the Commission or a candidate for accreditation status on July 1, 2010, shall comply with substantial presence requirements no later than July 1, 2012, or at the time of evaluation for initial accreditation, whichever comes first. Institutions accredited by the Commission on July 1, 2010, shall be evaluated against this requirement at the time of the next comprehensive evaluation except where the Commission has information to indicate that an institution does not meet this requirement and initiates, subsequent to July 1, 2012, an inquiry to review jurisdiction. Institutions that become a candidate for accreditation or accredited after July 1, 2010, must demonstrate compliance with the substantial presence requirement at the time of the next comprehensive evaluation of the institution or prior to initial accreditation of the institution, whichever comes first.

All institutions accredited by the Commission or a candidate for accreditation status on July 1, 2010, shall be grandfathered from the requirement for incorporation in the region; such institutions known to be incorporated outside the region shall provide evidence of having registered within the region to do business as a corporation no later than July 1, 2011. Institutions that become accredited or a candidate for accreditation after July 1, 2010, must demonstrate compliance with the incorporation requirement at the time of the next comprehensive evaluation of the institution or prior to initial accreditation of the institution, whichever comes first.

Non-member institutions seeking status that are unable to demonstrate substantial presence to the satisfaction of HLC staff shall not proceed with the Eligibility Process. Institutions already holding status with HLC that are unable to demonstrate substantial presence shall be subject to potential further action for non-compliance with HLC requirements as outlined in HLC policy.

Institutions Accredited by Another Recognized Accreditor Seeking HLC Status

An institution accredited by another institutional accrediting agency recognized for Title IV federal gatekeeping purposes by the U.S. Department of Education that:

1. moves its home campus or main office or a component to HLC's region;

2. designates an existing campus or office as the main; or
3. initiates a new home campus or main office in HLC's region

for the purposes of establishing HLC jurisdiction to accredit the entire institution, including, if applicable, various components in other regions, may seek HLC status. It will seek status by establishing its eligibility for an HLC evaluation under the Eligibility Process. If the Eligibility Panel determines the institution is eligible for HLC review, it must host a comprehensive evaluation team and follow HLC policy and procedure for seeking initial status.

HLC will not consider for status any institution under sanction, show-cause, or withdrawal by another recognized institutional accrediting agency, or within two years of such status, or less than two years before the agency's next comprehensive evaluation of the institution. As a part of the Eligibility review, the institution must establish how it is resolving any issues identified for monitoring or further review by the other agency. During the time it is seeking status from HLC, it must remain in good standing with the other agency and meet all financial and accrediting obligations. It must work to keep both agencies properly informed and copy both agencies on all relevant correspondence.

Policy Number Key

Section INST: Institutional Processes

Chapter B: Requirements for Achieving and Maintaining Membership

Part 10: General

Last Revised: November 2020

First Adopted: November 2010 and June 2009

Revision History: June 2012, February 2019, November 2020

Notes: Policies combined November 2012 – 1.2, 1.2(a), 1.2(b), 1.2(c), 3.5. In February 2021, references to the Higher Learning Commission as “the Commission” were replaced with the term “HLC.”

Related Policies:



Policy Title: Components of Accredited or Candidate Institutions

Number: INST.B.10.020

Because HLC is recognized by the U.S. Department of Education as an institutional accreditor, the accreditation status HLC confers applies to an institution as a whole.

The accreditation status of an institution shall include the institution's main campus or administrative office located within HLC's region and all its components wherever located. Components of an institution shall include all branch campuses, additional locations, other instructional sites and any divisions offering distance education or correspondence education, regardless of where operating.

Characteristics of a Component That May Be Included in the Institution's Accredited or Candidate Status

An entity may be deemed a component of an institution if responsibility for the educational and operational activities of the component is clearly located at a main campus or administrative office that is central to the institution that holds accredited or candidate status with HLC.

The component may be included in the institution's status only if it has all of the following characteristics:

1. the main campus or administrative office has oversight over the finances, administration, and hiring, firing and retention of personnel at the component;
2. an administrator for the component reports to the chief executive officer of the accredited or candidate institution or system;
3. the main campus or system office provides meaningful oversight over the academic programs at the component;
4. degree-granting authority of the main campus or system office encompasses, where possible, the degree or program activity of the component;
5. public information about the institution, the component, and any corporate parent or structure is consistent with the characterization of the entity as a component of the accredited or candidate institution or system.

Characteristics of a Separately Accreditable Component

An existing component of an accredited institution may seek separate accreditation as an independent institution if it has the following characteristics:

1. it has been authorized, under board policy, to have substantial financial and administrative independence from the accredited institution including in matters related to its personnel;
2. it has a full time chief administrative officer;
3. it is empowered, under board policy, to initiate and sustain its own academic programs;
4. it has independent degree-granting authority in the state or jurisdiction in which it is located; and
5. public information about the institution, the component, and any corporate parent or structure is consistent with the characterization of the entity as a separately accreditable entity.

Processes for Including a Component Within the Accreditation Status of the Institution

At the time the institution files an Eligibility Filing, HLC will review the status of all components of the institution to determine whether the institution seeking accreditation constitutes a single institution or a system for the purpose of accreditation.

An accredited or candidate institution developing a new component(s) (for example, a law school or other component offering new academic programs) must file a change request under HLC policy INST.F.20.040 Substantive Change. As a part of the review under HLC policy, HLC will review the appropriateness of inclusion of the proposed component in the accreditation of the institution using the characteristics cited above.

An accredited or candidate institution seeking to have an existing entity that is not currently included as a component in the institution's status deemed a component of the institution must request approval under HLC's policy regarding Change of Control, Structure or Organization.

Process for HLC Consideration of Separate Status for a Component. A component of an institution holding status with HLC that is seeking separate status must establish that it meets the separately accreditable characteristics outlined in HLC policy and must demonstrate that it meets the Eligibility Requirements through HLC's Eligibility Process. If the Eligibility Panel determines that the component is separately accreditable and appears to meet the Eligibility Requirements, HLC will set a visit for candidacy for the component.

Components of Institutions Holding Status With Accreditors Other Than HLC. A component of an institution holding status with an institutional accreditor other than HLC that wishes to seek accreditation with HLC must demonstrate that it is able to function independent of any operational control of the related college or

university. A component will be deemed operationally independent and accreditable when it demonstrates the characteristics listed in INST.B.10.020.

A component identified as separately accreditable will continue to be included in the accreditation of the related college or university until it achieves HLC accreditation.

Policy Number Key

Section INST: Institutional Processes

Chapter B: Requirements for Achieving and Maintaining Membership

Part 10: General

Last Revised: November 2020

First Adopted: January 1983, June 2000

Revision History: June 2000, revised June 2009, November 2020

Notes: Former Policy number: 3.4(b). Also combined with the following policies November 2012: 3.4, 3.4(a). In February 2021, references to the Higher Learning Commission as “the Commission” were replaced with the term “HLC.”

Related Policies:



Policy Title: Related Entities

Number: INST.B.10.030

HLC will review and hold only the accredited or candidate institution responsible for fulfilling HLC's Criteria for Accreditation. However, where some aspects of institutional decision-making are controlled by a non-accredited related entity including a corporate parent, system administration or board, religious sponsor, funding sponsor (which, in some cases, may include an equity or investment fund), or other entity, the institution shall be responsible to HLC for presenting, explaining, and evaluating all significant situations involving such related entities that may affect its compliance with accreditation requirements. HLC will consider that an entity that has 50 percent or more ownership interest in the accredited entity or has 50 percent or more voting interest in the accredited entity's board constitutes a related entity.

The institution shall exercise this reporting obligation following HLC instructions at the time it initiates the Eligibility Process, applies for candidacy or initial accreditation, or files a self-study or other document prior to reaffirmation of accreditation. The institution will also exercise this reporting obligation when it informs HLC, through HLC's change process, of any change in ownership or other changes as outlined in HLC policy on Substantive Change: INST.F.20.040.

HLC may, at any time, request information about a situation that the institution may not have disclosed.

Policy Number Key

Section *INST: Institutional Processes*

Chapter *B: Requirements for Achieving and Maintaining Membership*

Part *10: General*

Last Revised: June 2020

First Adopted: November 2007

Revision History: June 2020

Notes: Former policy number 3.7. In February 2021, references to the Higher Learning Commission as "the Commission" were replaced with the term "HLC."

Related Policies:



Policy Title: Eligibility

Number: INST.B.20.010

Institutions will establish eligibility for an HLC on-site evaluation for candidate status by completing HLC's Eligibility Process and by receiving a determination at the conclusion of that process that the institution is ready to schedule and prepare for a visit. An institution seeking an HLC on-site evaluation for candidate status shall provide sufficient evidence in writing that it meets the Eligibility Requirements. The determination that an institution meets the Eligibility Requirements will take place during the comprehensive evaluation for Candidacy.

An institution may claim no official status with HLC prior to being granted candidate status.

Eligibility Process

The Eligibility Process provides for HLC staff consultation and for review by Eligibility Reviewers to determine the institution's readiness for a comprehensive evaluation for Candidacy. Eligibility Reviewers review the written evidence put forward by an institution that it meets the Eligibility Requirements and determine whether the institution has provided sufficient evidence to proceed with a comprehensive evaluation for Candidacy.

An organization that does not receive a recommendation to proceed with an HLC visit can petition the Board of Trustees for a review if it can provide evidence that the decision of the Eligibility Reviewers was arbitrary or capricious or was not supported by substantial evidence in the record on which the Reviewers made their decision or that HLC staff or Eligibility Reviewers departed from established procedures during the review.

Fees will be charged and published in a schedule of fees for the Eligibility Process.

Eligibility Reviewers

The Board of Trustees will choose peer reviewers to serve as a reviewer of the Eligibility process. These reviewers will fill renewable four-year terms.

Policy Number Key

Section INST: Institutional Processes

Chapter B: Requirements for Achieving and Maintaining Membership

Part 20: Becoming and Defining a Member Institution

Last Revised: November 2020

First Adopted: November 1998

Revision History: February 2003, effective May 2003; revised February 2007; renumbered November 2010; revised June 2019, November 2020

Notes: Policies combined November 2012 – 1.8, 1.8(a), 1.8(b), 1.8(c). In February 2021, references to the Higher Learning Commission as “the Commission” were replaced with the term “HLC.”

Related Policies: INST.B.20.020 Candidacy and Initial Accreditation



Policy Title: Candidacy and Initial Accreditation

Number: INST.B.20.020

Every institution seeking accredited status with HLC shall apply for and serve a period of candidacy. Such candidacy shall typically be for four years from the date action is taken to grant candidacy to the date action is taken to grant or deny accreditation, with a minimum period in candidacy of at least two years (2 years), and not to exceed five years (5 years).

In exceptional circumstances, the Board may in its discretion waive the required candidacy period. Such waiver will be based upon evidence that the institution meets all HLC requirements, but such evidence shall not obligate the granting of a waiver of the candidacy period.

Grant of Candidacy

The Board of Trustees will review an institution's application for candidacy and all related materials after the institution has undergone a comprehensive evaluation, as detailed below, and an Institutional Actions Council hearing. The Board of Trustees may grant or deny candidacy.

Evaluative Framework for Achieving and Maintaining Candidacy

The requirements for granting and maintaining candidacy are as follows:

1. the institution meets each of the Eligibility Requirements;
2. the institution meets each of the Assumed Practices;
3. the institution demonstrates that the Criteria for Accreditation can reasonably be met within four years of candidacy; and
4. the institution meets the Federal Compliance Requirements.

Grant of Initial Accreditation

The Board of Trustees will review an institution's application for initial accreditation and all related materials after the institution has undergone a comprehensive evaluation, as detailed below. The Board of Trustees may grant or deny initial accreditation. If the Board of Trustees grants initial accreditation, it may grant such

accreditation subject to interim monitoring, restrictions on institutional growth or substantive change, or other contingency.

Early Initial Accreditation

An institution may request a review for early initial accreditation after two or three years of candidacy. The Board of Trustees shall have the discretion to continue candidacy, instead of granting early initial accreditation, in circumstances including, but not limited to, the following: if the Board determines that one or more of the Core Components are not met or met with concerns (and thus recommendation for early initial accreditation would be conditioned on the imposition of a sanction or the scheduling of interim monitoring); or in other circumstances where the Board concludes that a continuation of candidacy is warranted.

The institution will be limited to one review for early initial accreditation during the term of candidacy.

Evaluative Framework for Achieving Initial Accreditation

The requirements for granting initial accreditation are as follows:

1. The institution meets each of the Eligibility Requirements.
2. The institution meets each of the Assumed Practices.
3. The institution meets the Criteria for Accreditation. In order to successfully complete a review for early initial accreditation, an institution must meet the Criteria for Accreditation with no findings of Met with Concerns.
4. The institution meets the Federal Compliance Requirements.

Extension of Candidacy

In exceptional circumstances, the Board of Trustees may extend candidacy to a fifth year.

Actions to continue candidacy, thereby denying early initial accreditation, or to extend candidacy to a fifth year, thereby denying initial accreditation, are not adverse actions and thus are not subject to appeal.

Evaluations Related to Granting Candidacy and Initial Accreditation

Candidacy will be initiated through a comprehensive on-site evaluation and maintained through a subsequent on-site biennial evaluation no later than two years (2 years) after candidacy is granted to determine whether the institution continues to meet the Eligibility Requirements and Assumed Practices, and is making reasonable progress towards meeting the Criteria for Accreditation by the end of the candidacy period. Following the biennial evaluation, the institution will have its comprehensive evaluation

for initial accreditation during the fourth year of candidacy in sufficient time for the Board to consider the outcome prior to the conclusion of the fourth year of candidacy. If, as a result of the initial accreditation visit, the Board acts to extend the institution's candidacy for a fifth year, the institution will undergo a new comprehensive evaluation for initial accreditation during the fifth candidacy year in sufficient time for the Board to consider the outcome of the evaluation prior to the conclusion of the fifth candidacy year.

An institution applying for candidacy or initial accreditation shall undergo a comprehensive evaluation by HLC composed of the following elements:

- Assurance Filing;
- Assurance Review;
 - analysis of the Assurance Filing and of information from any on-site visit by HLC peer reviewers culminating in a written report;
 - an on-site visit by a team of HLC peer reviewers.

Assurance Filing. An institution hosting a comprehensive evaluation for candidacy or initial accreditation shall submit the following:

1. evidence of meeting the Eligibility Requirements;
2. evidence of meeting the Assumed Practices;
3. for candidacy, evidence that the institution can reasonably meet the Criteria for Accreditation within the period of candidacy;
4. for initial accreditation, evidence that the institution meets the Criteria for Accreditation, which may include findings of met with concerns;
5. evidence of meeting the Federal Compliance Requirements;
6. branch campus evaluation information, if applicable; and
7. any addenda requested by the team during the evaluation process.

In addition, HLC shall supply information including but not limited to the Eligibility Process analysis, official correspondence, public comments, previous evaluation team reports and action letters, if any, information from the institution's accreditation file with other recognized accrediting agencies, and any other information HLC deems appropriate.

Assurance Review. A team of peer reviewers, selected by HLC staff following HLC procedures, shall review an institution's Assurance Filing and related materials. The team shall then conduct an on-site visit to the institution's main campus, its branch campuses, and such other institutional locations as shall be determined

by HLC based on its policies and procedures and to verify where appropriate evidence provided by the institution; for institutions that offer only distance or correspondence education, the team shall conduct its on-site visit to the institution's administrative offices but may include other institutional locations. The length of the visit shall be one and a half days, but HLC shall retain discretion to lengthen or shorten the visit or require that team members conduct additional on-site visits to the institution's facilities to examine specific issues.

Analysis and Written Report. HLC peer reviewers shall conduct an analysis of the information generated by the Assurance Review and shall prepare a detailed written report that outlines the team's findings related to the institution's meeting either the requirements for initial accreditation or for candidacy, including but not limited to, requirements related to assessment of student learning. The report shall identify strengths and challenges or deficiencies for the institution, and shall make a recommendation related to granting initial accreditation or granting candidacy.

Recommendations Arising from Evaluations for Candidacy or Initial Accreditation. The team of HLC peer reviewers conducting a comprehensive evaluation for candidacy or initial accreditation shall in its written report make a recommendation for HLC action to complete the review. That recommendation shall be as follows:

For candidacy, the team shall recommend whether to grant or deny candidacy based on the requirements and evaluative framework detailed in this policy. The team shall not recommend monitoring but may identify discrete issues to be addressed by the institution by the time of its biennial evaluation.

For initial accreditation, the team shall recommend whether to grant or deny initial accreditation. If recommending that the Board grant initial accreditation, other than early initial accreditation, the team may recommend whether to require interim monitoring. If recommending that the Board deny accreditation, the team will also recommend whether to extend candidacy if the institution continues to meet the requirements, and is within the time limits, for candidacy or to withdraw candidacy if the institution does not meet the requirements for candidacy.

These recommendations, along with the team's written report, shall be forwarded to the Institutional Actions Council and then the Board of Trustees for review and action.

The institution shall have the opportunity to provide a written response to the written report of a comprehensive evaluation following HLC policies for the provision of institutional responses.

Biennial Visit

An institution in candidacy shall host an on-site evaluation after the first two years of candidacy. In preparation for the visit the institution and HLC shall provide information to update the Assurance Filing assembled at the time the institution was evaluated for candidacy.

On-site Visit. A team of peer reviewers, selected by HLC staff following HLC procedures, shall review the updated Assurance Filing and related materials and shall then conduct an on-site visit to the institution's main campus or, for institutions that offer only distance or correspondence education, its administrative offices, and such other institutional locations as shall be determined by HLC based on its policies and procedures. The length of the visit shall be one and a half days, but HLC shall retain discretion to lengthen or shorten the visit or require that team members conduct additional on-site visits to the institution's facilities to examine specific issues.

Report and Recommendation from a Biennial Visit. The team shall prepare a written report that outlines the team's findings related to the institution's progress in completing its candidacy plan and meeting the Criteria for Accreditation within the four years of candidacy. If the institution is not making reasonable progress or there is evidence that the institution does not meet the Eligibility Requirements or Assumed Practices, the team shall recommend withdrawal of candidacy. The report and recommendation shall be forwarded to an HLC decision-making body for review and action.

The institution shall have the opportunity to provide a written response to the written report of a biennial visit following HLC policies for the provision of institutional responses.

Withdrawal of Application for Candidacy

An institution may withdraw its application for candidacy at any time prior to a decision on that application by the Board of Trustees. The legally designated governing body of the institution must approve the withdrawal. If an institution that has withdrawn its application for candidacy seeks status again with HLC at a later time, it must wait at least one year from its withdrawal and then begin with the Eligibility Process. HLC records of this application and its evaluation, and any other HLC records related to the institution, shall be available to HLC staff and peer reviewers evaluating the institution in all subsequent reviews.

Withdrawal of Application for Initial Accreditation

An institution may withdraw its application for initial accreditation at any time prior to a decision on that application by the Board of Trustees. The legally designated governing body of the institution must approve the withdrawal.

If an institution is nine months or fewer from the end of its four-year term of candidacy when it withdraws its application, such withdrawal shall also constitute voluntary withdrawal from candidacy status with HLC. If an institution that has withdrawn its application for initial accreditation in these circumstances seeks HLC status at a later time, it must wait at least one year from its withdrawal and seek candidacy by initiating the Eligibility Process.

If an institution is more than nine months from the end of its four-year term of candidacy when it withdraws its application for initial accreditation, it may request continued candidacy instead. If it withdraws its application before or during the initial accreditation visit, after receiving the team report, or after receiving a recommendation from the Institutional Actions Council Hearing, and the team or Hearing Committee raised no issues that call into question the institution's compliance with the requirements of the candidacy program, the institution may continue in its original four-year candidacy subject to action for continued candidacy by the Institutional Actions Council. If either the team or the Hearing Committee raised issues related to the institution's compliance with the requirements of the candidacy program, HLC's Board of Trustees must take action regarding the continued candidacy of the institution.

HLC records of this application and its evaluation, and any other HLC records related to the institution, shall be available to HLC staff and peer reviewers evaluating the institution in all subsequent reviews.

Policy Number Key

Section INST: Institutional Processes

Chapter B: Requirements for Achieving and Maintaining Membership

Part 20: Becoming and Defining a Member Institution

Last Revised: February 2021

First Adopted: August 1992 and August 1987

Revision History: revised August 1996, effective September 1996; revised February 1998; revised Criteria for Candidacy adopted February 2003, effective May 1, 2003; revised February 2007; revised February 2010; revised June 2011; revised February 2012, effective January 2013; revised November 2013; revised November 2020, February 2021

Notes: Policies combined November 2012 – 1.1(a), 1.1(b), 1.1(b)1, 1.1(b)2, 1.4, 2013 – 1.1(b)1.3, 1.1(c), 1.1(c)1. In February 2021, references to the Higher Learning Commission as “the Commission” were replaced with the term “HLC.”

Related Policies: INST.G.10.020 Official Records.



Policy Title: Effective Date of Accreditation Actions

Number: INST.B.20.030

The effective date of any accreditation action will be the date the action was taken unless otherwise stated in these policies or other HLC requirements.

HLC's Board may grant initial accreditation, with the contingency noted in this subsection, to an institution that applies for accreditation and is determined by HLC to have met the Criteria for Accreditation but has not yet graduated a class of students in at least one of its degree programs, as required by the Eligibility Requirements. Institutions shall have completed the two-year required minimum candidacy period or received a waiver from HLC's Board of Trustees. Such action shall be contingent on the institution's graduation of its first graduating class in at least one of its degree programs within no more than thirty (30) days of the Board's action. In such cases, the effective date of accreditation will be the date of this graduating class.

If HLC's Board takes an adverse action as defined under these policies, the Board shall establish the effective date of such action to be no earlier than the date on which any appeal by the institution is determined to be unsuccessful or, in the event the institution does not appeal, immediately after a conferral of degrees subsequent to the academic term during which the Board takes the adverse action. In establishing the effective date, the Board may also take into account a reasonable period for teach-out as allowed by federal regulations. The Board will take into account any potentially negative impact on current student enrollment prior to determining the effective date of any adverse action.

Policy Number Key

Section INST: Institutional Processes

Chapter B: Requirements for Achieving and Maintaining Membership

Part 20: Becoming and Defining a Member Institution

Last Revised: February 2021

First Adopted: August 1987

Revision History: renumbered November 2010, revised February 2012, June 2015, November 2015, November

2019, February 2021

Notes: Policies combined November 2012 - 1.1(a)1, 1.1(a)2, 1.1(a)3, 1.4, 2013 – 1.1(a)1.2, 1.1(a)1.3, 1.1(a)1.4. In February 2021, references to the Higher Learning Commission as “the Commission” were replaced with the term “HLC.”

Related Policies: INST.E.90.010 Appeals; FDCR.B.10.010 HLC Approval of Institutional Teach-Out Arrangements



Policy Title: Change of Control, Structure or Organization

Number: INST.B.20.040

An institution shall receive HLC approval prior to undergoing a transaction that affects, or may affect, how corporate control*, structure or governance occurs at the accredited or candidate institution (hereinafter the “member institution”). Approval of the transaction resulting in the Change of Control, Structure or Organization shall be necessary prior to its consummation to effectuate the continued accreditation of the institution subsequent to the closing of the proposed transaction.

**Control shall be understood to mean the possession, direct or indirect, of the power to direct or cause the direction of, the management and policies of an institution, corporation, partnership or other entity, whether through the ownership of voting securities, by contract or otherwise. (See related definition at 34 CFR § 600.31(b).)*

Eligibility for Change of Control

No institution shall be deemed eligible for Change of Control, Structure or Organization merely by virtue of having accredited or candidate status with HLC. Approval shall be at the sole discretion of HLC’s Board of Trustees (“the Board” or “HLC’s Board”). An institution shall apply for HLC approval of a proposed Change of Control, Structure or Organization transaction through processes outlined in this policy and must demonstrate to the satisfaction of HLC’s Board that the transaction and the member institution that will result from the transaction meet the requirements identified in this policy and that approval of the proposed Change of Control, Structure or Organization is in the best interest of HLC.

In those cases in which HLC’s Board decides to approve a proposed Change of Control, Structure or Organization, it may decide so subject to conditions on the institution or its accreditation. In those cases in which HLC’s Board decides, in its sole discretion, that the proposed transaction builds a new institution bypassing the Eligibility Process and initial status review by means of a comprehensive evaluation, HLC Board shall not approve the Change of Control, Structure or Organization.

The Board will not consider for approval any proposed Change of Control, Structure or Organization involving an institution that is under sanction, Show-Cause Order or loss of status or authorization from any other recognized accrediting agency or state entity or is under investigation by any state entity, or involving a buyer or investor who owns such an institution except as described in this policy. The Board will also not

consider for approval any proposed Change of Control, Structure or Organization for an institution the Board has determined within the previous twelve months to merit withdrawal of accreditation, even if a formal action to withdraw accreditation has not yet taken place.

The Board will consider a Change of Control, Structure or Organization for a member institution on sanction or under a Show-Cause Order only if there is substantial evidence that the proposed transaction resolves the issues the institution must address during the sanction or Show-Cause period and the transaction otherwise meets each of the Approval Factors identified in this policy.

Types of Transactions

The transactions that require prior HLC approval¹ include, but are not limited to, the following:

1. Sale or transfer to, or acquisition by, a new owner of all, or a substantial portion, of the institution's assets, or the assets of a branch campus or site (not including any transfer that constitutes only the granting of a security interest);
2. Merger or consolidation of an institution with one or more institutions or entities. This includes the consolidation of an institution not accredited or in candidate status with HLC into the structure of an institution holding status with HLC;
3. The division of the member institution into one or more institutions or entities;
4. Stock transactions including Initial Public Offerings of stock as well as those transactions wherein an individual, entity or group² acquires and controls 25% of the total outstanding shares of stock of the member institution, or an individual, entity or group increases or decreases its control of shares to greater or less than 25%, through individual or cumulative transactions, of the total outstanding shares of the stock of the institution;
5. Change of corporate form, governance structure, or conversion, including, but not limited to, change from Limited Partnership to Corporation, from Limited Liability Corporation to a Corporation, from a Not-for Profit Corporation to a For-Profit Corporation, a Private to Public, a Not-for Profit Corporation controlled by members to one controlled by its Board of Directors, significant change in the size of the institution's governing board;
6. Any of the transactions in items 1 through 5 above involving a parent corporation that owns or controls the member institution or in any intermediate subsidiary of a parent corporation where that

¹ Such transactions may or may not also require approval from the U.S. Department of Education.

² For a definition of a "group" see Section 13(d)(3) of the Securities and Exchange Act of 1934.

subsidiary has a controlling relationship to the institution and where the transaction may reasonably affect the control of the accredited institution as determined by HLC or by the U.S. Department of Education;

7. Sale, transfer, or release of an interest in the member institution such that there is change in the management or governance of the institution; and
8. Transfer of substantial academic or operational control of the member institution to a third-party entity.

Change of Control, Structure, or Organization Without Prior HLC Approval

Should an institution undertake a Change of Control transaction without prior approval, HLC's President shall have the authority to take a recommendation to the appropriate HLC decision-making body to require regular monitoring, a sanction, a Show-Cause Order or withdrawal of accreditation for an institution, subject to HLC policy and procedures related to those actions.

Prior to any decision-making body's review, the institution will be informed about the President's recommendation and will have at least 14 calendar days to prepare and submit a response that the Board or Institutional Actions Council, as applicable, will have available when it considers the President's recommendation. The Board has the authority to withdraw the accreditation or candidacy of an institution that completes a Change of Control, Structure or Organization without receiving prior HLC approval, when required, from the Board of Trustees.

Notification to HLC Regarding Other Transactions

A member institution must notify HLC staff of any other Change of Control, Structure or Organization that is not separately identified in this policy or that may be separately identified in the policy but may not be reasonably known by, or under the control of, the accredited institution, a parent entity or intermediate subsidiary prior to the transaction (e.g., disposal of stock by an investor). These changes include, but are not limited to, changes in the Chief Executive Officer of the member institution, changes in the structure and composition of the Board of Trustees of the institution, other than those due to normal or mid-term completion of Board members' terms or removal or replacement of Board members or revision of corporate bylaws through regular review processes, and sale or transfer of a block of stock that constitutes less than 25% but more than 10% of the total outstanding voting shares of the member institution, its corporate parent or other entity in a controlling relationship with the institution. These changes must be reported to HLC as soon as they are reasonably known to the institution. While such changes are to be reported for information, staff may determine in certain cases that they do constitute a Transaction that must be approved under this policy or that require HLC follow-up under HLC policies related to monitoring.

Policy Number Key

Section INST: Institutional Processes

Chapter B: Requirements for Achieving and Maintaining Membership

Part 20: Becoming and Defining a Member Institution

Last Revised: November 2020

First Adopted: June 2009 and February 2010

Revision History: February 2010, June 2019, June 2020, November 2020

Notes: Policies combined November 2012 – 3.3, 3.3(a), 3.3(b), 3.3(e), 3.3(f). In February 2021, references to the Higher Learning Commission as “the Commission” were replaced with the term “HLC.”

Related Policies: INST.F.20.070 Processes for Seeking Approval of Change of Control, INST.F.20.080 Monitoring Related to Change of Control, Structure or Organization



Policy Title: Voluntary Resignation of Accreditation or Candidacy

Number: INST.B.30.010

An accredited institution or candidate institution may voluntarily resign its membership with HLC at any time. The resignation must be initiated by the legally designated governing body of the institution and conveyed to HLC according to procedures provided by HLC. The effective date for such resignation may not exceed one year from the date of submission to HLC and such effective date may not be more than eleven (11) years (the maximum interval for reaffirmation of accreditation) from the date of the last reaffirmation of accreditation or four (4) years from the date candidacy was awarded.

HLC will provide the institution with written acceptance of the institution's resignation. Once accepted, an institution's resignation is generally irrevocable.

Within thirty (30) days of receiving notice of voluntary resignation, HLC issues a public disclosure notice that describes the resignation, including the effective date of the resignation, which is available to the public on HLC's website. Within ten (10) days HLC also notifies the U.S. Department of Education and the appropriate state agency and other recognized accrediting agencies regarding the resignation.

The institution must meet all Obligations of Membership until the resignation becomes effective. Voluntary resignation does not release an institution from past and current financial obligations to HLC.

After resignation, an institution is ineligible for membership for a period of one year. If an institution seeks accredited status with HLC following a resignation, it must reapply through the Eligibility Process.

Policy Number Key

Section INST: Institutional Processes

Chapter B: Requirements for Achieving and Maintaining Membership

Part 30: Obligations of Membership

Last Revised: November 2020

First Adopted: August 1987 and October 1988

Revision History: revised May 2002, February 2002, renumbered November 2010, April 2013, November 2016,

February 2020, November 2020

Notes: Policies combined November 2012 – 1.5, 3.8. In February 2021, references to the Higher Learning Commission as “the Commission” were replaced with the term “HLC.”

Related Policies: INST.B.30.040 Public Disclosure, FDCR.B.10.010 HLC Approval of Institutional Teach-Out Arrangements



Policy Title: Obligations of Membership

Number: INST.B.30.020

While seeking and holding membership with HLC, an institution voluntarily agrees to meet obligations set forth by HLC as follows:

1. The institution participates in periodic evaluation through the structures and mechanisms set forth in HLC policies, submission of reports as requested by HLC, filing of the Institutional Update, and any other requirements set forth in its policies.
2. The institution regularly reviews current HLC policies and procedures. It adheres to such policies and procedures in good faith.
3. The institution designates an Accreditation Liaison Officer in accordance with HLC requirements.
4. The institution is candid, transparent, and forthcoming in its dealings with HLC, including cooperating with all requests for information from HLC.
5. The institution notifies HLC of any condition or situation that has the potential to affect the institution's status with HLC, such as a significant reduction in program offerings, potential institutional closure or serious legal investigation (including, but not limited to, conditions or situations included in HLC's policy on special monitoring).
6. As further defined and explained in HLC policy, the institution informs HLC of its relationship with any related entity wherein institutional decision-making is controlled by that entity and of any changes in that relationship that may affect the institution's compliance with HLC accreditation requirements.
7. The institution describes itself in identical terms to HLC and to any other accreditor or regulatory body with which it holds or seeks membership with regard to purpose, operating authority, governance, programs, locations, degrees, diplomas, certificates, personnel, finances, and constituents.
8. The institution notifies HLC and its constituents when it receives an adverse action from or has been placed on sanction by any other accrediting agency or if a state has issued a pending or final action that affects the institution's legal status or authority to grant degrees.

9. The institution notifies applicable constituents whenever HLC has required it to submit a Provisional Plan for approval, and provides an accurate explanation as to the rationale for that Provisional Plan.
10. The institution accepts that HLC will, in the interest of transparency to the public, publish outcomes from its accreditation process in accordance with HLC policy.
11. The institution portrays its accreditation status with HLC clearly to the public, including the status of its branch campuses and related entities. The institution posts the electronic version of HLC's Mark of Accreditation Status in at least one place on its website, linking users directly to the institution's status on HLC's website.
12. The institution provides its constituents and applicants with any Public Disclosure Notice or Public Statement it receives from HLC and accurately communicates the significance of, and underlying reasons for, such Public Disclosure Notice or Public Statement as required by HLC.
13. The institution maintains prominently on its website a telephone number that includes an option for both current students and the public to speak with a representative of the institution.
14. The institution ensures that any information submitted to HLC generally will not include unredacted personally identifiable information (PII). If the institution submits information with unredacted PII because it is necessary for evaluative purposes or otherwise, it will clearly identify the information as such, if applicable.
15. The institution submits timely payment of dues and fees in accordance with the published Dues and Fees Schedule and accepts the fact of surcharges for late payment.
16. The institution agrees to accept binding arbitration regarding actions by HLC, including adverse actions, that the institution disputes and is not able to resolve through HLC's processes. The institution agrees to grant immunity to HLC from claims of civil liability related to decisions made by HLC in the course of its work of accrediting institutions provided that HLC was acting in good faith and within the scope of its responsibilities.
17. The institution agrees that in the event it, or any third party, takes legal action against HLC related to any accreditation action or makes any legal inquiries of HLC related to the institution, the institution shall, to the extent allowed by law, be responsible for all expenses, including but not limited to attorneys' fees, expert witness, and related fees, incurred by HLC in responding to such legal inquiries and/or defending the action.

Meeting Obligations of Membership

Institutions must remain in compliance with the Obligations of Membership at all times. HLC President shall make a final determination as to whether an institution is in violation of the Obligations of Membership such

that Administrative Probation should be imposed. HLC may make use of any reasonable means to determine whether the institution has violated an Obligation of Membership including, but not limited to, seeking written information from the institution or scheduling one or more peer reviewers or staff members to meet with one or more institutional representatives either on-campus or through other appropriate method.

Administrative Probation

HLC staff or peer reviewer(s) may recommend an institution for Administrative Probation. Such recommendation shall be made to the President in writing and information about such recommendation shall be provided to the institution for an institutional response. The institution shall have a minimum of two weeks to respond in writing to the recommendation. HLC President shall then review the recommendation and the institution's response and make the decision whether to impose Administrative Probation. If the institution's response is unsatisfactory, HLC President shall place the institution on Administrative Probation for a period not to exceed ninety days. HLC President will notify the institution of the imposition of the Administrative Probation and the conditions for its removal in writing. During the ninety-day time period, the institution will be expected to remedy the situation that led to the imposition of Administrative Probation. At the end of the ninety-day period, the institution shall provide evidence that it has remedied the conditions leading to Administrative Probation to the President. Such evidence may be reviewed directly by HLC Staff, or peer reviewers as necessary to confirm the institution's compliance. Upon such validation, the President shall remove Administrative Probation.

If an institution fails to remedy the situation that led to Administrative Probation by the end of the ninety-day period, HLC President shall take a recommendation concerning the institution to a decision-making body. Depending on the nature and the severity of the circumstances, such recommendation may involve a change in the institution's Pathway for Reaffirmation of Accreditation at the time of its next comprehensive evaluation, removal from the Notification Program for Additional Locations, interim monitoring on the underlying issue that led to Administrative Probation, the application of a sanction, the issuance of a Show-Cause Order or the withdrawal of accreditation, in accordance with HLC policies and procedures.

Disclosure of Administrative Probation

Administrative probation is noted on an institution's Statement of Accreditation Status along with the reason for the Administrative Probation until its removal.

Policy Number Key

Section INST: Institutional Processes

Chapter B: Requirements for Achieving and Maintaining Membership

Part 30: Obligations of Membership

Last Revised: November 2020

First Adopted: January 1983

Revision History: Renumbered February 2010, February 2012, June 2013, February 2017, June 2019 (effective September 2020), June 2020, November 2020

Notes: Policies combined November 2012 – 1.6, 2013 – 1.6(a), 1.6(b), 1.6(b)1. In February 2021, references to the Higher Learning Commission as “the Commission” were replaced with the term “HLC.”

Related Policies:



Policy Title: Dues and Fees

Number: INST.B.30.030

Applying and accredited institutions shall pay dues and fees when required by HLC's Dues and Fees Schedule. HLC institutional fees and annual dues shall be due on receipt of the billing.

Refunds

Dues are not refundable whether the Board of Trustees withdraws the institution's status, the institution voluntarily resigns, or the institution ceases to operate.

When a team visit is canceled or postponed at the institution's initiative before the scheduled date, HLC will refund all fees paid for that evaluation less expenses incurred.

HLC will retain all fees received from an institution which withdraws from the process after the on-site visit. If HLC staff cancels the visit, the institution will receive a full refund.

Non-payment of Dues and Fees

The Board of Trustees reserves the right to withdraw the status of an institution which, after due notice, does not pay its dues or fees.

Debts to HLC

Neither withdrawal of status by the Board of Trustees nor voluntary resignation shall cancel any debts owed to HLC by an institution. Unless exempted by the Board of Trustees, an institution seeking membership with HLC must pay in full any debts it might have previously incurred with HLC.

Policy Number Key

Section INST: Institutional Processes

Chapter B: Requirements for Achieving and Maintaining Membership

Part 30: Obligations of Membership

Last Revised: November 2020

First Adopted: February 1990

Revision History: October 2003, November 2020

Notes: Policies combined November 2012 – 4.1, 4.2, 4.3, 4.4. In February 2021, references to the Higher Learning Commission as “the Commission” were replaced with the term “HLC.”

Related Policies:



Policy Title: Public Disclosure

Number: INST.B.30.040

Public Disclosure of the Team Report

The team report shall be an important, but not the only, document considered by HLC in making a decision about an organization's accreditation relationship. Only after final HLC action may an organization make public the entire report or excerpts that are accurate (i.e., verbatim or reasonable paraphrases) and that correctly reflect the Assurance Section of the report. If an organization discloses or distributes excerpts, it shall indicate that the Assurance Section of the report is available on request. An organization shall consider its official response to the report to be an integral component of the report.

Public Information About Regional Institutional Accreditation

HLC will provide on its website and in print publications information about the purposes of regional institutional accreditation, the processes used in it, and the appropriate interpretation and use of it by institutions, students, and the public. HLC will expect each member institution to use or paraphrase this HLC information in describing regional institutional accreditation or candidacy.

Policy Number Key

Section INST: Institutional Processes

Chapter B: Requirements for Achieving and Maintaining Membership

Part 30: Obligations of Membership

Last Revised: November 2020

First Adopted: January 1983, June 2004, February 1996

Revision History: revised June 2004, February 2010, November 2020

Notes: Policies combined November 2012 – 12.3, 12.4. In February 2021, references to the Higher Learning Commission as “the Commission” were replaced with the term “HLC.”

Related Policies:



Policy Title: Substantive Requirements for Reaffirmation of Accreditation

Number: INST.C.10.010

Each institution shall have its accreditation reaffirmed by formal action of HLC according to its decision-making policies. The basis for reaffirmation shall be evidence that the institution meets the Criteria for Accreditation and Federal Compliance Requirements.

Reaffirmation Cycle

Reaffirmation shall occur not more than ten years from the date of the last formal HLC action reaffirming accreditation; for an institution that received initial accreditation after its most recent comprehensive evaluation, reaffirmation shall occur not more than four years after the initial accreditation action. Should the reaffirmation action take place in the spring or fall following the required date for reaffirmation, such action shall be considered to have met the requirements of this policy provided that the evaluation visit takes place no later than ten, or, where applicable, four, years from the date of the last reaffirmation action.

The cycle for reaffirmation may be less than ten years for institutions that participate in or are assigned by HLC to processes that require more frequent reaffirmation.

An institution may file a formal request for an extension of its reaffirmation process, provided that it has a compelling reason for seeking such extension and it is not under sanction or show-cause with, or pending withdrawal by, HLC or any other recognized accrediting agency. An institution must file such a request with sufficient time for a decision to be made prior to the expiration of an institution's current reaffirmation period. Such request will be considered and acted on through HLC's decision-making processes. The extension shall be no more than one year beyond the institution's regular cycle as established by the terms of the reaffirmation process in which it participates. The maximum cycle permitted under this policy is eleven (11) years.

Procedural Requirements for Reaffirmation

Prior to every formal HLC action reaffirming the accreditation of an institution that institution and HLC shall have participated in a process that includes the following components:

- self-study activities at the institution that result in submission to HLC of evidence that the institution meets the Criteria for Accreditation and the Federal Compliance Requirements; and, in the same or different submission as required by the process in which the institution participates, evidence of continuing improvement at the institution;
- visit to the institution by a team of HLC Peer Reviewers for the purpose of gathering additional information to determine whether the institution meets the Criteria for Accreditation and the Federal Compliance Requirements and to verify whether appropriate evidence has been provided by the institution;
- analysis by HLC Peer Reviewers of the evidence provided by the institution and the additional information gathered during the visit;
- written report prepared by HLC Peer Reviewers documenting their conclusions regarding whether the institution meets the Criteria for Accreditation and the Federal Compliance Requirements, including but not limited to, requirements related to assessment of student learning, and, in the same or a different report as required by the process in which the institution participates, conclusions regarding continuous improvement and identifying deficiencies, if any, at the institution;
- an opportunity for an institution to provide a written response prior to HLC action following procedures outlined by HLC.

Processes for Reaffirmation

Each accredited institution in good standing with HLC shall reaffirm and maintain its accredited status by participating in evaluation processes that: (1) document that it meets HLC’s Criteria for Accreditation and the Federal Compliance Requirements, (2) demonstrate a focus on institutional improvement, and (3) fulfill HLC’s procedural requirements for reaffirming and maintaining accreditation. These evaluation processes shall be known as accreditation pathways. The pathways are: Standard and Open. HLC may approve other pathways. Each pathway shall include a series of evaluative activities that HLC determines to be appropriate for that pathway provided that each pathway allows an institution to fulfill the procedural requirements necessary to maintain accreditation. In any pathway HLC staff may seek external assistance from peer reviewers or individuals with appropriate expertise who do not participate as peer reviewers in the evaluation process but provide particularized advice and assistance where appropriate to HLC staff or evaluation team members.

Institutions not yet accredited by HLC as well as accredited institutions that are on probation, under show-cause, or pending withdrawal action shall participate in evaluation activities specifically outlined in HLC policy applicable to such designation and shall not participate in a pathway.

Entrance Requirements for Each Pathway

HLC shall determine the entrance requirements for each pathway in relation to the institution's history with HLC. These requirements shall include the length of its accreditation with HLC, as well as such factors as interim monitoring, substantive change and change of control requests, sanctions, show-cause orders, adverse actions, and any other information HLC deems relevant. In addition, HLC may exercise discretion in determining an appropriate pathway for an institution.

Assignment to a Pathway

Subsequent to granting of initial accreditation and after removal of probation or show-cause, institutions shall be limited to the Standard Pathway for a minimum of ten years until such time as they shall meet the entrance requirements for a different pathway and make appropriate application to enter such pathway. An institution undergoing approval of a change of control, structure or organization or removal from notice may be subject to limitation to the Standard Pathway. A pathways assignment shall be made by the Board of Trustees in making these accrediting decisions.

A decision renewing an institution's assignment to a pathway or determining an institution's eligibility for a different pathway shall always take place at reaffirmation of accreditation and may take place at other times as established by the procedures of the pathway or HLC policy. A pathway determination after initial accreditation, a continuation of eligibility for a pathway, and any change of pathway shall be a formal decision by HLC and shall be subject to all HLC requirements related to the pathway as well as to HLC's decision-making process. Such decision shall also indicate the date of the next Assurance Review or comprehensive evaluation and the institution's placement in the cycle for that pathway.

An institution shall receive notice of a recommended pathway assignment prior to the formal decision placing it on a pathway. In cases where the Pathway assignment is not based on entrance requirements for the Pathway but on HLC discretion and exempting any pathways assignments made at the discretion of the Board of Trustees related to sanction or other actions assigned to the Board, the institution shall have an opportunity to respond prior to the assignment being made through HLC's decision-making process. After a pathway assignment has been made, it is subject to additional review or change only at the discretion of HLC.

Change of Pathways by HLC

HLC may at its discretion move an institution from one Pathway to another if: (1) the institution fails to fulfill the requirements of its Pathway, (2) serious concerns arise about the institution's capacity to continue to meet the Criteria for Accreditation or the Federal Compliance Requirements, or (3) the institution needs to be monitored more closely through the processes of the Standard Pathway.

All other changes in pathways will occur subsequent to reaffirmation of accreditation. (Note that assignment to a pathway following HLC policy is not a change of a pathway.)

Policy Number Key

Section INST: Institutional Processes

Chapter C: Process for Reaffirmation of Accreditation

Part 10: Substantive Requirements for Reaffirmation of Accreditation

Last Revised: November 2018

First Adopted: June 2012

Revision History: November 2012, November 2018

Notes: Policies combined November 2012 - 1A.1.1, 1A1.2, 1A.1.3, 1A.1.4, 1A.1.5, 1A.1.6, 1A.1.7. In February 2021, references to the Higher Learning Commission as “the Commission” were replaced with the term “HLC.”

Related Policies:



Policy Title: Process Requirements for Each Pathway

Number: INST.C.10.020

Standard Pathway

An institution on the Standard Pathway shall have its accreditation reaffirmed every ten years except for an institution that has received initial accreditation after its most recent comprehensive evaluation. Subsequent to initial accreditation, reaffirmation shall occur not more than four years after the initial accreditation action. Reaffirmation for all other institutions on the Standard Pathway shall be contingent on the institution having undergone comprehensive evaluations in years four and ten of the cycle through a process that assures the higher education community and the public that the institution continues to meet the Criteria for Accreditation and Federal Compliance Requirements, and that the institution demonstrates a focus on continuing improvement.

Subsequent to reaffirmation, HLC will also renew the institution's assignment to the Standard Pathway or declare it eligible to choose another Pathway. Renewal of assignment to the Standard Pathway will be contingent on the institution demonstrating that it meets the Criteria for Accreditation and the Federal Compliance Requirements, and not receiving an action involving show-cause, probation, or withdrawal. An institution on the Standard Pathway declared eligible to choose another Pathway may move to that pathway subsequent to reaffirmation provided it files a letter of acceptance within a limited timeframe as required by the requirements of the pathway being sought. The institution may also choose to remain on the Standard Pathway.

Open Pathway

An institution on the Open Pathway shall have its accreditation reaffirmed every ten years. Reaffirmation shall be contingent on the institution having undergone an Assurance Review in year four of the cycle and a comprehensive evaluation in year ten of the cycle through processes that assure the higher education community and the public that the institution continues to meet the Criteria for Accreditation and the Federal Compliance Requirements, and demonstrates a focus on continuing improvement.

At reaffirmation, HLC will determine whether to renew the institution's eligibility for the Open Pathway. An institution may lose eligibility for the Open Pathway if serious concerns arise about the institution's capacity to continue to meet the Criteria for Accreditation and Federal Compliance Requirements; the institution needs to be monitored more closely through the processes of the Standard Pathway; or the institution does not fulfill the requirements of the Open Pathway, including those of the Quality Initiative.

Process Elements Common to Open and Standard Pathway

Assurance Review. Institutions in the Open and Standard Pathways shall participate in an Assurance Review that has the following components:

- Assurance Filing by the institution;
- Review by the Assurance Review team composed of HLC Peer Reviewers appointed by HLC staff in accordance with team selection procedures; such review shall include analysis of the Assurance Filing as well as of information from any on-site visit conducted to institutions on the Standard Pathway or to institutions on the Open Pathway in year ten or in year four where specifically required by the Assurance Review team;
- Written report prepared by the Assurance Review team that outlines the team's findings related to the institution's meeting the Criteria for Accreditation and identifies any strengths and challenges or deficiencies.

The Assurance Review for an institution with distance or correspondence education shall include a specific focus on these forms of delivery.

Assurance Filing. The Assurance Filing shall be housed on HLC's web-based platform, known as the Assurance System, and composed of the following parts: (1) information submitted by the institution to document evidence of meeting, and of any institutional improvement related to, the Criteria for Accreditation, which shall consist of an Assurance Argument, Evidence File, and any addenda required by the evaluation team or HLC staff to the above information; and (2) information supplied by HLC including but not limited to summary data from the institution's recent Institutional Update, records related to evaluation visits, official actions and correspondence, public comments, results of HLC-sponsored student surveys, complaints, and any other information HLC deems appropriate.

For comprehensive evaluations, the Assurance Filing shall also address the Federal Compliance Requirements and, if applicable, provide information for branch campus evaluation.

Comprehensive Evaluation. An institution on the Standard Pathway and an institution in year ten of the Open Pathway shall undergo a comprehensive evaluation, which shall consist of the Assurance Review with

an on-site visit. In addition to reviewing the Assurance Filing and related materials, the Assurance Review team shall also visit the institution's main campus and other institutional locations as determined by HLC based on its policies and procedures. For institutions that offer only distance or correspondence education, the team shall conduct its on-site visit to the institution's administrative offices but may include other institutional locations, if any, in the on-site visit. The President of HLC shall determine whether the liaison or other HLC staff member will accompany any visit related to an Assurance Review.

The length of the visit shall be one and one-half days, but HLC may lengthen or shorten the visit or require that team members conduct additional on-site visits to the institution's facilities to examine specific issues.

In a comprehensive evaluation, the team's report will include any findings from the on-site visit, the multi-campus evaluation, if applicable, and the review of compliance with Federal Compliance Requirements.

Other Visits. When HLC is conducting an Assurance Review for an institution in year 4 of the Open Pathway, an on-site visit will not be required; however, a team may call for an on-site visit to gather additional information not available electronically or to conduct further review of specific issues arising from the Assurance Review. In addition, if the team is considering a sanction or withdrawal, it must call for an on-site visit.

Multi-Campus Evaluation. When an institution that has multiple branch campuses undergoes a comprehensive evaluation, HLC will send one or more HLC Peer Reviewers to visit the institution's branch campuses. The Peer Reviewer may, but is not required to, be a member of the Assurance Review team. Such branch campus visits may precede or follow HLC's comprehensive evaluation visit to the institution's main campus. HLC will determine the campuses to be included in the branch campus visit, but the focus of the visit will be on branch campuses not recently visited by HLC. The Peer Reviewer visiting the branch campus will complete a form outlining findings arising from the visit. The purpose of this form shall be to inform the comprehensive evaluation team regarding the quality of the institution's branch campuses. The Peer Reviewer will make no formal recommendation, and there will be no formal HLC action arising from the branch campus evaluation visit.

Process Elements Specific to the Open Pathway

Quality Initiative. An institution on the Open Pathway shall conduct after year four and prior to year ten of its reaffirmation cycle a Quality Initiative through which it demonstrates an ongoing commitment to improving its quality. The institution shall select a topic for the Initiative that shall be reviewed and approved by a panel of HLC Peer Reviewers. The institution shall compile a report explaining the results of the initiative and no later than year nine of its reaffirmation cycle submit it to HLC for review.

Review of the Quality Initiative Report. A panel of Peer Reviewers shall review the Quality Initiative Report. The panel shall determine whether the institution has met the stated expectations for the Quality Initiative. The panel will complete a form explaining its findings. The form will be sent with the written report resulting from the comprehensive evaluation in year ten to the Institutional Actions Council.

Process Elements Specific to the Standard Pathway

An institution on the Standard Pathway shall demonstrate institutional improvement through an approach integrated with and focused on the Criteria for Accreditation. In addition, an institution on the Standard Pathway shall demonstrate that it has made reasonable progress in resolving any concerns resulting from the previous comprehensive evaluation or raised by HLC during the period between evaluations.

Policy Number Key

Section INST: Institutional Processes

Chapter C: Process for Reaffirmation of Accreditation

Part 10: Substantive Requirements for Reaffirmation of Accreditation

Last Revised: November 2018

First Adopted: June 2012

Revision History: November 2012, June 2014, November 2018

Notes: Policies combined in November 2012 - 1A.2.1, 1A.2.2, 1A.2.3, 1A.2.4, 1A.2.5. In February 2021, references to the Higher Learning Commission as “the Commission” were replaced with the term “HLC.”

Related Policies: COMM.B.10.010 Staff Role and Responsibility



Policy Title: Process Requirements Leading to HLC Action for Reaffirmation

Number: INST.C.10.030

Recommendations Arising From Pathways for Reaffirmation

The team of HLC Peer Reviewers conducting either a comprehensive evaluation or Assurance Review in the Standard or Open Pathway shall in its written report make a recommendation for HLC action to complete the review. For comprehensive evaluations, the team shall recommend whether to reaffirm the institution's accreditation and whether to require interim monitoring, if needed, as available on the institution's pathway. For Assurance Reviews, the team shall recommend whether to continue the institution in its current cycle and whether to require any interim monitoring as available on the institution's pathway. Any team may recommend a sanction, the issuance of a Show-Cause Order, or withdrawal of accreditation. These recommendations, along with the team's written report, shall be forwarded to an HLC decision-making body for review and action.

Institutional Responses to Recommendations Arising From Pathways for Reaffirmation

An institution shall have the opportunity to provide a written response to the written report of a comprehensive evaluation or Assurance Review following HLC policies for the provision of institutional responses. In all cases involving a response to comprehensive evaluation, Assurance Review, or other visit, an institution shall have at least two weeks to prepare and submit an institutional response to the team report prior to review and action through HLC's decision-making processes.

Policy Number Key

Section INST: Institutional Processes

Chapter C: Process for Reaffirmation of Accreditation

Part 10: Substantive Requirements for Reaffirmation of Accreditation

Last Revised: June 2020

First Adopted: June 2012

Revision History: June 2014, November 2018, June 2020

Notes: Policies combined November 2012 – 1A.3.1, 1A.3.2. In February 2021, references to the Higher Learning Commission as “the Commission” were replaced with the term “HLC.”

Related Policies: INST.G.10.020 Official Records (Institutional Responses within the Process)



Policy Title: Institutional Data for HLC Teams

Number: INST.C.20.010

Prior to any on-site visit, HLC will provide the team with a record of the institutional indicators that have been submitted by the institution over the years. Prior to a comprehensive evaluation culminating in reaffirmation of accreditation or prior to other HLC evaluation where HLC determines it to be appropriate, HLC may also provide aggregate data collected from a survey administered to students by HLC.

The institution will provide other information required by HLC on-site or in Assurance Argument materials.

Policy Number Key

Section INST: Institutional Processes

Chapter C: Process for Reaffirmation of Accreditation

Part 20: Institutional Data

Last Revised: November 2018

First Adopted:

Revision History: February 2014, June 2014, November 2018

Notes: Former policy number 1.3(d). In February 2021, references to the Higher Learning Commission as “the Commission” were replaced with the term “HLC.”

Related Policies:



Policy Title: Board of Trustees

Number: INST.D.10.010

The composition, selection, and term of the Board of Trustees are defined in the Bylaws of the Higher Learning Commission and the Board of Trustees Policies Manual. Institutional representatives on the Board of Trustees will include representation of individuals who are academics, including faculty members, academic deans or others who have a primary responsibility in the teaching and learning process, and administrators who have a primary responsibility of providing oversight in an institution of higher education.

Decision-Making Authority of the Board of Trustees

The Board of Trustees shall hold final responsibility for all accreditation actions taken by the Higher Learning Commission. The Board of Trustees shall retain its authority for deliberation and actions regarding accreditation decisions to:

1. grant or deny initial status, including initial candidacy and initial accreditation;
2. issue or withdraw a sanction, including notice or probation;
3. withdraw status, including candidacy or accreditation;
4. issue or remove a show-cause order;
5. approve or deny an application for Change of Control, Structure or Organization; and
6. approve exemptions, if any, from the Assumed Practices.

All such decisions, once issued by the Board, shall become the final action, except for those decisions that are subject to appeal. Such decisions shall become the final accreditation action as outlined in [HLC policy INST.E.90.010 Appeals](#).

The Board of Trustees may identify subcommittees or specific readers from the current membership of the Board to complete its responsibilities related to decision-making.

For all other accreditation decisions the Board authorizes the Institutional Actions Council, as constituted by policy, to conduct reviews and to take actions, provided that such structure is recognized as such by the U.S. Department of Education.

Review and Analysis of the Full Record by the Board of Trustees

The Board of Trustees shall review and analyze the full record prior to taking action. The full record shall consist of materials submitted by the institution in preparation for review; team or panel reports; reports from the Institutional Action Council, if applicable; any institutional responses from the institution; and any applicable action letters and other official letters from HLC regarding the matter. In addition, HLC may add other documents to the record that it believes provide additional relevant information.

Notice to Institutions of Board Actions

When action is taken by the Board of Trustees, the institution will be provided an action letter. The action letter shall provide information about the terms of the action, including changes to the Statement of Accreditation Status, the rationale for the action, any subsequent steps in the decision process, and any opportunities for institutional response or appeal.

Deferral of Action by the Board of Trustees

The Board of Trustees may defer action on an institutional action in the following circumstances:

1. a state agency or another recognized institutional accrediting agency has provided official notice of potential suspension, revocation, or termination of legal authority to provide education or accredited or pre-accredited status, or has denied or not approved an application for legal authority or accredited or pre-accredited status prior to the action; or
2. evidence relevant to the action or the institution's compliance with the Criteria for Accreditation, Federal Compliance Requirements or other HLC policies may be required or anticipated within a specified period of time.

A decision to defer action will specify (a) the information that must be provided; (b) the means by which HLC will acquire the information, including another on-site visit or any other means identified in HLC policy; and (c) the date on which the Board of Trustees will consider the information and take action.

The Board of Trustees will not defer final action beyond the next regularly scheduled Board meeting.

Substantive Amendment or Modification to Board Actions related to Institutional Actions

The Board of Trustees may move, upon recommendation by the President of the Higher Learning Commission, to amend or modify prior actions of the Board related to an individual institution under circumstances that:

- represent errors in the application or implementation of HLC policy

- result in consequences that were not intended or anticipated by the Board at the time of its original action; and
- cause undue burden to the institution or its students as determined by the HLC Board

Such amendment or modification shall not apply to any underlying action but rather to the manner in which certain aspects of the Board's action impact an institution, which could not be anticipated based on information available at the time of original action.

If undertaken by the Board, any such amendment or modification will be made no later than 12 months after the Board's original action related to the subject institution.

Process for Amending or Modifying Prior Board Action

An amendment or modification may not be proposed to the Board by institutions. Such amendment or modification may only be recommended to the HLC Board by the HLC President.

The Higher Learning Commission, through its President, must provide an institution advance notice and opportunity to respond in writing to any proposed substantive amendment or modification to a prior Board action related to that institution. Such advance notice shall specifically set forth the substance of the proposed amendment or modification.

The institution shall have a minimum of two weeks to respond. An institutional response may demonstrate how the original action meets the three requirements for amendment or modification identified earlier in this policy. Alternatively, an institution has the right to decline to have any aspect of the prior Board action amended or modified, but must articulate reasons for its objections and desire to preserve the status quo.

The Board may act to:

- approve the amendment or modification as proposed
- defer action for a reasonable period pending additional information
- decline to approve the amendment or modification proposed

Board action may occur during regular Board meetings or through alternative means.

If an amendment or modification to the original action is made, the Board of Trustees will set forth in its action letter the reasons for its amendment or modification and will reissue its original action as amended or modified.

All actions taken under this policy are effective as of the date taken unless otherwise specified by the HLC Board.

Any amendment or modification to prior Board action is a final action not subject to appeal. No amendment or modification to a prior Board action related to institutions renders the underlying action subject to appeal, unless such action was originally subject to appeal under established HLC policy.

Policy Number Key

Section INST: Institutional Processes

Chapter D: Decision-Making Bodies and Process

Part 10: Board of Trustees

Last Revised: November 2020

First Adopted: June 2011

Revision History: February 2012, April 2013, February 2019, November 2019, November 2020

Notes: Policies combined November 2012 - 2.2(d)1.1, 2.2(d)1.1a, 2.2(d)1.1b. In February 2021, references to the Higher Learning Commission as “the Commission” were replaced with the term “HLC.”

Related Policies: INST.E.90.010 Appeals (Conflict of Interest, Confidentiality), Trustee Policies, Chapter III. Board Authority and Responsibility, Section C, Confidentiality and D, Objectivity and Conflict of Interest.



Policy Title: Institutional Actions Council

Number: INST.D.20.010

Composition, Selection, Term, and Activity

The Institutional Actions Council (IAC) shall consist of no fewer than forty (40) members who have been nominated by HLC staff and who have been appointed by the Board of Trustees. IAC members who represent institutions shall be broadly representative of institutions accredited by HLC, with attention to institutional type, control, size, and geographical distribution, and shall be current members of the Peer Review Corps. The IAC shall include representation of individuals who are academics, including faculty members, academic deans or others who have a primary responsibility in the teaching and learning process, and administrators who have a primary responsibility of providing oversight in an institution of higher education.

The IAC shall include a sufficient number of public members to allow for one public member to be appointed to each committee. IAC members who are representative of the public shall not be, or have a familial relationship with, current employees, consultants, owners, shareholders, or members of the governing board of any member institution, organization, or applicant thereof, or higher education agency, and shall reside or have a principal place of employment within the area of HLC's jurisdiction.

The IAC shall make use of committees, known as Institutional Actions Council Meeting Committees and Institutional Actions Council Hearing Committees, in completing its responsibilities for decision-making that may result in final actions or in making recommendations to the Board of Trustees. HLC staff will select individuals from the IAC to compose committees to conduct reviews, as outlined in this policy.

The term of appointment to the IAC shall be renewable four-year terms, to begin at the start of HLC's fiscal year.

The IAC shall meet as a body at least one time each year to review the decision process and engage in training.

IAC Authority to Take Action on Accreditation Decisions

The IAC, acting through its committees, is authorized to take action on accreditation decisions to:

1. reaffirm accreditation;
2. approve recommendations resulting from biennial visits in candidacy;
3. approve or deny applications for substantive change requiring review by a decision structure, but not including Change of Control, Structure, or Organization;
4. approve recommendations resulting from focused evaluations; and
5. approve recommendations from staff or financial/non-financial panels for required monitoring or changes in the Statement of Accreditation Status.

For these cases, the IAC is authorized to set the next comprehensive evaluation visit date, establish a schedule of required monitoring, and make other changes in the Statement of Accreditation Status.

IAC Authority to Make Recommendations for Accreditation Decisions That Require Board Action

The IAC, acting through its committees, is authorized to review the following recommendations arising from an evaluation process and to forward a recommendation to the Board of Trustees to:

1. grant or deny initial status, including initial candidacy and initial accreditation;
2. issue or withdraw a sanction, including notice or probation, except where the Board of Trustees in a previous accreditation decision may have outlined specific provisions for a recommendation related to the sanction to move directly to the Board;
3. issue a Show-Cause Order; and
4. withdraw accredited or candidate status.

Conflict of Interest

HLC expects that all IAC members will act with objectivity and without conflict of interest when participating in IAC activities.

HLC will not knowingly allow any IAC member to participate in discussions, recommendations, or actions where the IAC member has a conflict of interest that may cause the IAC member to lack objectivity, that may result in the appearance of bias, or that may otherwise call into question the integrity, fairness, or credibility of IAC processes.

IAC members will periodically be required to confirm their agreement to abide by the conflict of interest and objectivity requirements for IAC members set forth by HLC.

IAC members will also periodically be required to disclose specific circumstances that may result in a conflict of interest. IAC members are expected to promptly update these disclosures, including during an Institutional Actions Council Meeting Committee or Institutional Actions Council Hearing Committee, as needed.

Any conflicts of interest or other recusals will be noted in minutes, as applicable.

Confidentiality

An IAC member agrees to keep confidential any information provided by the institution under review and information gained as a result of participating in an action or hearing. Keeping information confidential requires that the IAC member not discuss or disclose institutional information except as needed to further the purpose of HLC's decision-making processes. It also requires that the IAC member not make use of the information to benefit any person or organization. This obligation to maintain confidentiality continues after the process has concluded. (See PEER.A.10.040, Standards of Conduct, for a list of examples of confidential information available to IAC members.)

Antitrust Compliance

IAC members will be familiar with HLC's expectations regarding antitrust compliance and conduct themselves in accordance with these expectations when engaging in HLC business or otherwise representing HLC. In general, HLC prohibits IAC members from engaging in conduct (including activities and communications) with the intent or effect of limiting competition amongst accreditors, as prohibited by antitrust laws. When IAC members have questions regarding particular activities or communications, they will consult with HLC's Antitrust Compliance Team.

Policy Number Key

Section INST: Institutional Processes

Chapter D: Decision-Making Bodies and Process

Part 20: Institutional Actions Council

Last Revised: November 2020

First Adopted: June 2011

Revision History: April 2013, June 2014, November 2019, June 2020, November 2020

Notes: Policies combined November 2012 - 2.2(d)1.2, 2.2(d)1.2a, 2.2(d)1.2b, 2.2(d)1.2b1, 2.2(d)1.2b2. In February 2021, references to the Higher Learning Commission as "the Commission" were replaced with the term "HLC."

Related Policies: INST.D.40.010 Institutional Actions Council Processes



Policy Title: Institutional Actions Council Processes

Number: INST.D.40.010

Review and Analysis of the Full Record by the Institutional Actions Council

The Institutional Actions Council (IAC) shall review and analyze the full record prior to taking action or making a recommendation. The full record shall consist of materials submitted by the institution in preparation for review; team or panel reports; any institutional responses from the institution; and any applicable action letters and other official letters from HLC regarding the matter. In addition, HLC may add other documents to the record that it believes provide additional relevant information.

Institutional Actions Council Processes

The IAC will conduct its work through committees, known as Institutional Actions Council Meeting Committees and Institutional Actions Council Hearing Committees.

All IAC committees shall consist of at least three (3) members drawn from the current Institutional Actions Council. In rare cases other Peer Reviewers with recent IAC experience may be included on a committee. All committees shall include at least one public member. A member of the committee shall be assigned to act as chair; another member shall be assigned to act as recorder.

Each committee shall review the full written record of the evaluation, as defined in this policy section, and the rationale related to any recommendation.

The committee may make findings of fact related to any matter under consideration and may substitute its judgment for that of any evaluation team or panel, based on the same evidence or different evidence, where there is a reasonable evidentiary basis for such substitution. The rationale for a committee's findings that differ from the findings of a previous evaluation team or panel shall be explained in the committee record.

When the committee's review results in a final action, its record shall be the basis for HLC President's action letter. When the committee's review results in a recommendation to the Board, its record shall be forwarded to the Board and the institution. All decisions of a committee, whether they result in actions or recommendations, are made by majority vote.

Institutional Actions Council Meeting Committee. An Institutional Actions Council Meeting Committee is generally used for:

1. Reviewing matters for which the IAC is authorized to take action, as described below; and
2. Considering removal of Notice as recommended by the evaluation team.

The Institutional Actions Council Meeting Committee shall conduct its business by any means that allows for synchronous or asynchronous communication among committee members. No representatives of the institution or of the evaluation process shall participate in Institutional Actions Council Meeting Committees.

The decisions of the Institutional Actions Council Meeting Committee shall become final actions unless the Institutional Actions Council is considering removal of Notice. In this instance (i) if the Institutional Actions Council Meeting Committee recommends removal of Notice and does not recommend another sanction, a Show-Cause Order or withdrawal, the recommendation will be forwarded to the Board of Trustees for action or (ii) if the Institutional Actions Council Meeting Committee recommends that the Notice period be extended or recommends another sanction, a Show-Cause Order or withdrawal, the matter will be referred to an Institutional Actions Council Hearing Committee.

Institutional Actions Council Hearing Committee. An Institutional Actions Council Hearing Committee is generally used for reviewing matters for which the IAC is authorized to make a recommendation to the Board of Trustees for action, other than regarding removal of Notice as detailed above.

An Institutional Actions Council Hearing Committee shall generally conduct its business in person, but may also use any means that allows for synchronous communication among committee members and institutional representatives, as needed. Representatives of the institution and of the evaluation process shall participate in the hearing as appropriate.

The decisions of the Institutional Actions Council Hearing Committee shall be forwarded to the Board of Trustees, as detailed above.

HLC may, in its discretion, determine when to use Institutional Actions Council Meeting Committees and Institutional Actions Council Hearing Committees, as appropriate under the circumstances, provided that the Institutional Actions Council does not exceed its decision-making authority as granted by the Board of Trustees, HLC policy, and the structure recognized by the U.S. Department of Education.

Notice to Institution of Action or Recommendations by the Institutional Actions Council

When action is taken by the Institutional Actions Council, the institution will be provided an action letter. The action letter shall provide information about the terms of the action, including changes to the Statement of

Accreditation Status. When the action substantially differs from the recommendation arising out of the evaluation process, the action letter will provide the rationale for the action, any subsequent steps in the decision process, and any opportunities for institutional response.

When the Institutional Actions Council makes a recommendation to the Board of Trustees, the institution will be provided an Institutional Actions Council Hearing Committee report. The report shall provide information about the recommendation, the rationale for the recommendation, any subsequent steps in the decision process, and any opportunities for institutional response.

Deferral of Action by the Institutional Actions Council

The Institutional Actions Council may defer action on an institutional action in the following circumstances:

1. a state agency or another recognized institutional accrediting agency has provided official notice of potential suspension, revocation, or termination of legal authority to provide education or accredited or pre-accredited status, or has denied or not approved an application for legal authority or accredited or pre-accredited status prior to the action; or
2. evidence relevant to the action or the institution's compliance with the Criteria for Accreditation, Federal Compliance Requirements or other HLC policies may be required or anticipated within a specified period of time.

A decision to defer action will specify (a) the information that must be provided; (b) the means by which HLC will acquire the information, including another on-site visit or any other means identified in HLC policy; and (c) the date on which the Institutional Actions Council will consider the information and take action.

The Institutional Actions Council will not defer action beyond the next regularly scheduled Institutional Actions Council Meeting.

Policy Number Key

Section INST: Institutional Processes

Chapter D: Decision-Making Bodies and Process

Part 40: Institutional Actions Council Processes

Last Revised: June 2020

First Adopted: June 2011, November 1998

Revision History: June 2012, November 2012, November 2019, June 2020

Notes: Policies combined November 2012 -2.2(d)2, 2.2(d)2.1, 2.2(d)2.1a, 2.2(d)2.2, 2.2(d)2.2a, 2.2(d)2.2b,

2.2(d)2.2b.1, 2.2(d)2.2b.2, 2.2(d)2.3, 2.2(g). In February 2021, references to the Higher Learning Commission as

“the Commission” were replaced with the term “HLC.”

Related Policies:



Policy Title: Notice

Number: INST.E.10.010

Notice is a public sanction that attaches to an institution's accreditation status. The sanction of Notice is imposed based on an overall judgment that the institution is at risk of being out of compliance with HLC requirements related to the Criteria for Accreditation, Assumed Practices, or Federal Compliance Requirements. It will be supported by findings that an institution meets with concerns one or more Criteria for Accreditation or that an institution requires monitoring related to one or more Federal Compliance Requirements. The determination is not based on any minimum number of such findings. An action to impose Notice is a final action not subject to appeal.

In placing an institution on Notice the Board of Trustees will identify in the letter notifying the institution of the action the deficiencies at the institution that led to Notice. The letter will also specify a date for submission of a written report on the corrective measures taken by the institution during the Notice period and for a subsequent Notice evaluation. The written report must provide clear evidence that the institution has ameliorated the deficiencies that led to the Notice action and is no longer at risk for compliance issues. The Notice evaluation will determine whether claims made in the report are verifiable and demonstrate significant improvement in the deficient areas.

The Notice period shall not exceed two years, commencing on the date of the Board's action placing the institution on Notice until the date the Board determines whether the deficiencies that led to the institution being placed on Notice have been ameliorated. The filing of the report and the subsequent Notice evaluation will take place within this time period as established by the Board. The Board of Trustees may impose Notice at the end of Probation or Show-Cause if the institution has demonstrated compliance with the areas previously identified as non-compliant but remains at risk related to those areas of non-compliance or other deficiencies.

If, at the end of the Notice period, the Board finds that the deficiencies leading to the Notice action have not been ameliorated, the Board may continue accreditation, withdraw accreditation or take other action as provided for in these policies. The Board may also extend Notice if the institution complies with all the Criteria for Accreditation and Federal Compliance Requirements and is making progress but has not

completely ameliorated the conditions that led to the Notice. This extension will be available for an additional year if the institution was initially placed on Notice for one year or for an additional six months if the institution was initially placed on Notice for two years. At the time that it extends the Notice period, the Board will specify the process by which the institution will be required to provide evidence so that it is no longer at risk of being out of compliance with HLC requirements (i.e.—by providing a report or hosting a visit). The Board will act on any extension of Notice at the next regularly scheduled Board meeting after the extension of the Notice period has concluded. At that time the Board has the same options for action it had at the end of the initial Notice period, except that no further extension of Notice shall be available.

Process for Imposing or Removing Notice

Only the Board of Trustees, acting on the recommendation of any evaluation team, the Institutional Actions Council, or the President, shall take action placing an institution on Notice. A team recommendation to place an institution on Notice, other than one arising from an advisory visit process, will automatically be referred to an Institutional Actions Council Hearing Committee. The Board will consider both the team recommendation and Institutional Actions Council Hearing Committee recommendations in its deliberations. The President of HLC makes a recommendation for Notice resulting from an advisory visit process directly to the Board. In all cases, the Board of Trustees will act on a recommendation for Notice only if the institution's chief executive officer has been given an opportunity of at least two (2) weeks to place before the Board of Trustees a written response to the recommendation.

At the end of an initial Notice period, the Board of Trustees will review the recommendation of any evaluation team and of an Institutional Actions Council Meeting Committee or Hearing Committee, as well as any responses filed by the institution. At the end of an extension to a Notice period, the Board of Trustees will review the recommendation of any evaluation panel or team, as well as any response filed by the institution. In taking action, the Board of Trustees may choose to accept, reject, or modify these recommendations.

Pathways Assignment

The Board shall reassign an institution to the Standard Pathway as may be necessary in the action that places the institution on Notice. The institution shall remain on the Standard Pathway until such time as it has reestablished its eligibility for a different Pathway as determined by a comprehensive evaluation for reaffirmation of accreditation.

Substantive Change During the Notice Period

An institution on Notice may file one or more applications for substantive change during the Notice period. However, any application related to deficiencies identified in the Notice action will be subject to strict scrutiny and may be deferred by staff or by the Institutional Actions Council for consideration by HLC until after the Board has removed Notice, or the application may be denied. An approval of a substantive change for an institution on Notice is not indicative of a determination by HLC that an institution has corrected identified areas of deficiency. Under federal regulations, additional requirements for seeking prior approval for certain substantive changes apply specifically to institutions placed on Notice after July 1, 2020 as well as for three academic years following removal of such Notice. Such additional requirements may be found in HLC's policies on substantive change (see INST.F.20.040 Substantive Change).

An institution on Notice is not eligible for the Notification Program for Additional Locations and shall be removed from that program by staff after being placed on Notice. After Notice has been removed with no further sanction or Show-Cause imposed and provided that the Notice was not related to the quality of the institution's off-campus instruction or related issues, the institution may apply after the next comprehensive evaluation or after a period of four years, whichever is longer, to be restored to the Notification Program. If the Notice was related to the quality of the institution's off-campus instruction or related issues, the institution may not reapply until it has completed the ten years of good standing required for access to the Notification Program for Additional Locations.

Public Disclosure of Notice Actions

A Public Disclosure Notice for an institution on Notice will be available on HLC's website shortly after, but not more than one (1) business day after, HLC notifies the institution of the action imposing Notice. An institution on Notice must notify its Board members, administrators, faculty, staff, students, prospective students, and any other constituencies about the action in a timely manner not more than seven (7) business days after receiving the action letter from HLC; the notification must include information on how to contact HLC for further information; the institution must also disclose this status whenever it refers to its HLC accreditation.

Notice Evaluation at the End of the Notice Period

The Notice evaluation at the end of the Notice period will be conducted following HLC policies and procedures for routine monitoring. (See INST.F.10.010, Routine Monitoring.)

Policy Number Key

Section INST: Institutional Processes

Chapter E: Sanctions, Adverse Actions, and Appeals

Part 10: Notice

Last Revised: June 2020

First Adopted: June 2000

Revision History: February 2011, June 2012, February 2014, June 2017, November 2018, November 2019, June 2020

Notes: Policies combined November 2012 – 2.5(a), 2.5(a)1, 2.5(a)2. In February 2021, references to the Higher Learning Commission as “the Commission” were replaced with the term “HLC.”

Related Policies: INST.F.20.010 Special Monitoring



Policy Title: Probation

Number: INST.E.20.010

Probation is a public sanction that attaches to an institution's accreditation status. This status indicates that an accredited institution is no longer in compliance with one or more of HLC's Criteria for Accreditation or Federal Compliance Requirements or is out of conformity with the Assumed Practices. The institution remains accredited while it is on Probation. An action to impose Probation is a final action not subject to appeal.

In placing an institution on Probation the Board of Trustees will identify in the letter notifying the institution of the action the specific areas of non-compliance that led to the Probation and the date for the institution's next comprehensive evaluation.

The Board's action will require that an institution initially placed on Probation:

1. Submit in a timeframe defined by the Board a Provisional Plan comporting with HLC's Teach-Out Requirements as articulated in applicable policies for such plans to the Institutional Actions Council for review and approval during the probation period;
2. Submit an Assurance Filing that provides clear evidence that the institution has ameliorated the areas of non-compliance and that it is otherwise in compliance with all the Criteria for Accreditation, the Federal Compliance Requirements and any applicable Assumed Practices specifically cited in the Board's action; and
3. Host an on-site evaluation team to validate the report.

The initial period for Probation shall generally be two (2) years commencing with the date of the Board's action placing the institution on Probation and concluding with the Board's determination that Probation should be removed or other action should be taken. The initial period for Probation may be less than two (2) years if the Board so determines at its discretion. Regardless of the initial period of Probation, under rare circumstances an institution may be eligible for one extension to its initial period of Probation as explained below and subject to the maximum timeframe for noncompliance articulated in INST.E.60.010 Denial or Withdrawal of Status.

The comprehensive evaluation process to consider removal of probation will take place within the time period for the sanction established by the Board. If the institution has been on Notice prior to the imposition of Probation, the Board may take that history into account in determining the length of Probation. An institution that receives Probation for less than two (2) years is not entitled to the remainder of the two (2) years if, at the end of the probationary period, separate from the good cause extension, it has not been able to demonstrate compliance with the Criteria for Accreditation and Federal Compliance Requirements.

The Board may at its sole discretion grant one extension of Probation at the end of the initial period of Probation if the institution is not able to demonstrate to the Board's satisfaction that it has ameliorated the areas of noncompliance that led to the sanction or is otherwise in compliance with HLC requirements, but is able to demonstrate all of the following to show that it is eligible for the extension:

1. clear evidence of substantial progress towards meeting the Criteria for Accreditation (or Federal Compliance Requirements or cited Assumed Practices as applicable), including evidence of substantial implementation of necessary improvements, in the majority of areas in which the institution has been previously found to be non-compliant;
2. verifiable plans to cure the remaining areas of non-compliance or any other areas of non-compliance identified in the action granting the extension by the end of the extension period;
3. sufficient capacity and resources in place to cure the identified areas of non-compliance during the extension; and
4. likelihood that the institution will be able to demonstrate compliance with all the Criteria for Accreditation and the Core Components by the end of the extension.

The extension shall be for one year beyond the initial period of Probation subject to maximum timeframe for noncompliance articulated in INST.E.60.010 Denial or Withdrawal of Status.

The institution shall host a focused evaluation as soon as possible during the one-year extension to determine whether the improvements anticipated in the action granting the extension are in place and functioning to cure any areas of non-compliance identified in that action and whether HLC requirements are met such that Probation may be removed following the requirements for removal of Probation stipulated in this policy or whether accreditation shall be withdrawn or other action taken following HLC policy. The report of the focused evaluation team, and any response to that report filed by the institution, shall be considered by the Board of Trustees in determining its action at end the of extension period.

The Board is not required to have placed an institution on Notice prior to the imposition of Probation nor is the Board required to provide a period of Probation prior to issuing a Show-Cause Order or withdrawing accreditation. In making the judgment about whether to provide a period of Probation or an extension of

Probation the Board will weigh the capacity of the institution to resolve the areas of non-compliance within the probationary period, any harm that might result to students and the public from allowing the institution time to resolve areas of non-compliance while remaining accredited, and other factors.

The Board also has the discretion at any time during the probationary period to reevaluate its decision to allow for a period of Probation if it receives evidence of additional non-compliance with HLC requirements or deteriorating conditions at the institution that have the capacity to affect the teaching and learning experience at the institution. In such cases the Board may issue a Show-Cause Order or take other action provided for in these policies.

At the end of the period of Probation or following the extension of Probation or at any time during Probation as specifically outlined in this policy, if the institution cannot provide evidence of ameliorating the areas of non-compliance within the timeframe specified by the Board for the Probation, or if further evidence surfaces that suggests the institution is found not to be in compliance with HLC requirements, whether or not the areas of non-compliance are the same or different from those originally identified, the Board shall withdraw the institution's accreditation or take other action as provided for in these policies.

Process for Imposing or Removing Probation

Only the Board of Trustees, acting on the recommendation of any evaluation team, an Institutional Actions Council Committee, or the President, shall take action placing an institution on Probation. A team recommendation to place an institution on Probation or extend Probation, other than one arising from an advisory visit process, will automatically be referred to an Institutional Actions Council Hearing Committee. The Board will consider both the team recommendation and the Institutional Actions Council Hearing Committee recommendations in its deliberations. The Board may also act of its own accord to grant an extension of Probation at the time it considers removing Probation without a prior recommendation by an evaluation team or Institutional Actions Council. The President of HLC makes a recommendation for Probation resulting from an advisory visit process directly to the Board. In all cases, the Board of Trustees will act on a recommendation for Probation only if the institution's chief executive officer has been given an opportunity of at least two (2) weeks to place before the Board of Trustees a written response to the recommendation.

At the end of Probation the Board of Trustees will review recommendations from the comprehensive evaluation team that evaluated the institution and from the Institutional Actions Council Hearing Committee. In taking action, the Board of Trustees may choose to accept, reject, or modify these recommendations. The Board of Trustees may continue accreditation, withdraw accreditation or take other action as provided for in these policies.

Pathways Assignment

An institution placed on Probation is also removed from any reaffirmation pathway until it is removed from Probation. An institution removed from Probation will be placed on the Standard Pathway for its next reaffirmation cycle.

If the Board of Trustees removes the institution from Probation and does not withdraw accreditation or issue a Show-Cause Order, the Board shall reaffirm the institution's accreditation and assign it to the Standard Pathway. The institution will have an evaluation to reaffirm accreditation no later than four (4) years after the Board acts to remove Probation although the Board may set the reaffirmation date earlier, and the institution will be placed in the Standard Pathway accordingly. The Board may also require interim monitoring as a part of its action. The institution will remain on the Standard Pathway until it completes the full ten (10) year cycle. If at that time accreditation is reaffirmed without further sanction, it may be considered to be eligible for the Open Pathway.

Substantive Change During the Probationary Period

An institution on Probation may file one or more applications for substantive change during the probationary period. However, the institution must address in its application the question of why the change is immediately necessary and how the institution will manage the change while continuing to work to remedy the areas of non-compliance; the application will be subject to strict scrutiny by HLC. The institution should anticipate that the application is likely to be denied or deferred by staff or by the Institutional Actions Council Committee for consideration by HLC after the Board has removed Probation. Under federal regulations, additional requirements for seeking prior approval for certain substantive changes apply specifically to institutions placed on Probation after July 1, 2020, as well as for three academic years following removal of such Probation. Such additional requirements may be found in HLC's policies on substantive change (see INST.F.20.040 Substantive Change). An approval of a substantive change for an institution on Probation is not indicative of a determination by HLC that an institution has corrected identified areas of non-compliance.

An institution on Probation is not eligible for the Notification Program for Additional Locations and shall be removed from that program by staff after being placed on Probation. The institution may not reapply until it has completed ten (10) years in good standing as required for access to the Notification Program for Additional Locations.

Public Disclosure of Probation Actions

A Public Disclosure Notice for an institution on Probation will be available on HLC's website shortly after, but not more than one (1) business day after, HLC notifies the institution of the action imposing Probation. An

institution on Probation must notify its Board members, administrators, faculty, staff, students, prospective students, and any other constituencies about the action in a timely manner not more than seven (7) business days after receiving the action letter from HLC; the notification must include information on how to contact HLC for further information; the institution must also disclose this status whenever it refers to its HLC accreditation.

Comprehensive Evaluation Visit During Probation

The comprehensive evaluation conducted during the probationary period will be conducted in accordance with established HLC procedures for comprehensive evaluations but with the following modifications. Timing of the evaluation will be according to a schedule set by HLC's Board of Trustees in placing the institution on Probation. While the evaluation will review the institution's compliance with all the Criteria for Accreditation and Federal Compliance Requirements, it will also examine the institution's conformity with the Assumed Practices specifically cited by the Board. HLC may also determine, if the institution has had a recent comprehensive evaluation within the previous three (3) years prior to the imposition of Probation, that the visit will focus primarily on those areas in which the institution has been found to be non-compliant; therefore HLC may attenuate some aspects of the visit unrelated to the issues involved in Probation.

The President of HLC shall determine whether the institutional liaison or other HLC staff member will accompany evaluation visits related to Probation.

Documentation Evaluated. The Assurance Filing assembled by the institution through a self-evaluative or self-study process should include evidence of remediation of the areas of non-compliance identified in the letter notifying the institution of Probation.

On-Site Visit. A team of Peer Reviewers appointed by HLC staff in accordance with HLC procedures shall conduct a visit to the institution's main campus and other institutional locations as shall be determined by HLC based on its policies and procedures; for institutions that offer only distance or correspondence education, the team shall conduct its on-site visit to the institution's administrative offices but may include other institutional locations.

HLC shall retain discretion to determine the length of the on-site visit or to require that team members conduct additional on-site visits to the institution's facilities as a part of a particular Comprehensive Evaluation to examine specific issues.

Recommendations Arising From Comprehensive Evaluations During Probation. The team of HLC Peer Reviewers conducting a comprehensive evaluation during Probation shall in its written report make a recommendation to HLC's Board of Trustees for HLC action.

The team shall recommend whether to remove Probation, specifying any interim monitoring that should be attached to the removal, or in the event of ongoing non-compliance, whether to extend Probation, issue a Show-Cause Order or withdraw accreditation. In recommending withdrawal of accreditation, the team may also recommend for the Board's consideration an effective date for the withdrawal action.

These recommendations, along with the team's written report, shall be forwarded to an Institutional Actions Council Hearing Committee and from there to HLC's Board of Trustees.

Institutional Responses to Recommendations Arising From Comprehensive Evaluations During Probation.

An institution shall have the opportunity to provide a written response to the written report of a comprehensive evaluation conducted during the probationary period following HLC policies for the provision of institutional responses. An institution shall have at least two weeks to prepare and submit an institutional response to the team report prior to review and action through HLC's decision-making processes.

Policy Number Key

Section INST: Institutional Processes

Chapter E: Sanctions, Adverse Actions, and Appeals

Part 20: Probation

Last Revised: June 2020

First Adopted: August 1988

Revision History: February 1998, May 2002, February 2011, June 2012, November 2012, February 2014, February 2015, November 2018, June 2020

Notes: Policies combined November 2012 – 2.5(b), 2.5(b)1, 2.5(b)2, 2.5(b)3. In February 2021, references to the Higher Learning Commission as “the Commission” were replaced with the term “HLC.”

Related Policies: INST.G.10.020 Official Records (Institutional Responses within the Process), COMM.B.10.010 Staff Role and Responsibility



Policy Title: Show-Cause (Procedural Order)

Number: INST.E.30.010

Upon recommendation by a peer review team, the Institutional Actions Council, the President, or at its discretion, the Board of Trustees may issue an order requiring an accredited institution to show cause, typically within one (1) year (the Show-Cause period), as to why its accreditation should not be removed. The basis for the issuance of a Show-Cause Order will be the Board's determination that there is probable cause that the institution does not meet HLC requirements, which may include the Criteria for Accreditation, the Federal Compliance Requirements, the Assumed Practices, the Eligibility Requirements or the Obligations of Membership. The Board of Trustees may consider shortening the Show-Cause period based on factors including but not limited to the following:

- a. the institution has spent a period of time immediately preceding the issuance of the Show-Cause Order on Probation;
- b. findings of noncompliance pose a serious risk of imminent harm or danger to students.

The Show-Cause Order is public. The institution remains accredited while it is on Show-Cause. The issuance of a Show-Cause Order is a final action not subject to appeal.

The Board of Trustees will explain the reasons for its decision and areas of probable non-compliance in the Show-Cause Order and in the letter provided to the institution after the action to impose Show-Cause. The Show-Cause Order will require that an institution (1) submit in a timeframe defined by the Show-Cause order a Provisional Plan comporting with HLC Teach Out requirements for such plans to the Institutional Actions Council for review and approval during the Show-Cause period, (2) present its case for continued accreditation by means of a report, known as a Show-Cause Report, that provides substantive evidence that the institution continues to meet each of the Criteria for Accreditation, all the Assumed Practices, and Federal Compliance Requirements and has resolved the issues that led to the findings of probable non-compliance identified in the Show-Cause Order, and (3) host an on-site evaluation team to validate the report. The President of HLC shall determine whether the institutional liaison or other HLC staff member will accompany the Show-Cause Evaluation Visit. The on-site team will produce a report that includes its findings regarding the institution's compliance with the Criteria for Accreditation and the Federal Compliance

Requirements and conformity with the Assumed Practices for consideration by the Board of Trustees. Only the Board of Trustees may ultimately determine that a Show-Cause Order has been satisfactorily addressed, and that the institution has demonstrated compliance with HLC requirements.

Process for Imposing or Removing a Show-Cause Order

The Board of Trustees shall take action at the end of the Show-Cause period. If the institution has demonstrated to the sole satisfaction of the Board that it has ameliorated each finding of probable non-compliance identified by the Board detailed in the Show-Cause Order and that it meets each of the Criteria for Accreditation, all the Assumed Practices and all Federal Compliance Requirements, the Board may remove the Show-Cause Order; the Board may also reaffirm accreditation as required by the institution's reaffirmation cycle with HLC. The Board may remove the institution from Show-Cause subject to a period of Notice if the institution has demonstrated compliance with HLC requirements, but remains at risk related to those areas of non-compliance or other deficiencies.

If the institution has not demonstrated to the sole satisfaction of the Board (1) that it has ameliorated each area of non-compliance identified by the Board detailed in the Show-Cause Order and (2) that it meets all HLC requirements, the Board shall withdraw accreditation or take any other action provided for in HLC policy including Probation, as appropriate, subject to the requirements of those policies and provided that the maximum time period of noncompliance as stated in INST.E.60.010 Denial or Withdrawal of Status is not exceeded.

In all cases, the Board of Trustees will act at the conclusion of a Show-Cause process only if the institution's chief executive officer has been given opportunity of at least two (2) weeks to place before the Board of Trustees a written response to the Show-Cause Report and any other information arising in the Show-Cause process.

Board Committee Hearing in Show-Cause

At the time it establishes the order, or within a reasonable period of time thereafter, the Board of Trustees require a Board Committee Hearing in keeping with INST.E.70.010 Special Protocols Related to Sanctions and Adverse Actions. The hearing will occur after the on-site visit but prior to the Board of Trustees meeting at which the Board of Trustees will take final action on the Show-Cause Order.

Pathways Assignment

An institution placed under a Show-Cause Order is removed from any reaffirmation pathway until the Show-Cause Order has been removed.

If, at the conclusion of the Show-Cause period, the Board of Trustees removes the institution from Show-Cause and does not withdraw accreditation or place the institution on Probation or take other action related to a finding of non-compliance, the Board shall assign the institution to the Standard Pathway. The institution will have an evaluation to reaffirm accreditation no later than four (4) years after the Board acts to remove Show-Cause and depending on the previous date of reaffirmation although the Board may set the reaffirmation date earlier, and the institution will be set in the Standard Pathway accordingly. The Board may also require interim monitoring as a part of its action. The institution will remain on the Standard Pathway until it completes a full ten (10) year cycle and is then reaffirmed without further sanction at which time it may be considered for another Pathway.

Substantive Change During the Show-Cause Period

HLC will not consider for approval any substantive change during the Show-Cause period other than a Provisional Plan as required under this policy and any accompanying Teach-Out Agreements, unless the institution can demonstrate that the change is required by law or by the requirements of a specialized accreditor or is essential for the institution to demonstrate compliance with the Criteria for Accreditation or Federal Compliance Requirements or to remain fiscally viable. Even if HLC accepts the application after this showing of necessity, the application will be subject to strict scrutiny by HLC and may be denied or deferred by staff or by the Institutional Actions Council Committee for consideration by HLC after the Board has removed Show-Cause. Under the federal regulations, additional requirements for prior approval for certain substantive changes apply specifically to institutions placed under a Show-Cause order after July 1, 2020 as well as for three academic years following removal of such Show-Cause order, and may be found in HLC's policies on substantive change (see INST.F.20.040 Substantive Change). An approval of a substantive change for an institution on Show-Cause is not indicative of a determination by HLC that an institution has corrected identified areas of probable non-compliance.

An institution on Show-Cause is not eligible for the Notification Program for Additional Locations and shall be removed from that program by staff after being placed on Show-Cause. The institution may not reapply until it has completed ten (10) years in good standing as required for access to the Notification Program for Additional Locations.

Public Disclosure of Show-Cause

A Public Disclosure Notice for an institution on Show-Cause will be available on HLC's website after, but not more than one (1) business day after, HLC notifies the institution of the action issuing the Show-Cause Order. An institution on Show-Cause must notify its Board members, administrators, faculty, staff, students, prospective students, and any other constituencies about the action in a timely manner not more than seven

(7) business days after receiving the action letter from HLC; the notification must include information on how to contact HLC for further information; the institution must also disclose this status whenever it refers to its HLC accreditation.

Show-Cause Evaluation Visit

An institution under a Show-Cause Order shall undergo a Show-Cause Evaluation Visit by HLC according to a schedule set by HLC's Board of Trustees in placing the institution on Show-Cause. The evaluation will review the institution's compliance with all the Criteria for Accreditation and Federal Compliance Requirements and conformity with the Assumed Practices. The visit will be narrowly tailored at HLC's discretion to make this key determination.

A team of peer reviewers appointed by HLC staff in accordance with HLC procedures shall conduct a visit to the institution's main campus and other institutional locations as determined by HLC based on its policies and procedures; for institutions that offer only distance or correspondence education, the team shall conduct its on-site visit to the institution's administrative offices but may include other institutional locations.

HLC shall retain discretion to determine the length of the on-site visit or to require that team members conduct additional on-site visits to the institution's facilities to examine specific issues.

The President of HLC shall determine whether the institutional liaison or other HLC staff member will accompany evaluation visits related to Show-Cause.

Institutional Responses to the Show-Cause Evaluation Visit Report

An institution shall have the opportunity to provide a written response to the written report of a Show-Cause evaluation following HLC policies for the provision of institutional responses. An institution shall have at least two (2) weeks to prepare and submit an institutional response to the team report prior to review and action through HLC's decision-making processes.

Policy Number Key

Section INST: Institutional Processes

Chapter E: Sanctions, Adverse Actions, and Appeals

Part 30: Show Cause

Last Revised: November 2020

First Adopted: June 2000

Revision History: June 2006, November 2012, February 2014, February 2015, November 2018, June 2020, November 2020

Notes: Policies combined November 2012 – 2.5(c), 2.5(c)1, 2.5(c)2, 2.5(c)3. In February 2021, references to the Higher Learning Commission as “the Commission” were replaced with the term “HLC.”

Related Policies: INST.E.70.010 Special Protocols Related to Sanctions and Adverse Actions, INST.B.30.040 Public Disclosure, COMM.B.10.010 Staff Role and Responsibility



Policy Title: External Expertise in Sanctions or Show-Cause

Number: INST.E.40.010

HLC staff or the Board may seek external assistance from peer reviewers or individuals with appropriate expertise who do not participate as peer reviewers in the evaluation process but provide particularized advice and assistance where appropriate to HLC Board, staff or evaluation team members.

Policy Number Key

Section INST: Institutional Processes

Chapter E: Sanctions, Adverse Actions, and Appeals

Part 40: External Expertise in Sanctions or Show-Cause

Last Revised:

First Adopted: June 2012

Revision History:

Notes: Former policy number 2.5(d). In February 2021, references to the Higher Learning Commission as “the Commission” were replaced with the term “HLC.”

Related Policies:



Policy Title: Denial or Withdrawal of Status

Number: INST.E.60.010

Withdrawal of Accreditation

The Board of Trustees shall consider withdrawing the accreditation of an institution only when that institution has been determined to be out of compliance with one or more HLC requirements. The specific grounds for withdrawal of accreditation shall be that the institution does not meet one or more of the Criteria for Accreditation or Federal Compliance Requirements or fails to demonstrate conformity with the Assumed Practices, the Eligibility Requirements or the Obligations of Membership during the accreditation period.

This determination may be made by the Board after any of the following:

1. a focused or comprehensive evaluation;
2. a period of Notice or Probation;
3. a Show-Cause process;
4. upon recommendation of the President, if an on-site visit has occurred within the year preceding; or
5. upon recommendation of the President, if the institution fails to comply with the Obligations of Membership within a reasonable period after receiving notice of noncompliance and regardless of whether an on-site visit has occurred within the year preceding.

Other than a team recommendation to withdraw accreditation arising from an advisory visit process, which is referred to the President, any team recommendation to withdraw accreditation will automatically be referred to an Institutional Actions Council Hearing Committee. The Board will consider both the team recommendation and the Institutional Actions Council Hearing Committee recommendations in its deliberations. A recommendation for withdrawal of accreditation by the President is made directly to the Board, and there is no Institutional Actions Council Hearing in this case. The institution has the opportunity to appear before a Board Committee Hearing prior to a withdrawal of accreditation action in keeping with [INST.E.70.010 Special Protocols Related to Sanctions and Adverse Actions](#).

In all cases, the Board of Trustees will act on a recommendation for withdrawal only if the institution's chief executive officer has been given opportunity of at least two (2) weeks to place before the Board of Trustees a written response to the recommendation.

An institution that is out of compliance with HLC requirements need not have been placed on Probation or Show Cause prior to a withdrawal action. The Board shall immediately act to withdraw the accreditation of any institution it determines has been out of compliance with HLC requirements for more than two years, unless it grants such institution an extension for good cause not exceeding one year based on all of the following factors:

1. Clear evidence of substantial progress towards meeting HLC requirements, and in particular, the Criteria for Accreditation and Core Components, including evidence of substantial implementation of necessary improvements, in the majority of areas in which the institution has been previously found to be non-compliant;
2. Verifiable plans to cure the remaining areas of non-compliance or any other areas of non-compliance identified in the action granting the extension by the end of the extension period;
3. Sufficient capacity and resources in place to cure the identified areas of non-compliance during the extension; and
4. Likelihood that the institution will be able to demonstrate compliance with HLC requirements by the end of the extension period.

Withdrawal of accreditation is an adverse action and thus is not a final action and is subject to appeal.

In no event shall the final effective date of withdrawal be prior to the conclusion of the current academic term inclusive of the institution's issuance of degrees immediately following such term. The Board in its sole discretion may also consider an effective date that takes into account a reasonable period for the institution to conduct a Teach Out in accordance with other relevant HLC policies and procedures.

Public Disclosure After Withdrawal of Accreditation

A Public Disclosure Notice for an institution that has had its accreditation withdrawn will be available on HLC's website shortly after, but not more than one (1) business day after, HLC notifies the institution of the action. Since an institution may appeal this decision by HLC, the public notice shall also include clear reference to the appeal options available to the institution and official comments that the institution provides to be included in the notice. An institution under withdrawal must notify its Board members, administrators, faculty, staff, students, prospective students, and any other constituencies about the action in a timely manner not more than seven (7) business days after receiving the action letter from HLC; the

notification must include information on how to contact HLC for further information; the institution must also disclose this status whenever it refers to its HLC status.

Denial of Accreditation

The Board of Trustees shall consider denying accreditation to an institution only when that institution has been determined to be out of compliance with HLC requirements to become accredited. The specific grounds for denial of accreditation shall be that the institution does not meet one or more of the Eligibility Requirements, the Assumed Practices, or the Criteria for Accreditation, or the Federal Compliance Requirements, or fails to demonstrate conformity with the Obligations of Membership during the candidacy period. This determination may be made by the Board after a comprehensive evaluation for initial accreditation.

A team recommendation to deny accreditation will automatically be referred to an Institutional Actions Council Hearing Committee. The Board will consider both the team recommendation and the Institutional Actions Council Hearing Committee recommendations in its deliberations. The institution has the opportunity to appear before a Board Committee Hearing prior to a denial of accreditation action in keeping with INST.E.70.010 Special Protocols Related to Sanctions and Adverse Actions.

In all cases, the Board of Trustees will act on a recommendation for denial only if the institution's chief executive officer has been given opportunity of at least two (2) weeks to place before the Board of Trustees a written response to the recommendation.

Denial of accreditation is an adverse action and thus is not a final action and is subject to appeal except in cases where the Board, in taking such action, denies an institution's early application for accreditation prior to the end of the candidacy period and thereby continues the institution's candidacy status or extends that status to a fifth year, as provided for in HLC policy.

In no event shall the effective date of the denial of accreditation be prior to the conclusion of the current academic term inclusive of the institution's issuance of degrees immediately following such term. The Board in its sole discretion may also consider an effective date that takes into account a reasonable period not exceeding 120 days (unless HLC grants a good cause extension) for the institution to conduct a Teach Out in accordance with federal regulations and other relevant HLC policies and procedures.

Denial or Withdrawal of Candidacy Status

The Board of Trustees shall take actions denying or withdrawing the candidacy status of an institution that fails to meet the requirements of Candidacy. The specific grounds for denial or withdrawal of candidacy shall be that the institution does not meet one or more of the Eligibility Requirements, the Assumed Practices, or

the Federal Compliance Requirements or that there is not sufficient evidence to support the judgment that all of the Criteria for Accreditation can reasonably be met within the period of candidacy, or the remainder of the candidacy period if withdrawal of candidacy is being considered, or the institution fails to demonstrate conformity with the Obligations of Membership during the candidacy period.

This determination may be made by the Board after any of the following:

1. in the case of denial of candidacy, a comprehensive evaluation;
2. in the case of withdrawal of candidacy, a comprehensive, focused or other evaluation during candidacy;
3. upon recommendation of the President, if an on-site visit has occurred within the year preceding; or
4. upon recommendation of the President, if the institution fails to comply with the Obligations of Membership within a reasonable period after receiving notice of noncompliance, ceases to operate as an education institution or has its legal authorization to operate and grant degrees terminated and regardless of whether an on-site visit has occurred within the year preceding.

A team recommendation to deny or withdraw candidacy, other than one arising from an advisory visit process, will automatically be referred to an Institutional Actions Council Hearing Committee. The Board will consider both the team recommendation and the Institutional Actions Council Hearing Committee recommendations in its deliberations. A recommendation for denial or withdrawal of candidacy by the President is made directly to the Board, and there is no Institutional Actions Council Hearing in this case.

In all cases, the Board of Trustees will act on a recommendation for denial or withdrawal of candidacy only if the institution's chief executive officer has been given opportunity of at least two (2) weeks to place before the Board of Trustees a written response to the recommendation.

Denial or withdrawal of candidacy status is an adverse action and thus is not a final action and is subject to appeal.

In no event shall the final effective date of withdrawal of candidacy status be prior to the conclusion of the current academic term inclusive of the institution's issuance of degrees immediately following such term. The Board in its sole discretion may also consider an effective date that takes into account a reasonable period for the institution to conduct a Teach Out in accordance with other relevant HLC policies and procedures.

Public Disclosure After Denial of Accreditation or Denial or Withdrawal of Candidacy Status

A Public Disclosure Notice for an institution that has had accreditation denied or candidacy withdrawn, or had candidacy denied, will be available on HLC's website shortly after, but not more than one (1) business

day after, HLC notifies the institution of the action. Since an institution may appeal this decision by HLC (except in cases where HLC has extended an existing candidacy), the public notice shall also include clear reference to the appeal options available to the institution and official comments that the institution provides to be included in the notice. An institution under withdrawal or denial must notify its Board members, administrators, faculty, staff, students, prospective students, and any other constituencies about the action in a timely manner not more than seven (7) business days after receiving the action letter from HLC; the notification must include information on how to contact HLC for further information; the institution must also disclose this status whenever it refers to its HLC status.

Policy Number Key

Section INST: Institutional Processes

Chapter E: Sanctions, Adverse Actions, and Appeals

Part 60: Denial or Withdrawal of Status

Last Revised: November 2020

First Adopted: January 1983

Revision History: revised November 1994, May 2002, June 2006, February 2011, February 2012, February 2014, June 2020, November 2020

Notes: Policies combined November 2012 - 2.5(f), 2.5(f)1, 2.5(f)2, 2.5(f)3, 2.5(f)4. In February 2021, references to the Higher Learning Commission as “the Commission” were replaced with the term “HLC.”

Related Policies: INST.B.20.020 Candidacy, INSTE.70.010 Special Protocols Related to Sanctions and Adverse Actions



Policy Title: Special Protocols Related to Sanctions and Adverse Actions

Number: INST.E.70.010

Special Notice to Institutions in Limited Circumstances

Prior to placing an institution on probation, withdrawing accreditation, or denying initial candidacy or initial accreditation, the Board will notify an institution of the intended action. The notification will include the reasons for the action if such action has not previously been recommended by a team or Review Committee or the President, and the institution has not had an opportunity to respond. The institution will have thirty days to respond to the notice of the Board's intended action. The Board also will determine when it will take final action, either at regular meeting or through any means permitted by policy. The Board will consider the institution's response, if any, filed within the thirty day period, prior to taking final action.

Board Committee Hearing

HLC shall make available a Board Committee Hearing, provided the institution requests such hearing, prior to a final decision by the Board to:

- deny accreditation, except where HLC is denying an application for early accreditation prior to the end of the four-year term of candidacy with a possible extension for a fifth year for good cause; or
- withdraw accreditation.

HLC shall require a Board Committee Hearing prior to a final decision by the Board concluding a show-cause order process, unless such hearing is waived by the institution. An institution may have no more than one Board Committee Hearing related to a single institutional decision.

Board Committee Hearing Process

A Board Committee Hearing will be conducted according to a timeframe established by the Board. A Board Committee will consist of three to five members, a majority of which will consist of members of the Board of Trustees, and be selected by vote of the Board members.

A written record shall be made of a Board Committee Hearing, and a transcript made available to all members of the Board prior to their taking final action. Moreover, Committee members will make an oral

report to the full Board of the contents of the hearing prior to the vote of the Board of Trustees regarding the institution.

The fee for a Board Committee Hearing will be set by the Board and will be posted in HLC's schedule of fees. The institution seeking such a hearing will submit the fee with its written request for a hearing.

Policy Number Key

Section INST: Institutional Processes

Chapter E: Sanctions, Adverse Actions, and Appeals

Part 70: Special Protocols Related to Adverse Actions

Last Revised: November 2019

First Adopted: June 2006

Revision History: revised June 2008, December 2009, February 2011, November 2019

Notes: Policies combined November 2012 – 2.2(i), 2.2(j), 2.2(j)1. In February 2021, references to the Higher Learning Commission as “the Commission” were replaced with the term “HLC.”

Related Policies:



Policy Title: Reapplication Following a Denial or Withdrawal of Status

Number: INST.E.80.010

An institution denied candidacy upon initial application must wait one year before reapplying. This period of time may be shortened by action of the Board of Trustees.

An institution denied accreditation upon initial application must wait two years before reapplying. This period of time may be shortened by action of the Board of Trustees.

When accreditation or candidacy is withdrawn by action of the Board of Trustees, the Board of Trustees will not consider an application for accreditation or candidacy from the same institution until a period of at least two years has elapsed following the date the withdrawal action became effective. This period of time may be shortened by action of the Board of Trustees.

Policy Number Key

Section INST: Institutional Processes

Chapter E: Sanctions, Adverse Actions, and Appeals

Part 80: Reapplication following a Denial or Withdrawal of Status

Last Revised:

First Adopted: January 1983 and October 1983

Revision History:

Notes: Policies combined November 2012 – 2.6(a), 2.6(b), 2.6(c). In February 2021, references to the Higher Learning Commission as “the Commission” were replaced with the term “HLC.”

Related Policies:



Policy Title: Appeals

Number: INST.E.90.010

An institution may appeal an adverse action of the Board of Trustees, prior to the action becoming final, by filing a written request to appeal and supporting documentation according to the Appeals Procedures of HLC. Adverse actions are defined as those that (1) withdraw or deny accreditation, except in denial of accreditation where the Board denies an early application for accreditation and continues candidacy status or extends it to a fifth year; or (2) withdraw or deny candidacy.

Grounds for Appeal

The grounds for such an appeal shall be:

- a. The Board's decision was arbitrary, capricious, or not supported by substantial evidence in the record on which the Board took action.
- b. The procedures used to reach the decision were contrary to HLC's policies and procedures, and the procedural error unreasonably impaired the Board's consideration.
- c. The institution has new financial information for consideration. New financial information will only form the basis for an appeal if, as determined in the discretion of the Appeal Panel: (i) the adverse action was based solely on financial grounds; (ii) the financial information was not available at the time the adverse action was made; and (iii) the financial information is significant and bears materially on the financial deficiencies that formed the basis for the adverse action.

Other than as detailed above in (c), the Appeal Panel will only consider such evidence as was provided to the Board at the time it made its decision.

Appeals Body and Appeal Panel

The Appeals Body will consist of 15 persons appointed by the Board of Trustees, following the Board's commitments to diversity and public involvement. From the Appeals Body, the President will establish an Appeal Panel of five persons to hear an institutional appeal. Members of the Appeal Panel will not include current members of the Board nor members of the Board at the time the adverse action was taken. One member of the Appeal Panel will be a public member, in keeping with HLC requirements for public members

on decision-making bodies. The Appeal Panel shall also include representation of individuals who are academics, including faculty members, academic deans or others who have a primary responsibility in the teaching and learning process, and administrators who have a primary responsibility of providing oversight in an institution of higher education.

Members of the Appeal Panel will receive training prior to the appeal hearing. This will include appropriate training regarding appeal procedures and HLC requirements.

Appeal Panel members shall have no conflict of interest that will prevent their fair and objective consideration of the appeal. Where necessary to avoid conflict of interest or in other exceptional circumstances, the President may select individuals outside the Appeals Body as Appeal Panel members. The President will designate one member of the Appeal Panel to serve as the Chair. The President shall notify the institution of the individuals selected to serve on the Appeal Panel and shall afford the institution the opportunity to present objections regarding conflict of interest. The President reserves final responsibility and authority for setting all Appeal Panels.

Appeal Panel members will be required to keep confidential any information learned as a result of participating in an Appeal Panel.

Appeals Procedure

HLC shall establish appeals procedures that, among other things, identify the materials for an appeal, and set out the required timetables and procedures of an appeal. These procedures will be available on HLC website.

Throughout the appeals process, the institution shall have the right to representation of, and participation by, legal counsel at its own expense. HLC may also be represented by legal counsel, both as process advisors and in an advocacy role.

As further described in HLC's appeals procedure, the Appeal Panel has the authority to make a decision to affirm, amend or remand the adverse action. If the Appeal Panel affirms or amends the Board's determination regarding an adverse action, the Appeal Panel then conveys that decision to the Board of Trustees, which must implement the Appeal Panel's decision regarding the status of the institution in a manner consistent with the decision. If the Appeal Panel remands the adverse action to the Board for additional consideration, it will provide an explanation of its decision to remand. Upon remand, the Board may affirm, amend or reverse its action after taking into account those issues identified by the Appeal Panel in the explanation of its remand.

HLC will notify the institution of the result of the appeal and of the final action by the Board and the reason for that result.

An institution may only file a single appeal related to an adverse action.

Institutional Change During Appeal Period

During the period in which an appeal from a decision of HLC by an institution is under consideration, the institution cannot initiate any change that would by policy require HLC approval.

Policy Number Key

Section INST: Institutional Processes

Chapter E: Sanctions, Adverse Actions, and Appeals

Part 90: Appeals

Last Revised: February 2020

First Adopted: February 2001, February 2009, January 1983

Revision History: October 2003, June 2006, February 2009, June 2009, February 2010, February 2011, November 2012, April 2013, February 2019, November 2019, February 2020

Notes: Policies combined November 2012 - 2.6(d), 2.6(d)1, 2.6(d)2, 2.6(d)3, 2.6(d)4. In February 2021, references to the Higher Learning Commission as “the Commission” were replaced with the term “HLC.”

Related Policies:



Policy Title: Routine Monitoring and Data Collection

Number: INST.F.10.010

Monitoring on Pathways. An institution on the Standard or Open Pathway may be required to file one or more interim reports. An institution on the Standard Pathway may be required to host one or more focused visits. Such monitoring shall be appropriate in circumstances where the team has concluded that HLC should review the institution's progress in addressing a serious issue at the institution, the resolution of which is relevant to the institution's future compliance with, or improvement regarding, the Criteria for Accreditation. HLC staff may seek external assistance from peer reviewers or individuals with appropriate expertise who do not participate as peer reviewers in the evaluation process related to monitoring but provide particularized advice and assistance where appropriate to HLC staff or evaluation team members.

Other Monitoring. An institution, regardless of its pathway, is always subject to monitoring in the form of interim reports or focused evaluations related to review by HLC of the following: financial and non-financial indicators; a change of control, structure or organization transaction; substantive change; complaints; conformity with Assumed Practices; or other HLC investigation or review.

Process for Requiring Monitoring. An evaluation team or staff may recommend that an institution be required to file an interim report or host a focused on-site evaluation on one or more topics. The President may also act to require routine monitoring in a manner consistent with policy on Staff Authority COMM.B.10.020. Following review of routine monitoring conducted by peer reviewers or with external assistance from individuals with appropriate expertise employed by HLC, an appropriate decision-making body, or HLC staff where allowed by HLC policy, shall determine whether the monitoring is appropriate for the institution, and, if so, shall act to approve such monitoring.

For an institution that is being considered for initial accreditation, such monitoring shall be appropriate in conjunction with the grant of initial accreditation only when the monitoring is with regard to a discrete issue and does not call into the question the institution's compliance with the Criteria for Accreditation, in which case the institution will not be granted initial accreditation.

Interim Reports. An institution shall submit a required interim report according to the due date established in the action calling for the interim report. HLC may designate staff, or other individuals with appropriate

expertise, to review and prepare a written analysis of all reports and to act on behalf of HLC to accept the report or require additional reports on the same or related topic or may recommend to HLC's decision-making bodies that further monitoring, including new interim reports or focused visits, as appropriate to the institution's Pathway assignment, be required on the same topics identified in the action or on other topics.

Focused Visits. An institution that is assigned a focused visit shall host such focused visit according to the date established in the action calling for the focused visit. The institution shall submit a focused report to HLC prior to the evaluation on the topics identified in that action prior to the focused visit. HLC staff may expand the focus of the evaluation where appropriate to review additional topics of concern to HLC. The focused visit shall be conducted by a team of HLC peer reviewers appointed by HLC staff. The length of the focused visit shall be one and one-half days, but HLC may lengthen or shorten the visit or require that team members conduct additional on-site visits to the institution's facilities to examine specific issues.

The focused visit team will prepare a written report addressing the topics of concern identified in the action calling for the focused visit and any areas of concern raised by HLC staff and identifying deficiencies, if any, at the institution. The focused visit team report shall include a recommendation for HLC action either accepting the institution's focused report or calling for additional monitoring, sanction, Show-Cause Order or withdrawal of accreditation. The institution shall have the opportunity to file a written response to the focused visit report prior to a decision-making body acting on the report. Focused visit reports will be considered through HLC's regular review and decision-making processes.

Data Reporting From Member Institutions

All member institutions will complete data reports for HLC; such reporting will occur annually as well as periodically. HLC, with oversight as appropriate from the Board of Trustees, will determine the contents of this reporting to assure that it addresses potential or developing problems with an institution's compliance with accrediting requirements and institutional stability, as well as solicits updated information on the scope of activities of each member institution. Data required from each institution will include, at minimum, annual financial information, headcount and enrollment, measures related to student achievement, and other indicators. The data reporting will provide HLC with sufficient information to understand and respond to significant shifts in an institution's capacity and/or scope of educational activities.

Institutional Contact for Data Reporting

To assure that the institution provides accurate and consistent information, each member institution identifies an Accreditation Liaison Officer (ALO) who will bear administrative responsibility for submitting the report in a timely manner. HLC training will be available for those liaisons.

HLC Follow-Up to Institutional Data

In reviewing and analyzing institutional data, HLC will look at relationships among a variety of indicators and other information in any given year or over several years. If those relationships suggest that the organization may be experiencing problems or very rapid change, HLC will ask the organization to submit an explanation of the data. In particular, HLC will ask institutions that were identified through review of information about student achievement for more information about student academic achievement at those institutions. HLC staff may forward data, and any explanation or other information provided by the institution, to a peer review panel for further review. Such panel may conduct its review in a scheduled meeting or by any means that allows for synchronous or asynchronous communication. If data submitted by an institution, particularly enrollment information, financial indicators based on financial ratios, or any other additional information required by a peer review panel, are indicative of problems, rapid change, significant growth, or require validation, such peer review panel or HLC staff may call for an on-site evaluation as soon as possible; require that an institution address concerns arising from these data in the next evaluation process; or recommend to the Institutional Actions Council additional institutional monitoring through any process provided for in HLC policy and procedure.

Monitoring of Student Enrollment Growth

HLC will monitor enrollment growth through institutional annual data reporting and will monitor on an ongoing basis growth in enrollment at those institutions that have significant enrollment growth as defined in HLC procedures. HLC will ask institutions that have been identified through the annual data reporting process as having significant enrollment growth to provide information about enrollment growth at the program level. HLC may take follow-up action.

Surveying of Students

HLC may survey students of an institution to gather information about their experience at the institution prior to a comprehensive evaluation at the institution scheduled by HLC. HLC will provide aggregate data resulting from the survey to the institution under review and the evaluation team prior to the comprehensive evaluation. The institution will have an opportunity to provide additional information or other data in response to the student survey data to the evaluation team and HLC prior to the comprehensive evaluation.

Policy Number Key

Section INST: Institutional Processes

Chapter F: Maintenance and Monitoring

Part 10: Routine Monitoring

Last Revised: February 2021

First Adopted: November 1999, February 2003, February 2007

Revision History: February 2001, February 2007, February 2009, February 2010, November 2010, June 2012, November 2012, April 2013, February 2014, June 2014, November 2018, June 2020, November 2020, February 2021

Notes: Policies combined November 2012 – 3.6, 3.6(a), 1.3, 1.3(a), 1.3(b), 1.3(c). In February 2021, references to the Higher Learning Commission as “the Commission” were replaced with the term “HLC.”

Related Policies:



Policy Title: Special Monitoring

Number: INST.F.20.010

HLC reserves the right to call for special monitoring when the integrity of the institution and its educational programs might be in jeopardy. The President may conduct such monitoring by calling for a special report or an advisory team visit, by imposing a designation or by calling for other activities intended to gather further information about situations at institutions that give rise to concerns about the integrity of the institution or its educational programs. The President of HLC shall determine whether the institutional liaison or other HLC staff member will accompany the Advisory Team Visit.

A special report or advisory team report, including any specified deficiencies identified by the team at the institution, will not be reviewed through HLC's regular review processes; it may be used by the President to provide information, to support a recommendation by the President to HLC's decision-making processes for a possible sanction or monitoring, or for any other purpose supported by the policies and practices of HLC. The President may seek external assistance from peer reviewers or individuals with appropriate expertise who do not participate as peer reviewers in the evaluation process but provide particularized advice and assistance where appropriate to HLC staff or evaluation team members.

Any action proposed by the President will be shared with the institution for response at least two weeks prior to the intended date of deliberation and decision. Among the situations that might result in such monitoring are:

1. institutional declaration of bankruptcy, financial exigency, or intent to close;
2. highly publicized and divisive controversies among the governing board, the administration, and/or the faculty or the student body;
3. significant unanticipated reduction in program offering, faculty, and/or enrollment;
4. public sanctions applied by governmental agencies or by other accrediting or licensing bodies;
5. serious legal, financial, or ethical investigations, including those involving adjudication in courts;
6. financial audit reports that raise serious concerns about financial viability or financial management practices;

7. serious misrepresentation to students and the public.

Presidential Recommendation

HLC's President shall have the authority to take a recommendation to the appropriate HLC decision-making body to require regular monitoring, a sanction, the issuance of a Show-Cause Order, or withdrawal of accreditation for an institution, subject to HLC policy and procedures related to those actions.

Institutional Designations

Financial Distress. HLC's President, after consultation with the Board of Trustees, shall have the authority to determine that an institution undergoing a significant challenge to its fiscal capacity should receive this designation. Conditions that may contribute to a designation of *in financial distress* include, but are not limited to: significant diminished financial contribution from a state; significant escalation in institutional indebtedness; placement by the U.S. Department of Education on Heightened Cash Monitoring for significant reasons related to finances or financial management of the institution or any parent or superordinate entity; formal declaration by the institution of financial exigency or emergency; going concern warning by the institution's auditors; or other similar financial situation. Typically, this designation will be accompanied by a finding by HLC President that Core Component 5.B or 2.A is met with concerns.

Governmental Investigation. HLC's President, after consultation with the Board of Trustees, shall have the authority to determine that an institution undergoing investigations by one or more governmental agency, law enforcement body, or court should receive this designation. Conditions that may contribute to a designation of *under governmental investigation* include, but are not limited to: investigation by one or more state attorneys general, the Federal Trade Commission, the U.S. Department of Justice or other federal agency; a notice of intended limitation, suspension or termination action by the U.S. Department of Education; or other significant investigations, litigation or enforcement action by or joined by a governmental authority related to its institutional or academic operations or activities. Typically, this designation will be accompanied by a finding that Core Component 2.A is met with concerns.

Purpose and Other Details Related to Institutional Designations. The purpose of these designations shall be to inform the public that the institution is dealing with a significant financial condition(s) or being investigated by a governmental agency. Such situations have the potential to affect the institution's operations, and the public should be aware of this information in making a decision to attend or continue to attend the institution under the designation. Any designation issued by HLC President shall be public.

Typically, the designation will not extend more than two years. During this period HLC shall require that the institution submit regular reports about its financial or legal situation or undergo other regular or special

monitoring, including Advisory Visits, as determined by HLC President. An institution that has one of the above designations is not precluded from also being placed by HLC on a sanction if appropriate. During the monitoring or evaluation process, the institution may request removal of the designation, although final determination of the appropriateness of removing the designation shall remain with HLC President or the Board if the case is otherwise subject to the Board's review.

Substantive Change While an Institution Has a Designation. An institution in financial distress or under governmental investigation shall not be considered for a substantive change unless it can demonstrate that there is a compelling reason for the change and that the institution has sufficient resources to support the change. Any substantive change application from an institution with a current designation will be subject to strict scrutiny and may be deferred by staff or by the Institutional Actions Council for consideration by HLC after it has removed the designation, or the application may be denied.

Process for Imposing or Removing a Designation

HLC's President will notify the institution of the intent to designate the institution in one of the above categories and will allow the institution a minimum of two weeks to respond before acting with regard to the proposed designation. (Note that the institution may request up to an additional two weeks to respond if it has good cause for such an extension.) The President will take into account the institution's response in making the decision whether to assign the designation. All designations are public. The President or the Board will also determine when to remove a designation from an institution. The President will re-evaluate the designation at the end of the two-year timeframe, and during the two-year timeframe as new or additional information of significance becomes available to HLC, to determine whether the designation shall be removed. The President or the Board will remove the designation when in the President's or Board's sole judgment the designation is no longer required because the institution has resolved the issues that led to the designation. Any decision of the President or the Board related to imposing or removing a designation is final.

Policy Number Key

Section INST: Institutional Processes

Chapter F: Maintenance and Monitoring

Part 20: Intermittent Monitoring

Last Revised: June 2020

First Adopted: November 1999

Revision History: February 2001, February 2007, June 2012, November 2012, August 2016, June 2020

Notes: Former policy number 3.6(b), 3.6(c). In February 2021, references to the Higher Learning Commission as “the Commission” were replaced with the term “HLC.”

Related Policies: COMM.B.10.010 Staff Role and Responsibility



Policy Title: Financial Panels

Number: INST.F.20.020

The purpose of a Financial Panel is to review institutions' financial indicators based on their annual submission of financial ratios. The Financial Panel may request additional documentation from institutions for review when appropriate. The Panel may request that institutions address financial and related concerns in their next Self-Study and visit process. The Panel may recommend for action by the Institutional Actions Council additional institutional monitoring through any process provided for in HLC policy and procedure.

A Financial Panel is comprised of two or more financial professionals selected by the staff from the Peer Review Corps or from member institutions. The Panel may conduct its review of actions in a scheduled meeting or by any means that allows for synchronous or asynchronous communication.

Policy Number Key

Section INST: Institutional Processes

Chapter F: Maintenance and Monitoring

Part 20: Intermittent Monitoring

Last Revised:

First Adopted: June 2008

Revision History:

Notes: Policies combined November 2012 – 2.2(e), 2.2(e)1. In February 2021, references to the Higher Learning Commission as “the Commission” were replaced with the term “HLC.”

Related Policies: INST.F.10.010 Routine Monitoring



Policy Title: Non-substantive Changes in the Accreditation Relationship Between an Institution and HLC

Number: INST.F.20.030

HLC may request or HLC staff may initiate non-substantive changes in the terms of HLC's relationship with the institution as outlined in the Statement of Accreditation Status. HLC approval is required to change the terms of the accreditation relationship with an institution in any of the following ways:

1. Change existing stipulations in a manner consistent with a proposed change requiring prior approval by a decision-making body of HLC.
2. Change the date of the next comprehensive evaluation or Assurance Review:
 - Changes of no more than one year from the date set by the last action following an evaluation process. (HLC staff may approve the change unless the one-year extension places an institution's comprehensive evaluation beyond the ten years required by HLC policy.
 - Changes of more than one year from the date set by the last action following an evaluation process or beyond the ten year maximum for comprehensive evaluations. Extensions of more than one year and extensions beyond ten years may be granted only for good cause. (Institutional Actions Council must act to approve all such changes.)
3. Change the date of other visits or required reports or other HLC monitoring or interaction previously scheduled for the institution, including accepting required progress or monitoring reports or scheduling follow-up reports on the same or related topics. (HLC staff may approve the change).
4. Require new monitoring be added to the Statement of Accreditation Status. (HLC staff may make a recommendation for action to the Institutional Actions Council to approve the change, except that the President may act, without first seeking approval of the Institutional Actions Council, to require routine monitoring immediately following the conclusion of any special monitoring process conducted under INST.F.20.010 Special Monitoring [<https://www.hlcommission.org/Policies/special-monitoring.html>].)
5. Remove an institution from the Notification Program for Additional Locations. (HLC staff may approve removal.)

Process for Initiating a Non-substantive Change in the Relationship With HLC

The institution may file a written application seeking a change in its relationship with HLC in any of the ways defined above. Alternatively, HLC staff may propose such a change and will provide the proposed action or recommendation in writing to the institution for comment. The institution will be provided an opportunity to respond in writing to any change in relationship with HLC arising from its own application or at the initiative of HLC. Where such action is unfavorable to the institution, HLC will consider the institution's response prior to completing any staff action or action by the IAC.

Policy Number Key

Section INST: Institutional Processes

Chapter F: Maintenance and Monitoring

Part 20: Intermittent Monitoring

Last Revised: February 2021

First Adopted: November 1999, June 2010

Revision History: November 1999, June 2009, June 2011, June 2012, February 2021

Notes: Policies combined November 2012 – 3.1, 3.1(a). In February 2021, references to the Higher Learning Commission as “the Commission” were replaced with the term “HLC.”

Related Policies: INST.B.20.030 Effective Date of Accreditation Actions



Policy Title: Substantive Change

Number: INST.F.20.040

An institution shall have the obligation hereunder to report certain changes, some of which may constitute substantive changes under federal regulation, to HLC as identified in this policy and related policies and to seek and receive HLC approval where appropriate prior to implementing specific changes.

The institution shall use HLC's change reporting protocol for this purpose. Changes identified as requiring prior HLC approval prior to implementation shall be included in the institution's accreditation only after HLC has reviewed the change through a process identified in these policies and formally acted to approve the change. Changes identified as requiring HLC notification are generally included in the institution's accreditation provided that the institution provides timely notification to HLC through the Institutional Update and other data reporting instruments established by HLC according to a schedule established by HLC. Additionally, institutions that have access to the Notification Program for Additional Locations must notify HLC and receive acknowledgment prior to initiating the Additional Location.

As further detailed below, some of these requirements only apply to institutions that are currently on a sanction or under a Show-Cause Order or that have been on a sanction or under a Show-Cause Order in the prior three academic years.

Substantive Change Requiring Notification or Approval

1. Changes in actual or apparent mission of the institution or its educational objectives require prior HLC APPROVAL.
2. Significant changes in the character or nature of the student body of the institution, particularly, but not limited to, those changes involved in seeking international students for the first time or acquiring students being taught-out of programs provided by a closing institution require prior HLC APPROVAL.
3. Initiation of new academic program(s) or major(s) other than those listed below, or cancellation or suspension of academic programs requires HLC NOTIFICATION. (Note: HLC may provide approval on a temporary basis for the initiation of new academic programs or majors to facilitate a teach-out at

another institution or for other appropriate purposes.) The following changes require prior HLC APPROVAL:

- a. The addition of academic program(s) at a degree or credential level not previously included in the institution's accreditation by HLC;
 - b. the addition of academic program(s), including Title IV-eligible Certificate programs not related to existing degree programs, that represent a *significant departure* from programs previously included in the institution's accreditation;
 - c. the addition of a direct assessment program or the addition of competency-based programs wherein the academic program is organized around competencies;¹
 - d. the addition of academic programs that require allocation of substantial financial investment or resources, or any programs acquired from another institution;
 - e. the addition of academic programs outside stipulations imposed by a previous HLC action limiting such activity without prior approval.
4. A change in one or more of the following requires NOTIFICATION OR APPROVAL:
- a. change from clock to credit hours in one or more institutional programs;
 - b. substantial increase or decrease in the number of clock or credit hours required for successful completion of an academic program;
 - c. change in term length (e.g. semesters to quarters or semesters to a five-week compressed term) that affects 25% or more of all the institution's courses or programs;
 - d. increase or decrease in the number of credit hours per course in 25% or more of the courses in the institution's curriculum; and
 - e. a change in the manner(s) in which an institution measures student progress, regardless of method.
5. Change in the method of delivery of courses or programs requires prior HLC APPROVAL:
- a. The initial offering of academic programs through distance, correspondence or other alternate delivery wherein 50% or more of the courses or credits in the program are provided through the alternate delivery;
 - b. The initial offering of courses through distance, correspondence or other alternate delivery if the institution is not already approved to offer programs through that delivery mechanism; and

- c. Programs offered for the first time by an institution are subject to review and approval, if required, by HLC as a new program (see #3 of this section) prior to being reviewed as distance or correspondence education.
6. The establishment of a campus, including a branch campus, or an additional location requires prior HLC APPROVAL unless the institution has been approved for access to the Notification Program for Additional Locations as outlined in INST.F.20.050.
7. The acquisition of a campus, including a branch campus, or an additional location from another institution, including one established or acquired in order to provide for teach-out of the students from another institution, requires prior HLC APPROVAL unless the institution has been approved for access to the Notification Program for Additional Locations as outlined in INST.F.20.050.
8. Closure or suspension for more than one semester of any of the following requires HLC NOTIFICATION:
 - a. an additional location, or
 - b. a campus, including a branch campus.
9. The initiation of a contractual or other arrangement wherein an institution outsources some portion of one or more of its educational programs to any of the following parties: an unaccredited institution; an institution that is not accredited by an accreditor recognized by the U.S. Department of Education; or a corporation or other entity:
 - a. less than 25% of any educational program outsourced to the other party requires HLC APPROVAL for institutions that are currently on a sanction or under a Show-Cause Order or that have been on a sanction or under a Show-Cause Order in the prior three academic years and requires HLC NOTIFICATION for all other institutions;
 - b. 25%-50% of any educational program outsourced to the other party requires prior HLC APPROVAL;
 - c. more than 50% of any educational program outsourced to the other party will receive intense scrutiny and will not be approved by HLC except in exceptional circumstances. (Note that federal regulations provides that educational programs provided through contractual arrangements between an accredited institution and an ineligible entity wherein more than 50% of the educational program is being provided by the ineligible entity will not receive Title IV assistance even if approved by the accreditor.)

10. A change in the legal status, form of control, or ownership of the institution shall be subject to the requirements of and procedures associated with HLC's policies related to Change of Control, Structure or Organization.
11. The following changes require HLC NOTIFICATION within thirty (30) days:
 - a. A change in an existing program's method of delivery.
 - b. An aggregate change of 25 percent or more of the clock hours, credit hours, or content of a program since the agency's most recent accreditation review.
 - c. The development of customized pathways or abbreviated or modified courses or programs to:
 - i. Accommodate and recognize a student's existing knowledge, such as knowledge attained through employment or military service; and
 - ii. Close competency gaps between demonstrated prior knowledge or competency and the full requirements of a particular course or program.
 - d. The initiation of a contractual or other arrangement wherein an institution outsources some portion of one or more of its educational programs to any of the following parties: an unaccredited institution; an institution that is not accredited by an accreditor recognized by the U.S. Department of Education; or a corporation or other entity.
12. Beginning with institutions placed on a sanction or under a Show-Cause Order after July 1, 2020, the changes detailed above in #9 and #11 require HLC APPROVAL for institutions that are currently on a sanction or are under a Show-Cause Order or that have been on a sanction or under a Show-Cause Order in the prior three academic years.

¹For institutions that offered competency-based programs prior to December 1, 2014, HLC will validate the ongoing approval of the programs and their inclusion in the accreditation of the institution.

Policy Number Key

Section INST: Institutional Processes

Chapter F: Maintenance and Monitoring

Part 20: Intermittent Monitoring

Last Revised: June 2020

First Adopted: June 2010

Revision History: November 2011, November 2012, April 2013, November 2013, February 2014, February 2016,

February 2020, June 2020

Notes: Policies combined November 2012 – 3.2(a), 3.2(b), 3.2(b)1. In February 2021, references to the Higher Learning Commission as “the Commission” were replaced with the term “HLC.”

Related Policies: INST.B.20.040 Change of Control, Structure, or Organization, FDCR.B.10.010 HLC Approval of Institutional Teach-Out Arrangements, INST.F.20.030 Non-Substantive Changes in the Accreditation Relationship Between an Institution and HLC



Policy Title: Review of Substantive Change

Number: INST.F.20.050

The review process for requests for approving those substantive changes that require HLC APPROVAL as detailed in HLC policies shall primarily be determined in the following two ways: (1) each member institution shall be assigned a designation by HLC according to its experience and maturity in offering new educational programs and new methods of delivery, including offering distance and correspondence education; (2) HLC shall determine the complexity of the specific proposed changes being requested for approval.

An institution requesting prior approval of a substantive change shall present appropriate application information seeking approval of the change according to HLC's change review protocols. Generally, such materials shall be reviewed by HLC according to the provisions of this section; however, certain types of change may require additional review provisions as provided herein.

As determined by the designation of the institution and the complexity of the change, and unless otherwise stated herein, the change request will be reviewed by one of the following: a Change Panel, a Change Visit or a Desk Review, each of which is described below.

With the exception of changes submitted under [INST.F.20.030 Non-Substantive Changes in the Accreditation Relationship Between an Institution and HLC - Notification](#), all change requests will be presented for final review and approval by an HLC decision-making body recognized by the U.S. Department of Education. Changes will be effective on or after the date of the action of that body. In no case will such approval be retroactive.

Change of Control, Structure or Organization. The review process for requests for changes identified as subject to HLC's Change of Control, Structure or Organization policy will be reviewed in accordance with separate associated procedures found in HLC's policies regarding Change of Control, Structure or Organization.

Review of a Campus. Institutions seeking HLC approval of a main campus or branch campus that houses a full range of instruction as well as administrative and support services shall provide a business plan for the new campus that specifies the following:

1. the educational programs to be offered at the campus;
2. the projected revenues, expenditures and cash flow at the campus; and
3. the operational, management, and physical resources at the campus.

Within six months of the date the campus matriculates students and offers instruction, HLC will conduct a campus visit.

Review of Additional Locations. The review process for additional locations offering 50% or more of an academic program shall be determined in the following two ways: (1) each member institution shall be assigned a designation by HLC according to its experience and maturity in offering new additional locations; (2) HLC shall determine the complexity of the specific proposed changes being requested for approval. Such review shall include consideration of the institution's fiscal and administrative capacity to operate that location. The only exception shall be for institutions approved for access to the Notification Program for Additional Locations, as defined in this policy.

Within six months of the date an institution matriculates students and begins instruction at any of its first three new additional locations, HLC will conduct an on-site evaluation visit to that additional location.

Notification Program for Additional Locations. Institutions that have previously received approval from HLC to initiate at least three additional locations may seek access to the Notification Program for Additional Locations. Such access shall reflect HLC's determination that the institution has a proven record of educational and administrative oversight of such locations and has the capacity to extend that oversight to new additional locations. An institution's request for initial access to the Notification Program will be granted only after the institution has been reviewed by a Change Visit or other review for other additional locations resulting in a written report that documents the institution's compliance with appropriate requirements as outlined in this policy. Staff may act to remove an institution temporarily or permanently from the Notification Program in the following circumstances: (1) when an institution's capacity to provide appropriate oversight over its existing or future additional locations has been called into question; (2) when it has been placed on sanction or Show-Cause; or (3) when it has had its accreditation withdrawn even though such action may be stayed while pending appeal or other proceeding.

An institution with access to the Notification Program for Additional Locations will be able to open new additional locations as defined in the institution's Statement of Accreditation Status after notifying HLC prior

to initiating any new additional locations and receiving an acknowledgment that HLC has added the new additional location to its database.

Access to the Notification Program for Additional Locations will be granted only to institutions that meet the following criteria:

1. accreditation by HLC for at least 10 consecutive years with no record of any action during that period for Probation, Show-Cause, or monitoring of issues related to the quality of instruction or to the oversight of existing additional locations or campuses. An institution that has been on Notice for issues unrelated to the quality of instruction or oversight of additional locations or campuses and was approved for the Notification program prior to being placed on Notice may seek readmission to the Notification program after the next comprehensive evaluation or after a period of four years, whichever is longer; if the Notice was related to the quality of the institution's off-campus instruction or related issues, the institution may not reapply until it has completed the ten years of good standing required for access to the Notification Program for Additional Locations.
2. demonstrated success in overseeing more than three locations;
3. no other HLC or other legal restrictions on additional locations and/or programs offered off campus; and
4. appropriate systems at the institution to ensure quality control of locations that include clearly identified academic controls; regular evaluation by the institution of its locations; a pattern of adequate faculty, facilities, resources, and academic/support systems; financial stability; and long-range planning for future expansion.

Continued institutional eligibility for access to the Notification Program for Additional Locations will be reviewed at least every five years, typically in conjunction with the comprehensive evaluation and the multi-location visit.

An institution with access to the Notification Program for Additional Locations that undergoes a Change of Control, Structure or Organization as defined in HLC policy will no longer be eligible for the Notification Program until such time as it demonstrates at the time of the next comprehensive evaluation after the transaction is approved by HLC that it continues to meet the requirements for inclusion in the program.

Substantive Change Review Process Structure

Change Panel. A Change Panel shall consist of three or more peer reviewers who shall review applications for approval of substantive change submitted by institutions.

The Change Panel may seek additional information from the institution if such information is being sought to explain or clarify the materials provided by the institution in its application for change.

The Change Panel may recommend that the change be denied or that it be approved with or without additional monitoring as appropriate. Such recommendation will then be forwarded to an appropriate HLC decision-making body. The institution shall be given an opportunity to review the recommendation and provide an institutional response prior to consideration by the decision-making body.

Alternatively, the Change Panel may recommend that the change be further evaluated by an on-site evaluation team, either by a Change Visit or by a previously scheduled focused or comprehensive evaluation.

Change Visit. A Change Visit shall consist of a team of two or more peer reviewers designated by HLC who shall review applications for approval of substantive change submitted by institutions.

The Change Visit team may recommend that the change be denied or that it be approved, with or without additional monitoring as appropriate. Such a recommendation will then be forwarded to an appropriate HLC decision-making body. The institution shall be given an opportunity to review the recommendation and provide an institutional response prior to consideration by the decision-making body.

Desk Review. A Desk Review shall consist of a review of a proposed institutional change conducted by HLC staff. The staff member may recommend that the change be denied or that it be approved, with or without additional monitoring as appropriate. The Desk Review will result in a recommendation for approval of substantive change to an appropriate HLC decision-making body.

Policy Number Key

Section INST: Institutional Processes

Chapter F: Maintenance and Monitoring

Part 20: Intermittent Monitoring

Last Revised: November 2020

First Adopted: November 1999, June 2010

Revision History: November 1999, June 2009, June 2011, June 2012, November 2012, February 2014, June 2020, November 2020

Notes: Policies combined November 2012 – 3.2(b)1.1, 3.2(b)1.2, 3.2(b)1.3, 3.2(b)1.4, 3.2(b)1.4a, 3.2(b)1.4b, 3.2(b)1.4c, 3.2(b)1.4d, 3.2(b)1.4e, 3.2(b)1.5, 3.2(b)2, 3.2(b)2.1, 3.2(b)2.2, 3.2(b)2.3. In February 2021, references to the Higher Learning Commission as “the Commission” were replaced with the term “HLC.”

Related Policies: INST.B.20.030 Effective Date of Accreditation Actions



Policy Title: Monitoring of Substantive Change

Number: INST.F.20.060

HLC may monitor any approved substantive change through required progress or monitoring reports or on-site evaluations and shall monitor specific changes.

Campus Evaluation Visit. HLC will conduct an on-site evaluation visit to a new campus or branch within six months of matriculation of students and initiation of instruction at such campus. The visit shall be conducted by HLC peer reviewers and shall be handled according to the procedure for a focused evaluation.

Additional Location Confirmation Visit. HLC will conduct an on-site visit of each of the first three additional locations begun by an institution within six months of matriculation of students and initiation of instruction at the additional location. The visit may be conducted by HLC peer reviewers or HLC staff and will be to confirm the accuracy of the information provided to HLC concerning the quality and oversight of the education at the additional location when it was originally approved by HLC. HLC site visitors may call for further monitoring of an institution's additional locations through HLC's established monitoring processes. Such recommendations for further monitoring will be reviewed and acted upon by an HLC decision-making body.

Multi-Location Evaluation Visit. HLC will conduct an on-site visit to additional locations of an institution with multiple off-campus additional locations (more than three such locations) every five years. The visit shall take place to a sample of such locations as defined in HLC procedure. The visit may be scheduled proximate to an on-site evaluation, an Assurance Review, comprehensive evaluation, or Comprehensive Quality Review, where appropriate to inform that team's evaluation. The visit may be made by HLC peer reviewers or HLC staff and will be to confirm the continuing effective oversight by the institution of its additional locations. HLC site visitors may call for further monitoring of an institution's additional locations through HLC's established monitoring processes.

If an institution is part of the Notification program for new additional locations, the visit will consider whether the institution continues to meet the requirements for access to the program outlined in the policy and will make a recommendation for the institution's continued participation in that program. Such recommendations will be reviewed and acted upon by an HLC decision-making body.

Other Monitoring Related to Additional Locations. HLC will require a Change Visit before extending accreditation to include a new additional location for an institution under HLC sanction, an institution experiencing serious financial problems, or where HLC has raised questions about the institution’s quality assurance processes in its off-campus operations. HLC will also monitor institutions experiencing rapid growth of additional locations through either an on-site focused visit or through other forms of monitoring.

Other Monitoring Related to Substantive Change. HLC reserves the right to initiate monitoring related to any substantive change it has previously approved if it has questions about the quality of that change in its execution or the institution is experiencing rapid growth in some aspect of the institution’s operations related to the approved change.

Cumulative Substantive Changes that Result in a Comprehensive Evaluation. HLC reserves the right to call for a comprehensive evaluation when changes made or proposed by an institution are so extensive that they call into question whether they fundamentally alter the nature or character of the institution HLC accredited at the time of the institution’s last comprehensive evaluation. These changes include, but are not limited to, the any or all of the following:

1. extensive numbers of new or revised academic programs;
2. extensive numbers of new campuses or additional locations;
3. significant new populations of students;
4. new delivery formats including distance, correspondence, compressed, or other formats;
5. frequent significant modifications to corporate or governance structures;
6. involvement of the institution in one or more joint ventures, limited partnerships or other arrangements that may affect its academic programs, services, students, or governance structure.

Policy Number Key

Section INST: Institutional Processes

Chapter F: Maintenance and Monitoring

Part 20: Intermittent Monitoring

Last Revised: June 2020

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Related Policies: INST.B.20.030 Effective Date of Accreditation Actions



Policy Title: Processes for Seeking Approval of Change of Control

Number: INST.F.20.070

HLC's Board will make all decisions regarding approval of applications reviewed under this policy taking into consideration a Change of Control report developed as a result of the evaluation of any such application. For such Change of Control evaluations, HLC staff may seek external assistance from peer reviewers or individuals with appropriate expertise in conducting a review of the institution's documentation, or may require an on-site visit to gather evidence about the proposed Change of Control, Structure or Organization.

The Board may act in agreement with any recommendation put forward in a Change of Control report (if one is made) or the Board may develop and act on its own recommendation. The Board may elect to provide the institution with thirty days to respond to any recommendation the Board develops before the Board takes final action.

The Board may approve the application, thereby authorizing accreditation for the institution subsequent to the close of the transaction, or it may deny the application. The Board may defer its consideration of the application to the next Board meeting date pending receipt of additional information or action by a third party such as the state or another recognized accreditor. The Board may make use of other options identified in this section.

The Board may approve the application subject to certain conditions. Such conditions may include, but are not limited to, limitations on new educational programs, student enrollment growth, development of new campuses or sites, etc. Related to these conditions, the Board may require that it review and approve certain changes at the institution prior to their inception. The institution and other parties involved in the transaction have 14 calendar days after receiving the Board's action letter to indicate in writing the acceptance of these conditions. If the institution and the other parties do not respond in writing or decline to accept the conditions, the Board may immediately act to rescind its approval. Under such circumstances, the parties to the Change of Control, Structure or Organization may not act to consummate the Change of Control contemplated by the Change of Control application until

accepting in writing the Board's conditions, if any. A Change of Control consummated after failing to accept the Board's conditions shall be treated as not having received prior HLC approval under these policies and the resulting institution's accreditation may be withdrawn.

The Board reserves the right to delegate to a Board subcommittee, prior to the decision by the full Board, the review of any Change of Control application, and that subcommittee may make a recommendation to the full Board regarding the decision on such application.

The Board's action to approve a Change of Control, Structure or Organization application may designate an effective date of approval provided that such date will be not later than 30 days from the date of the action. If the institution does not consummate the Change of Control within this 30-day period, the institution must notify HLC and seek a revised effective date, which may involve providing additional information to HLC and another action by the Board of Trustees.

Evaluative Framework for Change of Control, Structure or Organization

Among multiple factors considered in determining whether to approve a particular application, the Board shall weigh the following five key factors:

1. Whether the proposed change represents the extension of the mission, educational programs, student body and faculty that were in place when HLC last conducted an on-site evaluation of the member institution;
2. The on-going continuation and maintenance of the institution that has historically been a member of HLC with regard to its objectives, outreach, scope, structure, and related factors;
3. Substantial likelihood that the institution, including the revised governance and management structure of the institution, will continue to meet HLC's Eligibility Requirements, and will continue to meet, or meet with concerns, the Criteria for Accreditation;
4. Sufficiency of financial support for the transaction; and
5. Previous experience in higher education and accreditation, qualifications, and resources of new owners, Board members or other individuals who play a key role in the institution or related entities subsequent to the transaction, as well as such parties' record of integrity in dealing with students, the business community, agencies of government or other accreditors.

If the Board determines in its sole discretion that the application fails to meet one or more of the five key factors, the Board will not approve the proposed Change of Control, Structure or Organization.

The Board reserves the right to deny an application based on other evidence unrelated to the five key factors, provided the Board signals its intent to the institution submitting the application, articulates its rationale and makes such evidence available to the institution for response. An institution shall have 30 days to respond to notice of the Board's intended action.

The Board may also renew the institution's eligibility for its existing pathways assignment or place the institution on a different pathway.

Other Board Options

The Board may act, prior to approving the proposed Change of Control, to require additional review through the Eligibility Process or through a Fact-Finding Review, which may be an additional such Review, conducted by peer reviewers or by other higher education, legal or accounting professionals. The review shall be conducted within sixty days of the Board's action requiring such review, and the results shall be available to the Board at its next regularly scheduled or special meeting. The institution will have seven working days to respond to the report prepared for the Board prior to the Board's meeting.

In cases in which the Board decides, in its sole discretion, that the proposed transaction builds a new institution bypassing the Eligibility Process and initial status review by means of a comprehensive evaluation, HLC Board shall not approve the Change of Control, Structure or Organization.

Evaluations Related to Change of Control, Structure or Organization

Change of Control Evaluation. Evaluations conducted under this policy, which may involve an on-site visit in addition to a documentary review, shall be conducted in accordance with HLC's published Change of Control Procedures prior to any Board decision regarding a proposed Change of Control, Structure or Organization. The role of such evaluations will be to determine the extent to which the Change of Control application meets the Key Factors for approval articulated in this policy.

Policy Number Key

Section INST: Institutional Processes

Chapter F: Maintenance and Monitoring

Part 20: Intermittent Monitoring

Last Revised: November 2020

First Adopted: June 2009

Revision History: February 2010, February 2012, June 2012, June 2015, February 2017, November 2018, November

2019, November 2020

Notes: Policies combined November 2012 – 3.3(c), 3.3(c)1, 3.3(c)2, 3.3(c)3, 3.3(d), 3.3(d)1. In February 2021, references to the Higher Learning Commission as “the Commission” were replaced with the term “HLC.”

Related Policies: INST.B.10.030 Related Entities, INST.B.20.040 Change of Control, Structure, or Organization, INST.F.20.080 Monitoring Related to Change of Control, Structure or Organization



Policy Title: Monitoring Related to Change of Control, Structure or Organization

Number: INST.F.20.080

Evaluation After the Change of Control (Post-Change of Control Visit). If the Board votes to approve the Change of Control application with or without conditions, thereby authorizing accreditation for the institution subsequent to consummation of the Change of Control, HLC will conduct an evaluation of the institution no later than six months after such consummation. A previously scheduled focused or comprehensive evaluation may fulfill this task provided that it is scheduled, or can be rescheduled, to be within the six-month timeframe.

The Post-Change of Control Visit will be conducted according to HLC's procedure for focused or comprehensive evaluations, as applicable. The evaluation will review the appropriateness of the approval of the Change of Control as well as whether the institution fulfilled any commitments made to HLC prior to that approval. The evaluation team will also document that the institution continues to meet the Criteria for Accreditation or other requirements specifically articulated by the Board.

The team may recommend further HLC monitoring, rescheduling of the next comprehensive evaluation, or HLC sanctions or withdrawal of accreditation. If the team determines that the institution is out of compliance with the Criteria for Accreditation, the team must recommend a sanction or withdrawal, as applicable under these policies. Recommendations for sanction or withdrawal will be reviewed by an Institutional Actions Council Hearing Committee and decided by HLC's Board of Trustees in keeping with HLC policy.

Comprehensive Evaluation After the Post-Change of Control Visit. The next comprehensive evaluation shall take place no later than five years after the Post-Change of Control Visit.

Policy Number Key

Section INST: Institutional Processes

Chapter F: Maintenance and Monitoring

Part 20: Intermittent Monitoring

Last Revised: November 2020

First Adopted: June 2009

Revision History: February 2010, February 2012, June 2012, November 2019, June 2020, November 2020

Notes: Policies combined November 2012 – 3.3(d)2, 3.3(d)3, 3.3(g). In February 2021, references to the Higher Learning Commission as “the Commission” were replaced with the term “HLC.”

Related Policies: INST.B.10.030 Related Entities, INST.B.20.040 Change of Control, Structure or Organization, INST.F.20.070 Processes for Seeking Approval of Change of Control



Policy Title: Management of HLC Information

Number: INST.G.10.010

Defining and Establishing Ownership of HLC Information

HLC shall have ownership of the following information:

1. Information created for HLC by one of its consultants, evaluators, staff or other party in furtherance of an HLC process or review;
2. Information created for HLC by institutions or submitted to HLC by institutions in support of an application for new or continuing status, approval of substantive change or other HLC process or request for information;
3. Information collected or received by HLC from other sources including peer reviewers; and
4. Any other information known by HLC or otherwise collected or received in support of its mission and purposes.

Information referenced under this policy may exist in electronic, written or other format.

HLC Retention and Management of Information

HLC shall have the right to retain and manage such information as appropriate to fulfill its mission and purposes. Such management will include organizing, digitizing, displaying and storing such information. HLC shall adopt appropriate procedures governing the retention and management of information. These policies shall be applicable to HLC and its staff as well as to any individual acting as a reviewer or decision-maker for HLC. HLC shall work with third-party agents or contractors to ensure that information retention and management is handled in observance of such procedures to the fullest extent possible within the terms of that relationship.

HLC Information on Its Website

HLC will provide information available to public on HLC's website about the following: the Eligibility Requirements, Criteria for Accreditation, Assumed Practices, and Obligations of Membership; accreditation and candidacy status and related policies and procedures for achieving and maintaining such status; policies

and procedures related to sanctions and withdrawal or denial of status; a directory of member institutions and the date of the next comprehensive evaluation and information related to HLC monitoring; where necessary, information correcting inaccurate claims made by member institutions or other institutions regarding their accreditation status with HLC or results of a recent evaluation visit or accrediting action taken by HLC; and information about the members of HLC's decision-making bodies, institutional liaisons and other principal HLC staff.

HLC Correction of Institutional Information. If an institution accredited by, in candidacy status with, or applying for such status with HLC inaccurately discloses its accreditation status, an action by HLC, or the contents of an HLC evaluation report, HLC will provide for public correction of that information. It will provide this correction through its website or through release of a public statement or Public Disclosure Notice. It will also act through appropriate policies to enforce its Obligations of Membership with any member institution, if any Obligation has been violated by this inaccurate disclosure.

HLC Release of Information

HLC shall release HLC information in compliance with the following policies:

Institutional File Information. HLC shall release information about a member institution in response to a request by the following:

1. the President or Chief Executive Officer of that institution officially designated as such in HLC's records;
2. an individual designated by the President or Chief Executive Officer to receive such information; or
3. a resolution from that institution's governing board signed by the current Chair of that board.

HLC shall release information to any other individual or to a consultant or attorney representing the institution only when HLC has received a written request from the President or CEO of the institution.

Peer Review Information. In preparation for HLC review HLC may release information to institutions about peer reviewers including contact information, credentials and other information for the purpose of assuring that HLC processes are free of conflict of interest.

HLC may provide oral or written comments or explanation in conjunction with the release of the above information and non-particularized information about HLC precedent.

Within HLC Processes or to External Agents of HLC. HLC may provide information as identified in this policy under Defining and Establishing the Ownership of HLC Information, to individuals acting as reviewers and decision-makers for HLC within its processes. HLC also may provide such information to HLC consultants or

other individuals or entities retained by HLC to provide assistance, expertise or other function in support of HLC processes. As a condition of a relationship with HLC, all reviewers, decision-makers, and consultants shall agree in writing to maintain the confidentiality of such information.

Researchers. HLC may provide its information to a researcher(s) who, in the sole discretion of HLC, has appropriate academic credentials and who outlines an appropriate research project related to the work of HLC. As a condition of any relationship with HLC, all researchers must agree in writing to maintain the confidentiality of the information and to other terms as outlined in an appropriate agreement or contract.

Third Parties. HLC shall release information about an institution or peer reviewer(s) or about HLC policies, procedures or activities in furtherance of its processes to, or in response to a written request form, the following entities:

1. The U.S. Department of Education or other federal agency with appropriate jurisdiction to request the information;
2. A validly-issued subpoena from a court of law with appropriate jurisdiction; and
3. Another recognized accrediting agency with which the institution(s) may have status or be seeking such status;

HLC may, at its sole discretion, release information to a state higher education or other governmental agency with appropriate jurisdiction.

HLC may provide oral or written comments or explanation to such entities in conjunction with, or separate from, the release of such information.

Public. HLC shall release the following information to the public and any other interested parties by means of its website, fax or other disclosure:

1. the name and contact information for any institution that holds, or has held, status with HLC along with information about its campuses, additional locations and educational programs as well as any other data it regularly collects through its Institutional Update process;
2. the name and contact information of any institution scheduled for an evaluation for initial status;
3. the Statement of Accreditation Status;
4. Public Disclosure Notices and, when appropriate, certain other public statements made by HLC;
5. action letters related to the granting, reaffirmation or withdrawal of candidate for accreditation or accreditation status; to the imposition or removal of a sanction or show-cause order; and to the outcome of an advisory visit.

6. summary of all HLC actions posted within 30 days of taking such action, including voluntary withdrawals and other information within 30 days of HLC receiving such information;
7. the list of institutions being evaluated by HLC for initial status, reaffirmation of accreditation, probation or show-cause in the upcoming academic year and the invitation for third-party comment about appropriate institutions;
8. the policies and procedures of HLC and related information;
9. the results of aggregate data analyses and other information HLC staff determine to be appropriate for public release;
10. the names of all active peer reviewers and other information including title and contact information in their organization; and
11. the names, internal contact and areas of responsibility for all staff members.

HLC may provide oral or written comments or explanation of such information to the public.

Mailing or Address Lists for Marketing Purposes. HLC shall not give or sell mailing lists of institutions or peer reviewers or similar information to any company, organization, institution, or individual for use in marketing or solicitation. However, HLC may provide information about individuals who attend a conference or workshop to appropriate business partners. All such business partners must agree to provide appropriate mechanisms by which a recipient may decline to receive additional promotional material.

Other HLC Release of Information. HLC may include HLC information in any submission it shall make on behalf of HLC. Such submissions shall include, but are not limited to, HLC petitions for continued recognition from the U.S. Department of Education or the Council on Higher Education Accreditation, or HLC petition or response in any lawsuit or action it initiates or which has been initiated by another party.

HLC may release the team report or other documents to third parties or the public if the institution or one of its agents has released information or excerpts from documents created by or for HLC in such a way that information from those documents, or information with regard to HLC status or findings, has been misrepresented.

HLC may, at its sole discretion, release information about an institution publicly or to another entity if requested by that institution.

Policy Number Key

Section INST: Institutional Processes

Chapter G: HLC Information

Part 10: General

Last Revised: November 2020

First Adopted: February 2010

Revision History: November 2012, February 2013, November 2020

Notes: Policies combined in November 2012 – 2.3, 2.3(a), 2.3(b), 2.3(b)1, 2.3(b)2, 2.3(b)3, 2.3(b)4, 2.3(b)5, 2.3(b)6, 2.3(b)7. In February 2021, references to the Higher Learning Commission as “the Commission” were replaced with the term “HLC.”

Related Policies:



Policy Title: Official Records

Number: INST.G.10.020

HLC will transmit all documents and communications through electronic means whenever possible. HLC will expect that all member institutions and applying institutions receive HLC communications transmitted electronically and that such institutions submit all documents, including Assurance Filings, and communications electronically whenever possible. When HLC withdraws the accreditation of an institution, issues a Show-Cause Order or imposes a sanction, HLC will ensure that the institution receives the letter conveying the action by also sending a certified copy.

When an institution submits correspondence or other documents in a non-electronic form, HLC reserves the right to digitize the document, to archive the electronic representation thereof and treat that representation as the original, and to destroy the non-electronic submission. HLC record will then consist of the electronic version.

Official Records of HLC Processes and Actions

While the various review processes allow for frequent, clear and open communication between the institution and HLC, the record of official action will be the action letter signed by the President and accompanied by a newly adopted Statement of Accreditation Status.

Official Action of HLC

The official relationship between a member institution and HLC will be recorded in the action letter, which is accompanied by appropriate documents that summarize the accrediting relationship or identify relevant aspects of that relationship. Such documents typically include at minimum the Statement of Accreditation Status (SAS) and the Organization Profile (OP) or any other comparable document developed by HLC to summarize officially the key components of the relationship and other information about the institution.

Statement of Accreditation Status

The Statement of Accreditation Status (SAS) provides official information regarding the conditions of the institution's accreditation with HLC. Such information will include, but is not restricted to, the type of status

the institution has with HLC; sanctions or a Show-Cause Order, if any, attendant to that status; the date of the institution's next comprehensive evaluation; and any monitoring the institution must undergo prior to that evaluation. Other information relevant to the facts of the institution's relationship with HLC may be added.

The SAS is a public document and is posted on HLC's website.

Changes to the SAS. Staff may act on its own initiative or at the request of an institution to approve the following changes to the SAS: editing with non-substantive amendments; and changing the date of upcoming evaluations or filing of reports by no more than one year and not to exceed the maximum timeframe for evaluation visits provided in HLC policy.

Staff may recommend to the Institutional Actions Council for review and action on the staff's own initiative or at the request of an institution the following changes to the SAS: substantive amendments including modifications to the Stipulations section; and changing the date of upcoming evaluations or filing of reports by more than one year or beyond the maximum ten years required for a comprehensive evaluation.

Communication With the Institution

Through all accrediting processes, HLC office will transmit its formal and official communications to an institution through the chief executive officer (CEO). A copy of the official action letter will also be provided to the chair of the institution's governing board. HLC will also communicate with the individual identified by the institution as the Accreditation Liaison Officer. The responsibilities of the Accreditation Liaison Officer will be specified in HLC procedure.

Exit Session

An evaluation visit will normally conclude with a meeting between the evaluation team and the CEO of the institution. With the agreement of the team chair, the institution's CEO may invite other persons to attend the meeting. At this meeting the chairperson of the team will explain the next steps in the evaluation process, including identifying any additional information the team may need, and may orally summarize the team's preliminary findings. The team's oral summary of its preliminary findings may differ from the findings and recommendations provided in the draft or final written report. The oral summary is not a part of the official record of the evaluation and should not be relied on by the institution to make any public announcement regarding the outcome of the evaluation or to take other action.

Distribution of the Team Report

The final team report will be part of the official record of the evaluation. The staff will be responsible for submitting copies of it to the CEO of the institution who will be expected to distribute the report internally and to determine whether wider distribution of it is warranted. The staff will also forward copies of the report to persons designated by HLC to participate in the various review processes.

Institutional Responses Within the Processes

The CEO of the institution is expected to file a written institutional response to any of the following:

1. an evaluation team's report and recommendations;
2. a decision of the Institutional Actions Council calling for substantial modifications in the action;
3. a recommendation of the Institutional Actions Council regarding initial status, the issuance or removal of a sanction, the issuance or removal of a Show-Cause Order, or denial or withdrawal of status;
4. desk reviews that result in anything other than approval of the requested action;
5. panel recommendations;
6. staff recommendations or reports regarding Change of Control, Structure or Organization or changes in the institution's accredited relationship with HLC as reflected in the Statement of Accreditation Status; or
7. a recommendation of HLC President to issue a sanction, Show-Cause Order, or denial or withdrawal of status.

The CEO shall submit the written response within two weeks of receipt of the final evaluation team report. The response shall be considered in the review processes prior to the final action, including adverse action, and becomes a part of the official record of the process.

Definition of Official Records of a Process

The following documents generally constitute the official record of HLC's interaction with an institution: materials submitted in preparation for HLC review; other reports and change applications submitted by the institution; team or panel reports; institutional responses; recommendations for the Board of Trustees from the Institutional Actions Council; analyses of required reports and change requests; and action letters and all other official letters from HLC regarding the institution's relationship with HLC. The participants in those processes will be identified in the documents. For institutions applying for accreditation or accredited within the past ten years official records will also include documents arising from the current or any previous Eligibility Process or candidacy involving the institution.

Other documents, including those documents developed by HLC staff to assist in specific processes and information regarding oral interactions, will only be included in materials provided in future review processes for good and sufficient causes or will not be considered to be part of the official record of HLC’s interaction with an institution, as determined in the discretion of HLC.

Retention of Official Records

Through its record retention program, HLC will maintain the official records of accredited institutions for at least the last full ten-year accreditation cycle, and, of applying institutions, for the institutions’ Eligibility Process and candidacy reviews.

Policy Number Key

Section INST: Institutional Processes

Chapter G: HLC Information

Part 10: General

Last Revised: November 2020

First Adopted: February 2012, November 1998, February 2001, February 2007, November 1998, February 1996

Revision History: revised February 2002, February 2009, June 2011, November 2010, November 2012, November 2018, November 2019, June 2020, November 2020

Notes: Policies combined November 2012 - 2.4, 2.4(a), 2.4(b), 2.4(b)1, 2.4(c), 2.4(d), 2.4(e), 2.4(f), 2.4(g), 2.4(h), 2.4(i). In February 2021, references to the Higher Learning Commission as “the Commission” were replaced with the term “HLC.”

Related Policies: INST.B.30.040 Public Disclosure, INST.G.10.010 Management of HLC Information, INST.F.10.010 Routine Monitoring



SECTION 4: HLC OBLIGATIONS

Policy Title: Notice of Accreditation Actions, HLC Public Notices and Public Statements

Number: COMM.A.10.010

HLC shall have the authority to make specific disclosures to the public, state higher education agencies, the U.S. Department of Education and recognized accrediting agencies regarding member institutions or applying institutions as outlined below. HLC shall provide notification to the affected institution about the disclosure prior to, or simultaneous to, the time the disclosure is made, as determined by HLC.

Notification of Accrediting Actions. HLC shall ensure that it properly notifies the public, state higher education agencies, the U.S. Department of Education, and recognized accrediting agencies regarding HLC's accrediting actions.

All HLC actions will be provided to state higher education agencies, the U.S. Department of Education and recognized accrediting agencies within thirty (30) days of the action. This includes actions to reaffirm accreditation, grant or deny accreditation or candidacy, or approve or deny a substantive change, or approve the results of monitoring.

1. With regard to an action to place an institution on Notice or Probation, to extend Notice or Probation, to remove an institution from Notice or Probation, to issue a Show-Cause Order to an institution, or to remove a Show-Cause Order, HLC will provide notification of the action to applicable state higher education agencies, the U.S. Department of Education, and applicable recognized accrediting agencies simultaneously with the action being communicated to the institution, and not later than thirty (30) days after the action, and will provide notification to the public within one (1) business day of notice being provided to the institution.
2. With regard to an action to deny or withdraw accreditation or candidacy, HLC will provide notification of the action to applicable state higher education agencies, the U.S. Department of Education, and applicable recognized accrediting agencies simultaneously with the action being

communicated to the institution, and not later than thirty (30) days after the action, and will provide notification to the public within one (1) business day of notice being provided to the institution.

3. With regard to a decision by an institution to voluntarily resign accreditation or candidacy, HLC will provide notification of the action to state higher education agencies, the U.S. Department of Education, and recognized accrediting agencies within ten (10) days of receipt of notice of voluntary resignation as required by policy, and will provide notification to the public within one (1) business day of notifying the institution that the voluntary resignation has been accepted, but not more than thirty (30) days.
4. With regard to an action to approve a Provisional Plan, HLC will provide notification to recognized accrediting agencies of approval of the plan not later than thirty (30) days after the action if the teach-out includes a program accredited by such agency.

Such notification shall take place for the public through a Public Disclosure Notice (PDN) on HLC's website, and for state higher education agencies, the U.S. Department of Education and recognized accrediting agencies through electronic or other communication.

Public Disclosure Notices (PDNs). HLC will issue a Public Disclosure Notice (PDN) regarding the following actions:

1. Adverse action (denial or withdrawal of accreditation or candidacy);
2. Sanction (placing an institution on sanction, extending a sanction or removing an institution from a sanction);
3. Show-Cause Order (issuing or removing a Show-Cause Order);
4. Denial of an application for Change of Control, Structure or Organization; and
5. Institutional designations (imposing an institutional designation).

The PDN shall contain information about the action, the findings of the Board associated with the action, or, for an institutional designation pursuant to the Special Monitoring policy, the findings of HLC's President when the designation was imposed, and the availability of appeal, if any.

Public Statements. HLC may, in its discretion, issue a public statement regarding an institution. This could include, for example, to correct or confirm a media report, to respond to frequent inquiries from the public, to inform the public about a lawsuit, investigation or advisory visit, to inform the public of an application for Change of Control, Structure or Organization that has been approved, or to address other matters as determined appropriate by HLC. HLC may, but is not required to, provide prior notice to an institution regarding any such public statement.

Policy Number Key

Section COMM: HLC Obligations

Chapter A: HLC Obligations to Institutions and the Public

Part 10: General

Last Revised: February 2021

First Adopted: August 1996, February 1996, June 2004

Revision History: February 1998, May 2002, October 2002, June 2008, February 2010, June 2012, November 2012, April 2013, August 2016, November 2019, November 2020, February 2021

Notes: Policies combined in November 2012 – 12.4, 2.3(c), 2.3(c)1, 2.3(c)2, 2.3(c)3. In February 2021, references to the Higher Learning Commission as “the Commission” were replaced with the term “HLC.”

Related Policies:



Policy Title: Confidentiality of Information

Number: **COMM.A.10.020**

Except as defined under INST.G.10.010 [HLC Release of Information](#) and COMM.A.10.010 [HLC Public Notices and Statements](#), HLC will maintain the confidentiality of specific information provided to HLC from institutions, peer reviewers and other entities. Such data include but are not limited to:

1. Information about the institution not available to the public through the institution’s own program to share information and its reporting to the Federal Government (IPEDS);
2. Information the institution identifies prior to HLC’s evaluation as “proprietary” such as recruitment strategies including pricing policies, new strategic initiatives being considered or planned for, impending but not public changes in personnel, legal activities not yet part of the public record, planned acquisitions or mergers, courseware and software created by the institution for its own use;
3. Information provided in the institutional self study report or Assurance Filing and information made available in the resource room or electronically including such documents as personnel files, minutes of meetings, transcripts of grievances and hearings, management letters from external auditors, reports from internal and external quality assurance activities (i.e., reports from specialized accrediting agencies or program reviews);
4. Information identified explicitly by the institution as “Confidential”;
5. In clinical settings, patient identity, history, and all other information related to the patient’s involvement with the clinic;
6. Information shared orally during the on-site visit and any face-to-face hearings that might be part of HLC’s review processes.
7. Any other information of a particularly sensitive nature where the institution or a Peer Reviewer involved in an evaluation of an institution asks that HLC handle the information confidentially.

Policy Number Key

Section COMM: HLC Obligations

Chapter A: HLC Obligations to Institutions and the Public

Part 10: General

Last Revised: November 2012

First Adopted: August 1996, February 1996, June 2004

Revision History: February 1998, May 2002, October 2002, June 2008, February 2010, June 2012

Notes: Former policy number –2.3(d). In February 2021, references to the Higher Learning Commission as “the Commission” were replaced with the term “HLC.”

Related Policies



Policy Title: Complaints and Other Information Regarding Member Institutions

Policy: COMM.A.10.030

Scope. HLC, aware of the value of information from the public, shall review complaints regarding a member institution's ability to meet the Criteria for Accreditation or other HLC requirements in a timely, fair, and equitable manner. The complaint process is intended to address only those matters that suggest substantive non-compliance. As such, HLC generally expects individuals to attempt to resolve personal issues through the institution's own published grievance procedures for its stakeholders, as appropriate—students, faculty, staff or members of the public—before submitting a complaint to HLC. In no case will HLC complaint process be used to obtain an individual remedy with an institution on behalf of a complainant.

Contents, Presentations, and Processing. HLC will not generally review complaints that concern facts or circumstances that took place more than two years from the date the complaint was received by HLC. All complaints must be submitted according to HLC procedures. HLC will acknowledge a complaint promptly and, within thirty working days of receipt, will advise the complainant whether or not the complaint will be further reviewed by HLC. If HLC determines a complaint will be further reviewed, HLC will give the institution named in the complaint sufficient opportunity to respond to the complaint before HLC completes its review and makes a decision about next steps regarding the complaint.

In accordance with HLC policies and procedures, HLC may require further follow-up.

When HLC receives a complaint(s) about an institution that has an impending site visit and that raises questions about the compliance of the institution with HLC requirements, it may also forward the complaint(s) to the attention of the chair of the on-site team for consideration instead of, or in addition to, any regular review HLC might undertake regarding such complaint(s). The team will notify HLC staff of its findings.

Other Information. In addition to pursuing complaints, HLC may initiate any of the procedures related to complaints in response to any information regarding a member institution's ability to meet the Criteria or other HLC requirements.

Complaints Against HLC. HLC, aware of the value of information from the public, shall review complaints regarding HLC in a timely, fair, and equitable manner. Complaints regarding HLC must involve issues broader than a concern about a specific institutional action or a specific on-site evaluation and must state clearly the nature of the complaint. The President, on behalf of HLC, shall respond to each complaint made against HLC within 30 days of receipt; report regularly to the Executive Committee and the Board of Trustees on the nature and disposition of complaints against HLC; and compile annually a list, available to the public on request, that summarizes the complaints against HLC and their dispositions. HLC retains the right to withhold public disclosure of information regarding complaints if, in HLC’s discretion, circumstances warrant.

Policy Number Key

Section COMM: HLC Obligations

Chapter A: HLC Obligations to Institutions and the Public

Part 10: General

Last Revised: November 2020

First Adopted: August 1996, February 1996, June 2004

Revision History: February 1998, May 2002, October 2002, June 2008, February 2010, June 2012, November 2012, November 2019, November 2020

Notes: Policies combined in November 2012 – 13.1, 13.1(a), 13.1(b), 13.1(c), 13.2. In February 2021, references to the Higher Learning Commission as “the Commission” were replaced with the term “HLC.”

Related Policies:



Policy Title: Staff Role and Responsibility

Number: COMM.B.10.010

HLC staff shall be ultimately responsible to the President of HLC, or to any intermediate supervisor who reports to the President, who in turn shall be responsible to the Board of Trustees. The staff shall assist institutions in the accreditation processes, implement HLC policy, and carry out other responsibilities given it by the President but is not a representative for the institution in the accreditation relationship. HLC staff shall have the discretion to establish and modify procedures in keeping with the intention and spirit of HLC policy.

Institutional Liaison

A staff member of HLC shall be assigned to each member institution to serve as the primary liaison between HLC and the institution, and to ensure that the institution receives effective service.

HLC Staff on Non-Evaluative Visits

The staff liaison may conduct a non-evaluative Staff Campus Visit based on an institution's invitation. Such a visit has no bearing on the outcomes of the institution's pending evaluations, or any of HLC's procedural decisions concerning the institution.

HLC Staff on Evaluation Visits

The staff liaison or other staff member may accompany the evaluation team on a visit.

HLC shall determine whether the staff liaison or other HLC staff member will accompany a specific evaluation visit. The President also has the discretion to determine that circumstances warrant having a staff liaison or other staff member present on a visit. Established procedures involving staff constitute presumptive evidence of a grant of Presidential authority to conduct activities in accordance with such procedures.

The role of a staff member accompanying any evaluation visit may be (1) to support the team as needed in its evaluation, including with guidance on HLC policy and procedure; (2) to clarify HLC processes related to the

visit to institutional representatives; (3) as part of an onboarding or training exercise; or (4) to observe the visit. When preparing to take any action regarding the institution as a result of the visit, the Board of Trustees or Institutional Actions Council may ask the staff member to discuss the evaluation visit and the institution's accreditation history, but the staff member will not prepare any written evaluation separate from the team report. HLC may authorize staff or employ other individuals with appropriate expertise to prepare memoranda, analyses, summations or resolutions for HLC decision-making bodies based on established procedures.

Staff Objectivity and Conflict of Interest

The President has final authority for making all determinations regarding objectivity and conflict of interest. Staff shall adhere to internal policies and procedures established by HLC to ensure timely and accurate disclosure of circumstances that may lead to the identification and management of any potential conflicts of interest or other objectivity concerns.

Policy Number Key

Section COMM: HLC Obligations

Chapter B: HLC Staff

Part 10: General

Last Revised: February 2021

First Adopted: January 1983, November 1991

Revision History: November 2012, November 2020, February 2021

Notes: Policies combined in November 2012 – 14.1, 14.2, 15.1. In February 2021, references to the Higher Learning Commission as “the Commission” were replaced with the term “HLC.”

Related Policies:



Policy Title: Staff Authority

Number: COMM.B.10.020

Staff Authority for Minor Changes Related to an Institution's Relationship With HLC

HLC staff may act to change an institution's Statement of Accreditation Status or recommend directly to the Institutional Actions Council that a change in the Statement of Accreditation Status be approved.

Staff may act to approve the following changes:

1. editing of the Statement of Accreditation Status with non-substantive amendments;
2. changing the date of upcoming evaluations or filing of reports by no more than one year and not to exceed the maximum timeframe for evaluation visits provided in HLC policy;
3. approving interim reports or requiring follow-up reports on the same or related topics; and
4. removing an institution from notification for approval of additional locations.

Staff may recommend to the Institutional Actions Council for review and action the following: substantive amendments to the Statement of Accreditation Status including modifications to the Stipulations section; changing the date of upcoming evaluations or filing of reports by more than one year or beyond the maximum ten years required for a comprehensive evaluation; and new requirements for monitoring.

Staff Authority to Approve Substantive Changes

Staff may act, without first seeking approval of the Institutional Actions Council, to approve the addition of a permanent location at a site at which the institution is conducting a teach-out for students of another institution that has ceased operating before all students have completed their program of study.

Staff Authority to Approve Teach-Out Receiving Institutions

HLC staff may act to approve the participation of additional teach-out receiving institutions in a teach-out arrangement after IAC approval of the subject Provisional Plan, or the participation of an HLC member as a teach-out receiving institution in a teach-out arrangement required by a non-HLC institution.

President's Authority

The President of the Higher Learning Commission has additional authority beyond that afforded staff under these policies as delineated by the Board. The President of HLC may act to terminate, postpone or cancel a visit in extraordinary circumstances. The President may approve the presence of observers on an evaluation team or other HLC activity. The President may make a recommendation to the Institutional Actions Council for routine monitoring following HLC policies for these actions. The President may schedule Special Monitoring for an institution consistent with HLC policy and may act, without first seeking approval of the Institutional Actions Council, to require routine monitoring immediately following the conclusion of any related process conducted under policies related to Special Monitoring. The President may make a recommendation to the Board for the imposition of a sanction, the extension of a sanction, the issuance of a Show-Cause Order, or withdrawal of candidacy or accreditation based on verified evidence supporting such recommendations under these policies. Finally, the President's authority may be temporarily expanded by the Board under extraordinary circumstances in a manner consistent with these policies and federal regulations.

Policy Number Key

Section COMM: HLC Obligations

Chapter B: HLC Staff

Part 10: General

Last Revised: February 2021

First Adopted: June 2011

Revision History: November 2012, June 2020, February 2021

Notes: Former policy number 2.2(h). In February 2021, references to the Higher Learning Commission as “the Commission” were replaced with the term “HLC.”

Related Policies: INST.F.20.030 Non-Substantive Changes in the Accreditation Relationship Between an Institution and HLC, INST.E.00.000 Sanctions, Adverse Actions, and Appeals



Policy Title: Relation With Other Recognized Accrediting Agencies

Number: COMM.C.10.020

Notification of Actions and Other Institutional Information. HLC will notify other recognized accreditors of accreditation actions taken by HLC's Board of Trustees in accordance with the requirements set forth in the Notice of Accreditation Actions, Public Notices, and Public Statements policy.

Other Information Provided to Recognized Accrediting Agencies. If another recognized accreditor seeks written or other information about a current or previous member institution, or about an institution that has previously sought status with HLC, HLC may, in its discretion, forward that information to the other accreditor after receiving a written request. HLC may, but is not required to, consult with or otherwise inform the member institution regarding the request.

Consideration for the Accreditation Decisions of and Information Provided by Other Recognized Accrediting Agencies. HLC will base its accreditation decisions on its own requirements, policies and procedures.

However, in determining whether an institution meets HLC requirements, HLC may consider the reports, action letters and information of other recognized accrediting agencies previously or currently associated with the institution, with specific attention to any adverse, probationary or show-cause actions. HLC also requires that institutions disclose such information to HLC as required by the Obligations of Membership. HLC may request information directly from a recognized accrediting agency and include such information for review by an evaluation team considering an accrediting action.

In considering a substantive change HLC may request information from an institution regarding its other accreditations or may request it directly from the accrediting agency and take it into account in the accrediting action.

If another accrediting agency recognized by the U.S. Department of Education has denied or withdrawn accreditation or pre-accreditation or placed the institution on sanction, HLC, through its decision-making processes and subject to its requirements, will carefully weigh these matters in reaching its own decision to grant or reaffirm accredited or candidate status. If it chooses to grant or reaffirm accredited or candidate

status to such an institution, it will provide the U.S. Secretary of Education a written explanation within thirty (30) days of taking action of why the issues that led to the action by the other accrediting agency did not preclude HLC from reaching its decision.

Concurrent Visits With Other Recognized Accrediting Agencies. If initiated by a member institution, HLC may conduct a visit concurrently with another recognized accrediting agency. While the teams of the participating agencies may coordinate their activities on campus, including information gathering, representatives of other recognized accreditors shall not participate in HLC team deliberations, and any production of a team report will be done separately by each agency.

Policy Number Key

Section COMM: HLC Obligations

Chapter C: Relationships with External Agencies

Part 10: General

Last Revised: February 2021

First Adopted: January 1983, February 1986, June 2000

Revision History: February 1996, February 1998, June 2001, February 2008, June 2008, February 2009, June 2012, April 2013, November 2020, February 2021

Notes: Former policy number – 9.1. In February 2021, references to the Higher Learning Commission as “the Commission” were replaced with the term “HLC.”

Related Policies:



Policy Title: Relations With the U.S. Government, State Higher Education Agencies and Other State Offices

Number: COMM.C.10.030

Federal Recognition. HLC shall participate in the recognition program mandated by federal law and conducted by the U.S. Department of Education, and it shall seek periodic continuance of its federal recognition. As required by law, HLC will notify the Department of any changes in the scope of its activities.

Notification of Actions and Other Institutional Information. HLC will notify the U.S. Department of Education and state higher education agencies of accreditation actions taken by HLC's Board of Trustees in accordance with the requirements set forth in the Notice of Accreditation Actions, Public Notices, and Public Statements policy.

Other Communications With the Federal Government. HLC shall maintain regular communications and discussions with the U.S. Department of Education and other federal agencies about matters such as policies and procedures and concerns with respect to member institutions. HLC will respond to U.S. Department of Education inquiries regarding institutional eligibility for Title IV; on receipt, it will forward to the institution for comment claims from students, the public and others of Title IV fraud and abuse and other allegations related to Title IV; and it will share with the U.S. Department of Education clear evidence received from HLC evaluation teams, staff or other sources of possible Title IV fraud and abuse or failure to meet Title IV, HEA program responsibilities, along with a summary of HLC's reasons for concern. With the exception of information about possible Title IV fraud and abuse or a specific request for confidentiality from the U.S. Department of Education, HLC will typically notify an institution when it provides information about it to the U.S. Department of Education but will consider each situation on a case-by-case basis to determine whether confidentiality is appropriate.

Other Communications With State Entities. HLC shall maintain regular communications and discussions with state higher education agencies and other state offices about matters such as policies and procedures and concerns with respect to member institutions. If a state higher education agency or other state agency seeks written or other information about a current or previous member institution, or that has previously

sought status with HLC, HLC may, in its discretion, forward that information to the state after receiving a written request. HLC may, but is not required to, consult with the member institution regarding the request.

Consideration for the Decisions of and Information Provided by State Higher Education Agencies. HLC will base its accreditation decisions on its own requirements, policies and procedures. However, in determining whether an institution meets HLC requirements, HLC may consider actions of applicable state higher education agencies, with specific attention to issued or pending decisions by states to deny, suspend, revoke, withdraw or terminate legal authority to provide education in that state. HLC also requires that institutions will disclose such information to HLC as required by the Obligations of Membership. HLC may request information directly from a state higher education agency and include such information for review by an evaluation team considering an accrediting action.

In considering a substantive change HLC shall request information from an institution regarding its authorization from the state related to the substantive change for which the institution is seeking approval or may request it directly from the state and take it into account in the accrediting action.

Concurrent Visits With State Higher Education Agencies. If initiated by a member institution, HLC may conduct a visit concurrently with a state higher education agency. While the teams of the participating entities may coordinate their activities on campus, including information gathering, such representatives of a state higher education agency shall not participate in HLC team deliberations and any production of a team report will be done separately by each entity.

Policy Number Key

Section COMM: HLC Obligations

Chapter C: Relationships with External Agencies

Part 10: General

Last Revised: February 2021

First Adopted: February 1996

Revision History: Adopted February 1996, effective February 1996; revised February 1998, June 2008, February 2009, February 2010, February 2021

Notes: Former policy number: 10.1, 10.1(a), 10.1(b). In February 2021, references to the Higher Learning Commission as “the Commission” were replaced with the term “HLC.”

Related Policies: INST.E.10.010 Notice, INST.E.20.010 Probation, INST.E.30.010 Show-Cause, and INST.E.60.010 Denial or Withdrawal of Status



SECTION 5: COMMITMENT TO PEER REVIEW

Policy Title: Commitment to Peer Review

Number: PEER.A.00.000

HLC is committed to a strong Peer Corps that will conduct evaluations and take accrediting actions on behalf of HLC’s member institutions. Through its recruitment and selection processes, HLC will strive to assure that the Peer Corps reflects the diversity of the people—professionals and students—engaged in higher education in the Higher Learning Commission region. In selecting and appointing Peer Reviewers HLC does not discriminate on matters of race, creed, gender, sexual orientation, or physical disability.

Policy Number Key

Section PEER: Commitment to Peer Review

Chapter A: Policies Applicable to All Peer Reviewers

Part 00: Introduction

Last Revised:

First Adopted: November 2012

Revision History:

Notes: In February 2021, references to the Higher Learning Commission as “the Commission” were replaced with the term “HLC.”

Related Policies:



Policy Title: Eligibility Criteria and Selection

Number: PEER.A.10.010

A majority of the members of the Peer Corps will be officially and actively employed on a full-time basis by regionally accredited institutions of higher education as faculty or instructors, administrators or other institutional personnel. Other members of the Corps may include, as appropriate, members of boards of trustees of accredited institutions, legal counsel, state education or system employees, representatives of the business community, public members or other employees of institutions. The Corps may also include individuals with specialized experience in quality improvement or other areas and recent retirees from any of these categories above. Peer reviewers will have appropriate academic degrees from accredited institutions of higher education or the equivalent foreign degrees as well as a minimum of five years of work experience. A majority of the members of the Peer Corps will be located, either through personal residence or employment relationship, in the North Central region. HLC may include in its Peer Corps members who have an employment relationship with institutions of higher education or other entities not located in the North Central region provided that such members comply with all other eligibility criteria for membership in the Peer Corps.

HLC will assure representation in the Peer Corps on evaluation teams of individuals who are academics, including faculty members, academic deans or others who have a primary responsibility in the teaching and learning process, and administrators who have a primary responsibility of providing oversight in an institution of higher education.

The staff of HLC will be responsible for developing selection criteria for Peer Reviewers and for implementing a selection process and will report the Corps' composition to the Board of Trustees.

Specialized Corps. The staff of HLC may establish within the Peer Corps specialized groups of peer reviewers who will be assigned to initial status, sanction or show-cause, advisory visit or other evaluations that HLC determines to require specialized expertise or training or to perform particular functions on the team including chair, recorder, etc.

Policy Number Key

Section PEER: Commitment to Peer Review

Chapter A: Policies Applicable to All Peer Reviewers

Part 10: General

Last Revised: June 2014

First Adopted: January 1983

Revision History: February 2002, October 2003, November 2012, April 2013, June 2014

Notes: Former policy number 6.1. In February 2021, references to the Higher Learning Commission as “the Commission” were replaced with the term “HLC.”

Related Policies:



Policy Title: Terms of Appointment

Number: PEER.A.10.020

A new Peer Reviewer shall be appointed to a two-year probationary term. HLC staff will review that appointment after completion of the two-year probationary term. HLC staff will take into consideration the Peer Reviewer's completion of required training as well as performance in institutional evaluations. On the basis of this review, HLC staff will decide whether to appoint the Peer Reviewer to a four-year term.

At the expiration of the four-year term, HLC staff may invite a Peer Reviewer to apply for reappointment for a successive four-year term. HLC staff will consider the Peer Reviewer's performance in institutional evaluations, including comments from institutions, other Peer Reviewers and staff, and the Peer Reviewer's adherence to the Peer Reviewer Standards of Conduct and participation in required training in determining whether to appoint the Peer Reviewer to a subsequent four-year term.

HLC retains the discretion to evaluate the performance of a Peer Reviewer at any time and end the term of a Peer Reviewer if HLC determines it to be appropriate. HLC may also end the term of a Peer Reviewer before the regular completion date if that Peer Reviewer no longer meets the eligibility criteria for the Peer Corps established by HLC. HLC will notify the Peer Reviewer of such action.

Policy Number Key

Section PEER: Commitment to Peer Review

Chapter A: Policies Applicable to All Peer Reviewers

Part 10: General

Last Revised: June 2014

First Adopted: February 1994

Revision History: October 2003, November 2012, June 2014

Notes: Former policy number 6.2. In February 2021, references to the Higher Learning Commission as "the Commission" were replaced with the term "HLC."

Related Policies:



Policy Title: Required Training and Professional Development

Number: PEER.A.10.030

Within the initial two-year term and prior to participation in any institutional evaluation, a Peer Reviewer must participate in HLC training or professional development that educates the Peer Reviewer in the application of HLC's Criteria for Accreditation and HLC policies and the specific processes integral to HLC evaluations. Peer Reviewers must complete training at least every three years thereafter or within two years after any major initiative such as the adoption of new Criteria for Accreditation.

Such training may be customized for the specific role the Peer Reviewer undertakes in HLC's evaluation process, including training in preparation for a role in HLC's decision-making or appeals processes. Training for Peer Reviewers will regularly include a segment on evaluating distance and correspondence education.

Training may take place through in-person events or electronic mechanisms that will allow the Peer Reviewer to complete the training program and HLC to assess the Peer Reviewer's completion of the training material.

Policy Number Key

Section PEER: Commitment to Peer Review

Chapter A: Policies Applicable to All Peer Reviewers

Part 10: General

Last Revised: November 2012

First Adopted: February 1994

Revision History: October 2003, February 2004, February 2010, November 2012

Notes: Policies combined in November 2012 – 6.3. In February 2021, references to the Higher Learning Commission as “the Commission” were replaced with the term “HLC.”

Related Policies:



Policy Title: Standards of Conduct

Number: PEER.A.10.040

HLC expects Peer Reviewers to behave with the highest level of ethics and integrity while conducting any activity for HLC. Peer reviewers must abide by appropriate and ethical standards of conduct to assure the public and the higher education community that evaluations have been carried out objectively and with the goal of assuring the public good.

While participating as Peer Reviewers in any institutional evaluation, hearing or other HLC activity as a Peer Reviewer, Peer Reviewers shall agree to abide by the following Standards of Conduct:

Peer Reviewers:

1. Conduct themselves with appropriate dignity and professionalism while representing HLC.
2. Treat all institutional representatives, members of the public, fellow peer reviewers and HLC staff with courtesy and respect.
3. Adhere to HLC's Policy on Objectivity and Conflict of Interest and disclose any actual or apparent conflicts to HLC staff in advance of accepting any assignment.
4. Avoid representing interests that conflict or compete, or provide the appearance of conflict, competition or bias, with the fair and objective review of every institution.
5. Act with competence in all HLC activities by reading assigned materials in advance, reviewing HLC requirements, attending required training, and participating in all evaluation activities as outlined by HLC staff.
6. Follow HLC policy for Peer Reviewers on Independent Consulting and guidelines on independent consulting and mock visits.
7. Decline any offer of gifts, incentives, or other compensation from any institution under review unless those gifts are nominal in nature (less than \$50 fair market value per individual gift) or of significance in a particular cultural context and notify HLC staff of an offer of such gift that exceeds this threshold. *(Note that the institution may provide a meal or social function for an evaluation team or other HLC group provided that the function is conducted simply and at reasonable cost.)*

8. Act with appropriate fiscal moderation while conducting an institutional evaluation or other HLC activity and provide an accurate and honest reporting of all expenses incurred during that activity.
9. During an evaluation visit to an institution and for a period of one year after HLC action in the evaluation, refrain from seeking employment from or accepting employment, or any future relationship, with the institution under review.
10. During an evaluation visit to an institution and for a period of one year after HLC action in the evaluation, refrain from seeking to employ or otherwise hire or retain any employee of the institution under review.
11. Protect confidential information received through HLC's processes and observe HLC Policy on Confidentiality.
12. Be familiar with HLC's expectations regarding antitrust compliance and conduct themselves in accordance with these expectations when engaging in HLC business or otherwise representing HLC. In general, HLC prohibits peer reviewers from engaging in conduct (including activities and communications) that with intent or effect of limiting competition amongst accreditors, as prohibited by antitrust laws. When peer reviewers have questions regarding particular activities or communications, they will consult with HLC's Antitrust Compliance Team.
13. Refrain from commenting on the details of any institutional review in which they have been engaged unless compelled by legal process.
14. Cooperate in any legal process in which HLC or its Board of Trustees or staff have become engaged, refrain from responding to any inquiries related to legal action made by institutions or their counsel, and direct such inquiries to HLC staff.

Policy on Objectivity and Conflict of Interest. Peer Reviewers must be able to render impartial and objective decisions on behalf of HLC. Therefore, HLC will not knowingly allow any person whose past or present activities could affect his or her ability to be impartial and objective to participate in an institutional evaluation (Assurance Review, Focused Visit, Change Panel or Visit). Peer Reviewers will inform the staff of HLC of any barrier to impartiality and objectivity known to them.

Confirmation of Objectivity Form. Through the Confirmation of Objectivity form a Peer Reviewer affirms a commitment to, and capacity for, impartiality. Before participating in any institutional evaluation each Peer Reviewer will sign a Confirmation of Objectivity form regarding each institution being evaluated. Before participating in any panel review, each Peer Reviewer will sign or orally agree to a Confirmation of Objectivity for each institution under consideration.

The Confirmation of Objectivity form will identify situations involving conflict of interest as well as provide examples of other situations that raise the potential for conflict of interest. The form will require that the person disclose any such conflicts, predisposition, or affiliation that could appear to jeopardize objectivity. When appropriate, HLC staff will notify the institution of that potential and will consult with the Peer Reviewer and the institution regarding that person's suitability for the assignment. HLC staff reserves final responsibility for determining whether the Peer Reviewer who has identified a potential bias or predisposition will participate in an institutional evaluation, or review.

Policy on Confidentiality. In all HLC accreditation processes, a Peer Reviewer must agree to keep confidential any information provided by the institution under review and information gained as a result of participating in any part of HLC's review processes. Confidential information includes, but is not limited to:

1. Information about the institution not available to the public through the institution's own program to share information and its reporting to the Federal Government (IPEDS);
2. Information the institution identifies as "proprietary" such as recruitment strategies including pricing policies, new strategic initiatives being considered or planned for, impending but not public changes in personnel, legal activities not yet part of the public record, planned acquisitions or mergers, courseware and software created by the institution for its own use;
3. Information provided in the institutional self study report or Assurance Filing, and information made available in the resource room or electronically including such documents as personnel files, minutes of meetings, transcripts of grievances and hearings, management letters from external auditors, reports from internal and external quality assurance activities (i.e., reports from specialized accrediting agencies or program reviews);
4. Information identified explicitly by the institution as "Confidential";
5. In clinical settings, patient identity, history, and all other information related to the patient's involvement with the clinic;
6. Information shared orally during an on-site visit and any face-to-face hearing that might be part of HLC's review processes.

Keeping information confidential requires that the Peer Reviewer not discuss or disclose institutional information except as needed to further the purpose of HLC's evaluation processes. It also requires that the Peer Reviewer not make use of the information to benefit any person or organization. Maintenance of confidentiality survives the evaluation visit and continues after the process has concluded.

Independent Consulting

To avoid the appearance of possible conflict of interest in the accreditation process, no Peer Reviewer who evaluated an institution for HLC may serve as an independent consultant to that institution for a period of three years following the official HLC accrediting action. In addition, no Peer Reviewer will participate in an HLC evaluation of an institution for which that Peer Reviewer served as an independent consultant in the previous ten years. (See HLC Policy PEER.A.10.050: Peer Corps Members in HLC Evaluative Activities.)

Peer Reviewers will disclose to HLC on an annual basis all consulting activities related to an institution accredited by HLC or related to accreditation and will agree to inform any institution or other entity with which the Peer Reviewer is developing a consulting relationship that the Peer Reviewer is acting in a personal capacity and is not representing HLC.

Any Peer Reviewer who violates this policy will be removed automatically from the Peer Review Corps.

Violations of the Standards of Conduct. HLC staff will investigate allegations that a Peer Reviewer has violated the Standards of Conduct and may ask the Peer Reviewer or others involved to provide information. If there is a determination that a Peer Reviewer has violated a Standard of Conduct, the President of HLC may issue a letter of reprimand or may ask an HLC staff member to provide a verbal warning to the Peer Reviewer. HLC may end the term of the Peer Reviewer prior to the regular completion date.

Policy Number Key

Section PEER: Commitment to Peer Review

Chapter A: Policies Applicable to All Peer Reviewers

Part 10: General

Last Revised: November 2020

First Adopted: January 1983, February 1984, August 1990, February 2001, November 2006

Revision History: October 2003, November 2012, April 2013, June 2018, November 2018, November 2020

Notes: Policies combined in November 2012 – 5.1, 5.1(a), 5.2, 5.3, 8.2. In February 2021, references to the Higher Learning Commission as “the Commission” were replaced with the term “HLC.”

Related Policies:



Policy Title: Peer Corps Members on HLC Evaluation Activities

Number: PEER.A.10.050

HLC staff shall determine the specific number of peer reviewers comprising any evaluation activity following HLC policies related to the specific type of evaluation being conducted. The panel, committee, team or other evaluative group shall be large enough to make a thorough and professional evaluation of the particular institution. In composing the team or evaluative group, staff will weigh variables such as institutional mission, number of students served, number of degree levels offered, number of programs offered, breadth of services provided students and other constituencies, and number and type of off-campus offerings supported by the institution. Matters unique to a review (e.g., unusual new institutional dynamics, pending implementation of significant changes, response to alternative evaluation agreements) may add to the size of the group of peer reviewers conducting the review. Staff may also consider institutional requests for a large enough group of peer reviewers to ensure that specific institutional issues are addressed.

With the exception of where deemed appropriate for continuity purposes by HLC staff, a peer reviewer who participated in an HLC panel or other evaluative activity not involving reaffirmation, in an HLC decision-making body, or in an Academy assignment may not be assigned to another evaluative or decision-making assignment at or regarding that same institution for a period of three years. In addition, HLC staff has the discretion to exclude or remove from any evaluative activity, decision-making body or Academy assignment any peer reviewer who is employed by an institution on an HLC sanction or that has been the subject of a show-cause order or withdrawal action.

Institutional Review of Peer Reviewers Identified for a Team. The names of persons proposed by HLC staff to compose a team to visit an institution will be submitted to the institution. The institution will be free to comment on the composition of the team, and staff will take such comments into consideration in completing the team. Should any changes in the team be necessary after the initial team is set, the changes will be discussed with the institution by the staff, and institutional comments will be given consideration in making necessary changes.

HLC reserves final responsibility and authority for composing teams that visit institutions as part of an HLC evaluation. In exercising that responsibility, HLC has determined that issues of equity and diversity will be addressed as well as issues of institutional fit and educational and administrative emphases.

Policy Number Key

Section PEER: Commitment to Peer Review

Chapter A: Policies Applicable to All Peer Reviewers

Part 10: General

Last Revised: February 2020

First Adopted: February 1994

Revision History: October 2003, November 2012, June 2018, February 2020

Notes: Former policy number 6.7, 6.8. In February 2021, references to the Higher Learning Commission as “the Commission” were replaced with the term “HLC.”

Related Policies:



SECTION 6: POLICIES RELATED TO POLICY ADOPTION AND REVIEW

Policy Title: Application and Regular Review of HLC Requirements and Institutional Accreditation Policies

Number: PPAR.A.10.000

HLC will apply all institutional accreditation policies in a fair and consistent manner, ensuring due process, as aligned with this policy.

Where necessary HLC will take follow-up action to ensure that an institution that does not meet HLC requirements either has its accreditation or candidacy withdrawn or denied following policies related to those processes, or, if applicable, comes into compliance within no more than three years, inclusive of any good cause extensions where provided for in policy. All institutions are responsible for regularly reviewing all HLC policies in their entirety, including any noted related policies, and related procedures and guidelines as may be published by HLC.

The Board of Trustees recognizes that higher education is rapidly changing and that HLC policies need to reflect those changes. Therefore, the Board of Trustees commits to regularly reviewing its policies and procedures, particularly but not exclusively related to institutional dynamics and change, to evaluate their responsiveness to the higher education environment, their effectiveness in providing quality assurance, and their usefulness in enhancing institutional and educational improvement.

HLC, through its system of self-evaluation, will regularly seek from member institutions and Peer Reviewers comment on the effectiveness of HLC's policies, programs and activities. HLC's review process will provide opportunities for a broad group of stakeholders, such as employers, students, parents, business leaders, etc., to evaluate the program and requirements for accreditation. The feedback from the stakeholders may lead the Board of Trustees to modify or change HLC's programs and requirements. In addition, the Board of Trustees will convene an advisory panel at least every five years to review the effectiveness of, and proposed changes and programs for, the Criteria for Accreditation. The panel will include representatives from various constituencies within HLC as well as members of the Board of Trustees.

Should the Board of Trustees learn from its review of policies that a change in HLC policy is necessary to ensure that the policy is being interpreted properly by institutions or peer reviewers or is being properly applied in the evaluation process, the Board will ensure that such change is made within no more than 12 months of the Board learning about the necessary change.

The Board of Trustees may amend, delete, or add to the policies at any time. In general, the adoption of new or revised policies shall take place at a regularly scheduled Board of Trustees meeting subsequent to the first meeting when the proposed new or revised policy was presented. Policies affecting institutions shall be circulated in writing to all member institutions for a comment period of not less than 60 days between the first and second reading of the proposed policy. The Board of Trustees will consider any comments on any proposed policies it has approved on first reading before it takes action to adopt such policy revisions on second reading. This policy does not preclude HLC Board or staff making technical amendments to clarify the meaning of policies without necessarily providing a notice and comment period.

Policy Number Key

Section PPAR: Policies Related to Policy Adoption and Review

Chapter A: General

Part 10: General

Last Revised: November 2020

First Adopted: November 2012

Revision History: November 2020

Notes: In February 2021, references to the Higher Learning Commission as “the Commission” were replaced with the term “HLC.”

Related Policies:



Policy Title: Dating of Policies

Number: PPAR.A.10.010

The effective date of any policy is the date on which it was adopted or revised unless otherwise noted by the Board in its action. Policy may be noted as revised, edited or renumbered to reflect various changes that have occurred in the policy subsequent to its original adoption. Revisions to any policy are taken by action of the Board; editing and renumbering may occur as necessary as technical amendments and do not require formal Board approval.

Each policy carries a date of adoption (i.e., Adopted January 2000); any revision dates are noted as well (revised February 2002). HLC Policies periodically undergo major revisions for editorial, numbering and titling updates; dates for these major revisions are noted at the end of the policy. Sometimes sections may be edited outside the regular editing cycle; in such cases policies that have had minor editorial revisions or renumbering will carry a date when the editing took place.

Policy Number Key

Section PPAR: Policies Related to Policy Adoption and Review

Chapter A: General

Part 10: General

Last Revised: November 2020

First Adopted:

Revision History: November 2020

Notes: Former policy number: front matter. In February 2021, references to the Higher Learning Commission as “the Commission” were replaced with the term “HLC.”

Related Policies:

APPENDIX A

Assumed Practices in Effect Prior to November 5, 2020

These Assumed Practices remain in effect after November 5, 2020, only as long as necessary to complete the evaluations of institutions begun under these Assumed Practices. For all other institutions, the current Assumed Practices apply. Institutions that received HLC extensions to bring their dual credit faculty into compliance with Assumed Practice B.2. are responsible to do so before such extensions have expired. In all other respects, the current Assumed Practices apply to such institutions.

Policy Title: **Assumed Practices**

Number: **CRRT.B.10.020**

Foundational to the Criteria and Core Components is a set of practices shared by institutions of higher education in the United States. Unlike Criteria and Core Components, these Assumed Practices are (1) generally matters to be determined as facts, rather than matters requiring professional judgment and (2) unlikely to vary by institutional mission or context.

A. Integrity: Ethical and Responsible Conduct

1. The institution has a conflict of interest policy that ensures that the governing board and the senior administrative personnel act in the best interest of the institution.
2. The institution has ethics policies for faculty and staff regarding conflict of interest, nepotism, recruitment and admissions, financial aid, privacy of personal information, and contracting.
3. The institution provides its students, administrators, faculty, and staff with policies and procedures informing them of their rights and responsibilities within the institution.
4. The institution provides clear information regarding its procedures for receiving complaints and grievances from students and other constituencies, responds to them in a timely manner, and analyzes them to improve its processes.
5. The institution makes readily available to students and to the general public clear and complete information including:
 - a. statements of mission, vision, and values
 - b. full descriptions of the requirements for its programs, including all pre-requisite courses
 - c. requirements for admission both to the institution and to particular programs or majors

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- d. policies on acceptance of transfer credit, including how credit is applied to degree requirements. (Except for courses articulated through transfer policies or institutional agreements, the institution makes no promises to prospective students regarding the acceptance of credit awarded by examination, credit for prior learning, or credit for transfer until an evaluation has been conducted.)
 - e. all student costs, including tuition, fees, training, and incidentals; its financial aid policies, practices, and requirements; and its policy on refunds
 - f. policies regarding academic good standing, probation, and dismissal; residency or enrollment requirements (if any)
 - g. a full list of its instructors and their academic credentials
 - h. its relationship with any parent organization (corporation, hospital, or church, or other entity that owns the institution) and any external providers of its instruction.
6. The institution assures that all data it makes public are accurate and complete, including those reporting on student achievement of learning and student persistence, retention, and completion.
 7. The institution portrays clearly and accurately to the public its current status with the Higher Learning Commission and with specialized, national, and professional accreditation agencies.
 - a. An institution offering programs that require specialized accreditation or recognition by a state licensing board or other entity in order for its students to be certified or to sit for the licensing examination in states where its students reside either has the appropriate accreditation and recognition or discloses publicly and clearly the consequences to the students of the lack thereof. The institution makes clear to students the distinction between regional and specialized or program accreditation and the relationships between licensure and the various types of accreditation.
 - b. An institution offering programs eligible for specialized accreditation at multiple locations discloses the accreditation status and recognition of the program by state licensing boards at each location.
 - c. An institution that provides a program that prepares students for a licensure, certification, or other qualifying examination publicly discloses its pass rate on that examination, unless such information is not available to the institution.
 8. The governing board and its executive committee, if it has one, include some “public” members. Public members have no significant administrative position or any ownership interest in any of the following: the institution itself; a company that does substantial business with the institution; a company or organization with which the institution has a substantial partnership; a parent, ultimate

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parent, affiliate, or subsidiary corporation; an investment group or firm substantially involved with one of the above organizations. All publicly-elected members or members appointed by publicly-elected individuals or bodies (governors, elected legislative bodies) are public members.¹

9. The governing board has the authority to approve the annual budget and to engage and dismiss the chief executive officer.¹
10. The institution remains in compliance at all times with state laws including laws related to authorization of educational activities and consumer protection wherever it does business and state law applies.
11. The institution documents outsourcing of all services in written agreements, including agreements with parent or affiliated organizations.
12. The institution takes responsibility for the ethical and responsible behavior of its contractual partners in relation to actions taken on its behalf.

¹ Institutions operating under federal control and authorized by Congress are exempt from these requirements. These institutions must have a public board that includes representation by individuals who do not have a current or previous employment or other relationship with the federal government or any military entity. This public board has a significant role in setting policy, reviewing the institution's finances, reviewing and approving major institutional priorities, and overseeing the academic programs of the institution.

B. Teaching and Learning: Quality, Resources, and Support

1. Programs, Courses, and Credits
 - a. The institution conforms to commonly accepted minimum program length: 60 semester credits for associate's degrees, 120 semester credits for bachelor's degrees, and 30 semester credits beyond the bachelor's for master's degrees. Any variation from these minima must be explained and justified.
 - b. The institution maintains structures or practices that ensure the coherence and quality of the programs for which it awards a degree. Typically institutions will require that at minimum 30 of the 120 credits earned for the bachelor's degree and 15 of the 60 credits for the associate's degree be credits earned at the institution itself, through arrangements with other accredited institutions, or through contractual relationships approved by the Commission. Any variation from the typical minima must be explained and justified.
 - c. The institution's policy and practice assure that at least 50% of courses applied to a graduate program are courses designed for graduate work, rather than undergraduate courses credited toward a graduate degree. (Cf. Criterion 3.A.1 and 2.)
(An institution may allow well-prepared advanced students to substitute its graduate courses

for required or elective courses in an undergraduate degree program and then subsequently count those same courses as fulfilling graduate requirements in a related graduate program that the institution offers. In “4+1” or “2+3” programs, at least 50% of the credits allocated for the master’s degree – usually 15 of 30 – must be for courses designed for graduate work.)

- d. The institution adheres to policies on student academic load per term that reflect reasonable expectations for successful learning and course completion.
- e. Courses that carry academic credit toward college-level credentials have content and rigor appropriate to higher education.
- f. The institution has a process for ensuring that all courses transferred and applied toward degree requirements demonstrate equivalence with its own courses required for that degree or are of equivalent rigor.
- g. The institution has a clear policy on the maximum allowable credit for prior learning as a reasonable proportion of the credits required to complete the student’s program. Credit awarded for prior learning is documented, evaluated, and appropriate for the level of degree awarded. (Note that this requirement does not apply to courses transferred from other institutions.)
- h. The institution maintains a minimum requirement for general education for all of its undergraduate programs whether through a traditional practice of distributed curricula (15 semester credits for AAS degrees, 24 for AS or AA degrees, and 30 for bachelor’s degrees) or through integrated, embedded, interdisciplinary, or other accepted models that demonstrate a minimum requirement equivalent to the distributed model. Any variation is explained and justified.

2. Faculty Roles and Qualifications

- a. Qualified faculty members are identified primarily by credentials, but other factors, including but not limited to equivalent experience, may be considered by the institution in determining whether a faculty member is qualified. Instructors (excluding for this requirement teaching assistants enrolled in a graduate program and supervised by faculty) possess an academic degree relevant to what they are teaching and at least one level above the level at which they teach, except in programs for terminal degrees or when equivalent experience is established. In terminal degree programs, faculty members possess the same level of degree. When faculty members are employed based on equivalent experience, the institution defines a minimum threshold of experience and an evaluation process that is used in the appointment process. Faculty teaching general education courses, or other non-occupational courses, hold a master’s

degree or higher in the discipline or subfield. If a faculty member holds a master's degree or higher in a discipline or subfield other than that in which he or she is teaching, that faculty member should have completed a minimum of 18 graduate credit hours in the discipline or subfield in which they teach.

- b. Instructors teaching in graduate programs should hold the terminal degree determined by the discipline and have a record of research, scholarship or achievement appropriate for the graduate program.
 - c. Instructors teaching at the doctoral level have a record of recognized scholarship, creative endeavor, or achievement in practice commensurate with doctoral expectations.
 - d. Faculty participate substantially in:
 - a. oversight of the curriculum—its development and implementation, academic substance, currency, and relevance for internal and external constituencies;
 - b. assurance of consistency in the level and quality of instruction and in the expectations of student performance;
 - c. establishment of the academic qualifications for instructional personnel;
 - d. analysis of data and appropriate action on assessment of student learning and program completion.
3. Support Services
- a. Financial aid advising clearly and comprehensively reviews students' eligibility for financial assistance and assists students in a full understanding of their debt and its consequences.
 - b. The institution maintains timely and accurate transcript and records services.

C. Teaching and Learning: Evaluation and Improvement

1. Instructors (excluding for this requirement teaching assistants enrolled in a graduate program and supervised by faculty) have the authority for the assignment of grades. (This requirement allows for collective responsibility, as when a faculty committee has the authority to override a grade on appeal.)
2. The institution refrains from the transcription of credit from other institutions or providers that it will not apply to its own programs.
3. The institution has formal and current written agreements for managing any internships and clinical placements included in its programs.

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4. A predominantly or solely single-purpose institution in fields that require licensure for practice is also accredited by or is actively in the process of applying to a recognized specialized accrediting agency for each field, if such agency exists.
5. Instructors communicate course requirements to students in writing and in a timely manner.
6. Institutional data on assessment of student learning are accurate and address the full range of students who enroll.
7. Institutional data on student retention, persistence, and completion are accurate and address the full range of students who enroll.

D. Resources, Planning, and Institutional Effectiveness

1. The institution is able to meet its current financial obligations.
2. The institution has a prepared budget for the current year and the capacity to compare it with budgets and actual results of previous years.
3. The institution has future financial projections addressing its long-term financial sustainability.
4. The institution maintains effective systems for collecting, analyzing, and using institutional information.
5. The institution undergoes an external audit by a certified public accountant or a public audit agency that reports financial statements on the institution separately from any other related entity or parent corporation. For private institutions the audit is annual; for public institutions it is at least every two years.²
6. The institution's administrative structure includes a chief executive officer, chief financial officer, and chief academic officer (titles may vary) with appropriate credentials and experience and sufficient focus on the institution to ensure appropriate leadership and oversight. (An institution may outsource its financial functions but must have the capacity to assure the effectiveness of that arrangement.)

² Institutions under federal control are exempted provided that they have other reliable information to document the institution's fiscal resources and management.

APPENDIX B

Criteria for Accreditation in Effect Prior to September 1, 2020

These Criteria for Accreditation remain in effect after September 1, 2020, only as long as necessary to complete the evaluations of institutions begun under these Criteria prior to September 1, 2020 or to complete evaluations originally scheduled to occur prior to September 1, 2020, but which were postponed due to the COVID-19 pandemic.

Policy Title: Criteria for Accreditation

Number: CRRT.B.10.010

The Criteria for Accreditation are the standards of quality by which the Commission determines whether an institution merits accreditation or reaffirmation of accreditation. They are as follows:

Criterion 1. Mission

The institution's mission is clear and articulated publicly; it guides the institution's operations.

Core Components

1.A. The institution's mission is broadly understood within the institution and guides its operations.

1. The mission statement is developed through a process suited to the nature and culture of the institution and is adopted by the governing board.
2. The institution's academic programs, student support services, and enrollment profile are consistent with its stated mission.
3. The institution's planning and budgeting priorities align with and support the mission. (This sub-component may be addressed by reference to the response to Criterion 5.C.1.)

1.B. The mission is articulated publicly.

1. The institution clearly articulates its mission through one or more public documents, such as statements of purpose, vision, values, goals, plans, or institutional priorities.
2. The mission document or documents are current and explain the extent of the institution's emphasis on the various aspects of its mission, such as instruction, scholarship, research, application of research, creative works, clinical service, public service, economic development, and religious or cultural purpose.

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3. The mission document or documents identify the nature, scope, and intended constituents of the higher education programs and services the institution provides.
- 1.C. The institution understands the relationship between its mission and the diversity of society.
 1. The institution addresses its role in a multicultural society.
 2. The institution's processes and activities reflect attention to human diversity as appropriate within its mission and for the constituencies it serves.
 - 1.D. The institution's mission demonstrates commitment to the public good.
 1. Actions and decisions reflect an understanding that in its educational role the institution serves the public, not solely the institution, and thus entails a public obligation.
 2. The institution's educational responsibilities take primacy over other purposes, such as generating financial returns for investors, contributing to a related or parent organization, or supporting external interests.
 3. The institution engages with its identified external constituencies and communities of interest and responds to their needs as its mission and capacity allow.

Criterion 2. Integrity: Ethical and Responsible Conduct

The institution acts with integrity; its conduct is ethical and responsible.

Core Components

- 2.A. The institution operates with integrity in its financial, academic, personnel, and auxiliary functions; it establishes and follows policies and processes for fair and ethical behavior on the part of its governing board, administration, faculty, and staff.
- 2.B. The institution presents itself clearly and completely to its students and to the public with regard to its programs, requirements, faculty and staff, costs to students, control, and accreditation relationships.
- 2.C. The governing board of the institution is sufficiently autonomous to make decisions in the best interest of the institution and to assure its integrity.
 1. The governing board's deliberations reflect priorities to preserve and enhance the institution.
 2. The governing board reviews and considers the reasonable and relevant interests of the institution's internal and external constituencies during its decision-making deliberations.

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3. The governing board preserves its independence from undue influence on the part of donors, elected officials, ownership interests, or other external parties when such influence would not be in the best interest of the institution.
 4. The governing board delegates day-to-day management of the institution to the administration and expects the faculty to oversee academic matters.
- 2.D. The institution is committed to freedom of expression and the pursuit of truth in teaching and learning.
- 2.E. The institution's policies and procedures call for responsible acquisition, discovery and application of knowledge by its faculty, students and staff.
1. The institution provides effective oversight and support services to ensure the integrity of research and scholarly practice conducted by its faculty, staff, and students.
 2. Students are offered guidance in the ethical use of information resources.
 3. The institution has and enforces policies on academic honesty and integrity.

Criterion 3. Teaching and Learning: Quality, Resources, and Support

The institution provides high quality education, wherever and however its offerings are delivered.

Core Components

- 3.A. The institution's degree programs are appropriate to higher education.
1. Courses and programs are current and require levels of performance by students appropriate to the degree or certificate awarded.
 2. The institution articulates and differentiates learning goals for its undergraduate, graduate, post-baccalaureate, post-graduate, and certificate programs.
 3. The institution's program quality and learning goals are consistent across all modes of delivery and all locations (on the main campus, at additional locations, by distance delivery, as dual credit, through contractual or consortial arrangements, or any other modality).
- 3.B The institution demonstrates that the exercise of intellectual inquiry and the acquisition, application, and integration of broad learning and skills are integral to its educational programs.
1. The general education program is appropriate to the mission, educational offerings, and degree levels of the institution.
 2. The institution articulates the purposes, content, and intended learning outcomes of its undergraduate general education requirements. The program of general education is

grounded in a philosophy or framework developed by the institution or adopted from an established framework. It imparts broad knowledge and intellectual concepts to students and develops skills and attitudes that the institution believes every college-educated person should possess.

3. Every degree program offered by the institution engages students in collecting, analyzing, and communicating information; in mastering modes of inquiry or creative work; and in developing skills adaptable to changing environments.
4. The education offered by the institution recognizes the human and cultural diversity of the world in which students live and work.
5. The faculty and students contribute to scholarship, creative work, and the discovery of knowledge to the extent appropriate to their programs and the institution's mission.

3.C. The institution has the faculty and staff needed for effective, high-quality programs and student services.

1. The institution has sufficient numbers and continuity of faculty members to carry out both the classroom and the non-classroom roles of faculty, including oversight of the curriculum and expectations for student performance; establishment of academic credentials for instructional staff; involvement in assessment of student learning.
2. All instructors are appropriately qualified, including those in dual credit, contractual, and consortial programs.
3. Instructors are evaluated regularly in accordance with established institutional policies and procedures.
4. The institution has processes and resources for assuring that instructors are current in their disciplines and adept in their teaching roles; it supports their professional development.
5. Instructors are accessible for student inquiry.
6. Staff members providing student support services, such as tutoring, financial aid advising, academic advising, and co-curricular activities, are appropriately qualified, trained, and supported in their professional development.

3.D. The institution provides support for student learning and effective teaching.

1. The institution provides student support services suited to the needs of its student populations.

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2. The institution provides for learning support and preparatory instruction to address the academic needs of its students. It has a process for directing entering students to courses and programs for which the students are adequately prepared.
3. The institution provides academic advising suited to its programs and the needs of its students.
4. The institution provides to students and instructors the infrastructure and resources necessary to support effective teaching and learning (technological infrastructure, scientific laboratories, libraries, performance spaces, clinical practice sites, museum collections, as appropriate to the institution's offerings).
5. The institution provides to students guidance in the effective use of research and information resources.

3.E. The institution fulfills the claims it makes for an enriched educational environment.

1. Co-curricular programs are suited to the institution's mission and contribute to the educational experience of its students.
2. The institution demonstrates any claims it makes about contributions to its students' educational experience by virtue of aspects of its mission, such as research, community engagement, service learning, religious or spiritual purpose, and economic development.

Criterion 4. Teaching and Learning: Evaluation and Improvement

The institution demonstrates responsibility for the quality of its educational programs, learning environments, and support services, and it evaluates their effectiveness for student learning through processes designed to promote continuous improvement.

Core Components

- 4.A. The institution demonstrates responsibility for the quality of its educational programs.
1. The institution maintains a practice of regular program reviews.
 2. The institution evaluates all the credit that it transcripts, including what it awards for experiential learning or other forms of prior learning, or relies on the evaluation of responsible third parties.
 3. The institution has policies that assure the quality of the credit it accepts in transfer.
 4. The institution maintains and exercises authority over the prerequisites for courses, rigor of courses, expectations for student learning, access to learning resources, and faculty qualifications for all its programs, including dual credit programs. It assures that its dual credit

courses or programs for high school students are equivalent in learning outcomes and levels of achievement to its higher education curriculum.

5. The institution maintains specialized accreditation for its programs as appropriate to its educational purposes.
 6. The institution evaluates the success of its graduates. The institution assures that the degree or certificate programs it represents as preparation for advanced study or employment accomplish these purposes. For all programs, the institution looks to indicators it deems appropriate to its mission, such as employment rates, admission rates to advanced degree programs, and participation rates in fellowships, internships, and special programs (e.g., Peace Corps and Americorps).
- 4.B. The institution demonstrates a commitment to educational achievement and improvement through ongoing assessment of student learning.
1. The institution has clearly stated goals for student learning and effective processes for assessment of student learning and achievement of learning goals.
 2. The institution assesses achievement of the learning outcomes that it claims for its curricular and co-curricular programs.
 3. The institution uses the information gained from assessment to improve student learning.
 4. The institution's processes and methodologies to assess student learning reflect good practice, including the substantial participation of faculty and other instructional staff members.
- 4.C. The institution demonstrates a commitment to educational improvement through ongoing attention to retention, persistence, and completion rates in its degree and certificate programs.
1. The institution has defined goals for student retention, persistence, and completion that are ambitious but attainable and appropriate to its mission, student populations, and educational offerings.
 2. The institution collects and analyzes information on student retention, persistence, and completion of its programs.
 3. The institution uses information on student retention, persistence, and completion of programs to make improvements as warranted by the data.
 4. The institution's processes and methodologies for collecting and analyzing information on student retention, persistence, and completion of programs reflect good practice. (Institutions are not required to use IPEDS definitions in their determination of persistence or completion

rates. Institutions are encouraged to choose measures that are suitable to their student populations, but institutions are accountable for the validity of their measures.)

Criterion 5. Resources, Planning, and Institutional Effectiveness

The institution's resources, structures, and processes are sufficient to fulfill its mission, improve the quality of its educational offerings, and respond to future challenges and opportunities. The institution plans for the future.

Core Components

- 5.A. The institution's resource base supports its current educational programs and its plans for maintaining and strengthening their quality in the future.
1. The institution has the fiscal and human resources and physical and technological infrastructure sufficient to support its operations wherever and however programs are delivered.
 2. The institution's resource allocation process ensures that its educational purposes are not adversely affected by elective resource allocations to other areas or disbursement of revenue to a superordinate entity.
 3. The goals incorporated into mission statements or elaborations of mission statements are realistic in light of the institution's organization, resources, and opportunities.
 4. The institution's staff in all areas are appropriately qualified and trained.
 5. The institution has a well-developed process in place for budgeting and for monitoring expense.
- 5.B. The institution's governance and administrative structures promote effective leadership and support collaborative processes that enable the institution to fulfill its mission.
1. The governing board is knowledgeable about the institution; it provides oversight of the institution's financial and academic policies and practices and meets its legal and fiduciary responsibilities.
 2. The institution has and employs policies and procedures to engage its internal constituencies—including its governing board, administration, faculty, staff, and students—in the institution's governance.
 3. Administration, faculty, staff, and students are involved in setting academic requirements, policy, and processes through effective structures for contribution and collaborative effort.

5.C. The institution engages in systematic and integrated planning.

1. The institution allocates its resources in alignment with its mission and priorities.
2. The institution links its processes for assessment of student learning, evaluation of operations, planning, and budgeting.
3. The planning process encompasses the institution as a whole and considers the perspectives of internal and external constituent groups.
4. The institution plans on the basis of a sound understanding of its current capacity. Institutional plans anticipate the possible impact of fluctuations in the institution's sources of revenue, such as enrollment, the economy, and state support.
5. Institutional planning anticipates emerging factors, such as technology, demographic shifts, and globalization.

5.D. The institution works systematically to improve its performance.

1. The institution develops and documents evidence of performance in its operations.
2. The institution learns from its operational experience and applies that learning to improve its institutional effectiveness, capabilities, and sustainability, overall and in its component parts.