# 2016 Resource Guide

## Procedures

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## Resources

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HLC’s Resource Guide will be published each year in time for its Annual Conference. The next issue will be published in March 2017. For the most current information from HLC, visit hlcommission.org.
PROCEDURES
The Higher Learning Commission’s Criteria for Accreditation reflect a set of guiding values. HLC articulates these guiding values so as to offer a better understanding of the Criteria and the intentions that underlie them.

The responsibility for assuring the quality of an institution rests first with the institution itself. Institutional accreditation assesses the capacity of an institution to assure its own quality and expects it to produce evidence that it does so.

Many of the Criteria for Accreditation should be understood in this light. HLC expects the governing board to ensure quality through its governance structures, with appropriate degrees of involvement and delegation. HLC emphasizes planning because planning is critical to sustaining quality. Assessment of student learning and focus on persistence and completion are ways in which the institution improves and thus assures the quality of its teaching and learning.

HLC expects that institutions have the standards, the processes, and the will for quality assurance in depth and throughout its educational offerings.

1. Focus on student learning

For the purpose of accreditation, the Higher Learning Commission regards the teaching mission of any institution as primary. Institutions will have other missions, such as research, health care and public service, and these other missions may have a shaping and highly valuable effect on the education that the institution provides. In the accreditation process, these missions should be recognized and considered in relation to the teaching mission.

A focus on student learning encompasses every aspect of students’ experience at an institution: how they are recruited and admitted; costs they are charged and how they are supported by financial aid; how well they are informed and guided before and through their work at the institution; the breadth, depth, currency and relevance of the learning they are offered; their education through cocurricular offerings; the effectiveness of their programs; and what happens to them after they leave the institution.

2. Education as a public purpose

Every educational institution serves a public purpose. Public or state-supported institutions make that assumption readily. Not-for-profit institutions receive their tax-exempt status on the basis of an assumption that they serve a public purpose. And although it may appear that a for-profit institution does not require a public purpose, because education is a public good its provision serves a public purpose and entails societal obligations. Furthermore, the provision of higher education requires a more complex standard of care than, for instance, the provision of dry cleaning services. What the students buy, with money, time and effort, is not merely a good, like a credential, but experiences that have the potential to transform lives, or to harm them. What institutions do constitutes a solemn responsibility for which they should hold themselves accountable.

3. Education for a diverse, technological, globally connected world

A contemporary education must recognize contemporary circumstances: the diversity of U.S. society, the diversity
of the world in which students live, and the centrality of technology and the global dynamic to life in the 21st century. More than ever, students should be prepared for lifelong learning and for the likelihood that no job or occupation will last a lifetime. Even for the most technical qualification, students need the civic learning and broader intellectual capabilities that underlie success in the workforce. HLC distinguishes higher education in part on the basis of its reach beyond narrow vocational training to a broader intellectual and social context.

4. A culture of continuous improvement

Continuous improvement is the alternative to stagnation. Minimum standards are necessary but far from sufficient to achieve acceptable quality in higher education, and the strongest institutions will stay strong through ongoing aspiration. HLC includes improvement as one of two major strands in all its pathways, the other being assurance that member institutions meet the Criteria and the Federal Requirements.

A process of assessment is essential to continuous improvement, and therefore a commitment to assessment should be deeply embedded in an institution’s activities. Assessment applies not only to student learning and educational outcomes but to an institution’s approach to improvement of institutional effectiveness.

For student learning, a commitment to assessment would mean assessment at the program level that proceeds from clear goals, involves faculty at all points in the process, and analyzes the assessment results; it would also mean that the institution improves its programs or ancillary services or other operations on the basis of those analyses. Institutions committed to improvement review their programs regularly and seek external judgment, advice or benchmarks in their assessments. Because in recent years the issues of persistence and completion have become central to public concern about higher education, the current Criteria direct attention to them as possible indicators of quality and foci for improvement, without prescribing either the measures or outcomes.

Innovation is an aspect of improvement and essential in a time of rapid change and challenge; through its Criteria and processes HLC seeks to support innovation for improvement in all facets of institutional practice.

5. Evidence-based institutional learning and self-presentation

Assessment and the processes an institution learns from should be well grounded in evidence. Statements of belief and intention have important roles in an institution’s presentation of itself, but for the quality assurance function of accreditation, evidence is critical. Institutions should be able to select evidence based on their particular purposes and circumstances. At the same time, many of the Assumed Practices within the Criteria require certain specified evidence.

6. Integrity, transparency, and ethical behavior or practice

HLC understands integrity broadly, including wholeness and coherence at one end of the spectrum and ethical behavior at the other. Integrity means doing what the mission calls for and not doing what it does not call for; governance systems that are freely, independently and rigorously focused on the welfare of the institution and its students; scrupulous avoidance of misleading statements or practices; full disclosure of information to students before students make any commitment to the institution, even a commitment to receive more information; and clear, explicit requirements for ethical practice by all members of the institutional community in all its activities.

7. Governance for the well-being of the institution

The well-being of an institution requires that its governing board place that well-being above the interests of its own members and the interests of any other entity. Because HLC accredits the educational institution itself, and not the state system, religious organization, corporation, medical center or other entity that may own it, it holds the governing board of an institution accountable for the key aspects of the institution’s operations. The governing board must have the independent authority for such accountability and must also hold itself independent of undue influence from individuals, be they donors, elected officials, supporters of athletics, shareholders, or others with personal or political interests.

Governance of a quality institution of higher education will include a significant role for faculty, in particular with regard
8. Planning and management of resources to ensure institutional sustainability

HLC does not privilege wealth. Students do expect, however, that an institution will be in operation for the duration of their degree programs. Therefore, HLC is obliged to seek information regarding an institution’s sustainability and, to that end, wise management of its resources. HLC also watches for signs that an institution’s financial challenges are eroding the quality of its programs to the point of endangering the institution’s ability to meet the Criteria. Careful mid- and long-range planning must undergird an institution’s budgetary and financial decisions.

9. Mission-centered evaluation

HLC understands and values deeply the diversity of its institutions, which begins from the diversity of their missions. Accordingly, mission in some degree governs each of the Criteria. HLC holds many expectations for all institutions regardless of mission, but it expects that differences in mission will shape wide differences in how the expectations are addressed and met.

10. Accreditation through peer review

Peer review is the defining characteristic of accreditation and essential for a judgment-based process in a highly complex field. But self-regulation can be met with public skepticism. Therefore, peer review for accreditation must (1) be collegial, in the sense of absolute openness in the relationship between an institution and the peer reviewers assigned to it as well as between the institution and HLC; (2) be firm in maintaining high standards, not mistaking leniency for kindness or inclusiveness; and (3) be cognizant of the dual role of peer reviewers in both assuring and advancing institutional quality.
**Criteria for Accreditation and Assumed Practices**

The Criteria for Accreditation are the standards by which HLC determines whether an institution merits accreditation or reaffirmation of accreditation. The Criteria have been designed to seek evidence of continual improvement on the part of member institutions rather than to define minimum qualifications.

Foundational to the Criteria and Core Components is a set of practices shared by institutions of higher education. Unlike the 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.

**Determining Whether an Institution Meets the Criteria**

HLC reviews the institution against the Core Components and Criteria through its evaluation process according to the following framework.

The institution meets the Core Component if the Core Component:

a. is met without concerns, that is the institution meets or exceeds the expectations embodied in the Component; or

b. 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.

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.

The institution meets the Criterion if the Criterion:

a. is met without concerns, that is the institution meets or exceeds the expectations embodied in the Criterion; or

b. 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.

The institution does not meet the Criterion 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.

HLC will grant or continue accreditation (with or without conditions or sanctions), deny accreditation, or withdraw accreditation based on the outcome of its review.

**ONLINE AT**

- Criteria: policy.hlcommission.org/criteria
Criteria for Accreditation

HLC’s Board of Trustees considers modifications to the Criteria for Accreditation and the Assumed Practices annually, usually with first reading in February and second reading in June.

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.
   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.

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.

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. Cocurricular 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 cocurricular 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.

**Appendix: Terminology**

There are a few words and phrases in the Criteria that require additional clarification—seemingly simple language that, in practice, may be used in different ways by different member institutions. This glossary explains how these words are used within the Criteria. Its intent is not to prescribe how institutions must use a particular word or phrase locally, but rather to offer a means to ensure a consistent reading of the meaning and expectations of the Criteria.

**auxiliary** denotes activities and services related to but not intrinsic to educational functions: dining services, student housing, faculty or staff housing, intercollegiate athletics, student stores, a Public Radio station, etc. In many institutions **auxiliary** simultaneously denotes a segregated budget and dedicated revenues.

**assessment** and **evaluation** are used as ordinary language synonyms. When a narrower referent is intended, the terms are modified, as in “assessment of student learning” or “evaluation of academic services.”

**control** as used in the Criteria refers to the institution’s status as a public, private not-for-profit, or private for-profit institution, and in the latter instances, to the institution’s ownership and the board’s power to direct its affairs.

**dual credit** refers to courses taught to high school students for which the students receive both high school credit and college credit. These courses or programs are offered under a variety of names; the Criteria on “dual credit” apply to all of them as they involve the accredited institution’s responsibility for the quality of its offerings.

**faculty** and **instructors** refer to all those an institution employs or assigns to teach students. **Faculty** is used to refer to the group rather than to each individual instructional staff member, typically to distinguish faculty from administration.

**goals** and **outcomes** are used inconsistently by member institutions in the context of assessment of student learning, to the extent that one institution’s **goal** may be another’s **outcome** and vice versa. When they use either term, the Criteria indicate through context whether the term refers to the learning intended or to how much students actually learn.

**public** in phrases such as “makes available to the public” or “states publicly” refers to people in general, including current and potential students. In phrases such as “the public good,” the Criteria refer to public, as opposed to private, good. The modifier **public** as used to describe governing board members is defined within the statement requiring such members.

**wherever and however delivered** is intended to encompass all modes of delivery and all locations, modalities and venues, including but not limited to the main campus, additional locations, distance delivery, dual credit, and contractual or consortial arrangements.
Assumed Practices

The Assumed Practices below include changes that will be considered on Second Reading by the HLC Board of Trustees in June 2016. Policy wording to be deleted or revised is shown as strikethrough (old wording); new policy language, whether through addition or revision, is shown in bold (new wording).

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
   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 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.\textsuperscript{1}

9. The governing board has the authority to approve the annual budget and to engage and dismiss the chief executive officer.\textsuperscript{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.

\textsuperscript{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.

\textbf{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 exhibit 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. 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.
   b. Instructors teaching at the doctoral level have a record of recognized scholarship, creative endeavor, or achievement in practice commensurate with doctoral expectations.
   c. 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.

Revised Assumed Practice B.2. Effective September 1, 2017
In June 2015, HLC’s Board of Trustees adopted revisions to Assumed Practice B.2. regarding expectations for faculty qualifications. Because HLC’s Board recognized that the implementation of certain aspects of the expectations may require a period of transition at some institutions, the revised version will not go into effect until September 1, 2017. Institutions with dual credit programs may also apply for an extension to bring faculty in these programs into compliance with the Assumed Practice. The deadline to apply is December 15, 2016. The revised version of the Assumed Practices is available at policy.hlcommission.org/Policies/assumed-practices.html. HLC’s expectations regarding faculty qualifications are explained in more detail in Determining Qualified Faculty Through HLC’s Criteria for Accreditation and Assumed Practices, available at hlcommission.org/document-library/determining-qualified-faculty.html.
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.)

2Institutions under federal control are exempted provided that they have other reliable information to document the institution’s fiscal resources and management.
OBLIGATIONS OF AFFILIATION
Policy Number: INST.B.30.020

While seeking and holding affiliation with the Commission, an institution voluntarily agrees to meet obligations set forth by the Commission as follows:

1. The institution participates in periodic evaluation through the structures and mechanisms set forth in Commission policies, submission of reports as requested by the Commission, filing of the Institutional Update, and any other requirements set forth in its policies.

2. The institution is candid, transparent, and forthcoming in its dealings with the Commission, including in its responses to any special inquiries or requests for information from the Commission. The institution agrees not to enter into any agreement that limits the nature or scope of its communications with the Commission or requires that a third party review and approve those communications prior to their transmission to the Commission.

3. The institution notifies the Commission of any condition or situation that has the potential to affect the institution's status with the Commission, such as a significant unanticipated reduction in program offerings or serious legal investigation. (A fuller list of such conditions or situations is included in the Commission's policy on special monitoring.)

4. The institution informs the Commission 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 Commission accreditation requirements. (Definitions and process requirements are contained in the Commission's policy on institutions with related entities.)

5. The institution describes itself in identical terms to the Commission and to any other institutional accrediting body with which it holds or seeks affiliation with regard to purpose, governance, programs, locations, degrees, diplomas, certificates, personnel, finances, and constituents.

6. The institution notifies the Commission 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.

7. The institution assures its employees and students that it will consider fairly all complaints and third-party comments and not engage in retaliatory action against any who have submitted such information.

8. The institution accepts that the Commission will, in the interest of transparency to the public, publish outcomes from its accreditation process.

9. The institution portrays its accreditation status with the Commission clearly to the public, including the status of its branch campuses and related entities. The institution posts the electronic version of the Commission's Mark of Affiliation in at least one place on its website, linking users directly to the institution's status on the Commission's website.

10. The institution communicates to its constituencies and applicants any Public Disclosure Notice it receives from the Higher Learning Commission.

ONLINE AT
policy.hlcommission.org/requirements-for-affiliation/obligations-of-affiliation.html
11. 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.

12. The institution submits timely payment of dues and fees and accepts the fact of surcharges for late payment.

13. The institution agrees to accept binding arbitration in the event of an action by the Commission’s Board of Trustees that the institution disputes and is not able to resolve through the Commission’s processes. This agreement follows procedures developed and published by the Commission. The institution also agrees to grant immunity to the Commission from claims of civil liability related to judgments made by the Commission or its agents in the course of its work of accrediting institutions provided that it was acting in good faith and within the scope of its responsibilities.

Meeting Obligations of Affiliation

Institutions must remain in compliance with the Obligations of Affiliation at all times. The Commission shall determine when an institution is in violation of the Obligations of Affiliation. Commission staff, may at its discretion, make use of any means to determine whether the institution has violated an Obligation of Affiliation including, but not limited to, seeking written information from the institution or scheduling a peer reviewer or staff member to meet with one or more institutional representatives either on campus or through other appropriate methods.

Administrative Probation

An institution that is determined by Commission staff or peer reviewers to have not met the Obligations of Affiliation shall be placed on Administrative Probation by the Commission’s President for a period not to exceed ninety days. During this time the institution will be expected to remedy the situation that led to the imposition of Administrative Probation. The Commission President will notify the institution of the imposition of the Administrative Probation and the conditions for its removal.

If an institution fails to remedy the situation that led to Administrative Probation by the end of the ninety-day period, the Commission President shall take a recommendation concerning the institution to the Commission’s Board of Trustees. That recommendation may be for the application of a sanction or the withdrawal of accreditation, in accordance with Commission policies and procedures.

Disclosure of Administrative Probation

Administrative probation is noted on an institution’s Statement of Affiliation Status along with the reason for the Administrative Probation.
PATHWAYS FOR REAFFIRMATION OF ACCREDITATION

HLC has three pathways for reaffirmation of accreditation: Standard, AQIP and Open. In addition to the regular monitoring that occurs through HLC’s Institutional Update and other processes, institutions on each pathway complete multiple reviews to ensure they continue to meet the Criteria for Accreditation and pursue institutional improvement.

Choosing a Pathway

An institution’s pathway is determined upon the completion of an institution’s current cycle, which occurs after reaffirmation of accreditation in Year 10 of the Standard and Open Pathways and Year 8 of the AQIP Pathway.

Institutions may choose any of the pathways at the time of determination, unless they meet one of the conditions that would require placement on the Standard Pathway. An institution on the AQIP or Open Pathway may also be moved to the Standard Pathway if any of these conditions arise during the cycle.

An institution may be placed on or moved to the Standard Pathway if it meets one or more of the following conditions:

- It has been accredited for fewer than 10 years.
- It is in the process of a change of control, structure or organization, or it has undergone a change of control, structure or organization within the last two years.
- It is under HLC sanction or related action, or has been under HLC sanction or related action within the last five years.
- It has pending recommendations for a focused visit or extensive other monitoring, or it has a history of extensive HLC monitoring, including accreditation cycles shortened to seven or fewer years, multiple monitoring reports and multiple focused visits extending across more than one accrediting cycle.
- It is or has been undergoing dynamic change (e.g., significant changes in enrollment or student body, opening or closing of multiple locations or campuses) or requiring frequent substantive change approvals since the last comprehensive evaluation.
- It is raising or has raised significant HLC concerns about circumstances or developments at the institution (e.g., ongoing leadership turnover, extensive review by a governmental agency, patterns identified in financial and non-financial indicators).
- It has failed to make a serious effort to conduct its Quality Initiative in the Open Pathway.

Note: Institutions that are on probation or under a show-cause order are not considered to be on any of the three pathways.

Standard Pathway

The Standard Pathway follows a 10-year cycle. Quality assurance and institutional improvement are integrated into comprehensive evaluations conducted during the cycle, as well as through interim monitoring, as required.

Comprehensive Evaluations

Comprehensive evaluations are conducted twice in the Standard Pathway, once in Year 4 and again in Year 10. The comprehensive evaluation includes an Assurance Review, a review of Federal Compliance requirements, a student opinion survey and an on-site visit by a team of HLC peer reviewers. The evaluation may also include a multi-campus review, if applicable.
As part of the Assurance Review component of a comprehensive evaluation, the institution submits an Assurance Filing that demonstrates the institution is in compliance with HLC’s Criteria for Accreditation and has pursued institutional improvement efforts. If a previous evaluation identified an area of the institution as needing improvement, the Assurance Argument and Evidence File should specifically address the institution’s response to those concerns. Institutions without previously identified improvement requirements may identify and work on projects of their choosing.

Both comprehensive evaluations follow the same general process, but the Year 10 evaluation leads to an action regarding the reaffirmation of the institution’s accreditation. Most Year 4 evaluations do not include such action, but instead determine if follow-up monitoring is necessary. An exception to this rule is made in the case of institutions that are undergoing their first comprehensive evaluation following initial accreditation or removal of Probation. In these cases, reaffirmation of accreditation will be considered as part of the Year 4 comprehensive evaluation. If reaffirmation is granted, the institution moves to Year 5 of the Standard Pathway cycle.

Standard Pathway Resources

HLC holds regular events for institutions on the Standard Pathway to learn more about the requirements of the pathway and draft plans for demonstrating improvement in their Assurance Filings. These events include the following:

- **Q&A Webinars:** During these one-hour webinars, participants have the opportunity to ask questions about any topic related to the Standard Pathway, including the Assurance System, embedded improvement, monitoring, etc. This is not a formal presentation and attendees are encouraged to fully participate in an open exchange. Representatives from all institutions on the Standard Pathway are welcome to participate. Upcoming webinars are listed at [hlcommission.org/calendar](http://hlcommission.org/calendar).

- **Standard Pathway Seminars:** Institutions that are within two years of a comprehensive evaluation are invited to attend a one-day, in-person seminar on addressing improvement in the Assurance Argument. At the seminar, institutional teams develop strategies to demonstrate improvement within the Criteria for Accreditation. Attendees identify topics they wish to focus on during the comprehensive evaluation process and leave the event with recommendations and tentative plans about the ways to address previously identified issues of improvement. Upcoming seminars are listed at [hlcommission.org/calendar](http://hlcommission.org/calendar).

In addition to these resources, HLC staff liaisons are also available to review and provide feedback on an institution’s improvement plan during the academic year preceding the comprehensive evaluation. The staff liaison’s comments are intended to clarify expectations regarding the issues to be addressed within the Assurance Argument. For instance, an institution’s HLC staff liaison may point out an area of interest the institution had missed in the plan.

ONLINE AT
[hlcommission.org/pathways/standard-overview.html](http://hlcommission.org/pathways/standard-overview.html)
### Standard Pathway 10-Year Cycle

To determine where an institution is in the 10-year cycle, find the date of its next reaffirmation in the institution’s Statement of Affiliation Status. This date is Year 10, and the preceding academic years correspond to the previous years in the cycle. Maps for institutions with reaffirmation dates through 2020–21 are available on hlcommission.org.

<table>
<thead>
<tr>
<th>Cycle Year</th>
<th>Institutional Activities</th>
<th>Peer Review</th>
<th>HLC Decision Making</th>
</tr>
</thead>
<tbody>
<tr>
<td>Year 1</td>
<td>Institution may contribute documents to Evidence File, Submit interim reports and undergo visits if required</td>
<td>Review interim reports and conduct visits if required</td>
<td>Action on interim reports and visits if required</td>
</tr>
<tr>
<td>Year 2</td>
<td>Submit Comprehensive Evaluation Materials</td>
<td>Conduct Comprehensive Evaluation (with visit)</td>
<td>Action on Comprehensive Evaluation</td>
</tr>
<tr>
<td>Year 3</td>
<td>Institution may contribute documents to Evidence File, Submit interim reports and undergo visits if required</td>
<td>Review interim reports and conduct visits if required</td>
<td>Action on interim reports and visits if required</td>
</tr>
<tr>
<td>Year 4</td>
<td>Submit Comprehensive Evaluation Materials</td>
<td>Conduct Comprehensive Evaluation (with visit)</td>
<td>Action on Comprehensive Evaluation</td>
</tr>
<tr>
<td>Year 5</td>
<td>Institution may contribute documents to Evidence File, Submit interim reports and undergo visits if required</td>
<td>Review interim reports and conduct visits if required</td>
<td>Action on interim reports and visits if required</td>
</tr>
<tr>
<td>Year 6</td>
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<td>Year 7</td>
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<td>Year 8</td>
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<tr>
<td>Year 9</td>
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<tr>
<td>Year 10</td>
<td>Submit Comprehensive Evaluation Materials</td>
<td>Conduct Comprehensive Evaluation (with visit)</td>
<td>Action on Comprehensive Evaluation and Reaffirmation of Accreditation</td>
</tr>
</tbody>
</table>

1. HLC will continue to review data submitted by affiliated institutions through the Institutional Update, will apply change processes as appropriate to planned institutional developments and will monitor institutions through reports, visits and other means as it deems appropriate.

2. Materials for a comprehensive evaluation include an Assurance Filing (Assurance Argument and Evidence File) and Federal Compliance Filing. Some institutions will also file materials for a multi-campus review. HLC will provide the results of the institution’s Student Opinion Survey to the institution and peer review team.

3. Institutions undergoing the first comprehensive evaluation following granting of initial accreditation or removal of Probation will be considered for reaffirmation of accreditation as part of the Year 4 comprehensive evaluation. A change of pathway is not an outcome of the Year 4 review.

4. Year 10 includes HLC action regarding reaffirmation of accreditation. Action on the Year 10 review will also determine the institution’s future pathway eligibility.
AQIP Pathway

The Academic Quality Improvement Program (AQIP) Pathway is designed to assist institutions in achieving sustainable quality improvement while reaffirming their accredited status once every eight-year cycle. Since 2012, the AQIP Pathway has undergone a substantial revision in a continuous improvement effort. This work has led to new AQIP Pathway categories, new formats for Systems Portfolios and Appraisals, new curricula for Strategy Forums and new processes, including the Comprehensive Quality Review.

Because the AQIP Pathway includes a high degree of facilitation throughout its cycle, there is an additional financial commitment to participate in this Pathway. See HLC’s dues and fees at hlcommission.org/dues for more information.

Action Projects

As part of the AQIP Pathway, institutions conduct multiple and simultaneous short-term projects that the institution believes will have the most impact on quality improvement. These Action Projects are identified, designed and initiated by each institution to suit its needs. Institutions are required to submit at least three Action Projects for review annually, with at least one project focused on student learning. Institutions receive response comments subsequent to those filings through the Action Project Review.

Strategy Forums

Institutions on the AQIP Pathway also attend Strategy Forums twice each eight-year cycle. Institutions may attend a Strategy Forum either in Year 1 or 2 and then again either in Year 5 or 6 of the cycle. The Strategy Forum enables an institution to review the feedback gained either through the Systems Appraisal reports or Comprehensive Quality Review to develop strategies for further progress in its quality improvement efforts. At least one Action Project emerges from the Strategy Forum, along with the groundwork for several more.

Systems Portfolios and Systems Appraisals

In Year 3 and Year 7 of the pathway cycle, institutions submit a Systems Portfolio that provides evidence on how the institution plans, implements, reports and utilizes data for the AQIP Pathway Categories. These categories derive from the traits and behaviors of high-performing institutions.

Peer reviewers conduct a Systems Appraisal to review the Systems Portfolio and provide an institution feedback on its ongoing efforts to improve organizational performance. The peer review team also screens evidence the institution is meeting HLC’s Criteria for Accreditation. This offers the institution time to attend to any areas that may require additional evidence before its Comprehensive Quality Review in Year 8.

Coming Soon: Transition to the Assurance System

Starting in fall 2016, institutions on the AQIP Pathway will begin using the Assurance System to provide their Systems Portfolios. More information about this transition will be available in summer 2016.

Comprehensive Quality Review

The Comprehensive Quality Review is a comprehensive evaluation that occurs in Year 8 and includes a review of the institution’s Systems Appraisal and a follow-up Quality Highlights Report, a review of Federal Compliance requirements, a student opinion survey and an on-site visit by a team of HLC peer reviewers. The evaluation may also include a multi-campus review, if applicable. Whenever possible, the peer review team is to be drawn from the team that conducted the institution’s Year 7 Systems Appraisal. The peer review team will have the institution’s entire record of AQIP Pathway activity over the preceding seven years, and will seek informal discussions with various institutional groups during the on-site visit. This team will also review results from any concerns or issues raised by the Systems Appraisal team in Year 7, particularly in relation to Criteria for Accreditation and Core Components.

The peer review team makes a recommendation regarding the institution’s accredited status with HLC. Since institutions attend a Strategy Forum shortly after reaffirmation (Year 1 or 2 of the next cycle), they may capitalize upon feedback received from the Comprehensive Quality Review along with the feedback received from Systems Appraisals. A Comprehensive Quality Review may also occur in Year 4 of the AQIP Pathway cycle either at the request of the institution or as an HLC requirement.

ONLINE AT

hlcommission.org/pathways/aqip-overview.html
## AQIP Pathway Eight-Year Cycle

To determine where an institution is in the eight-year cycle, find the date of its next reaffirmation in the institution’s Statement of Affiliation Status. This date is Year 8, and the preceding academic years correspond to the previous years in the cycle. If you have questions, please contact aqip@hlcommission.org.

<table>
<thead>
<tr>
<th>Cycle Year</th>
<th>Institutional Activities</th>
<th>Peer Review</th>
<th>HLC Decision Making</th>
</tr>
</thead>
<tbody>
<tr>
<td>Year 1</td>
<td>Attend one Strategy Forum&lt;sup&gt;1&lt;/sup&gt;</td>
<td>Annual Action Project Updates</td>
<td>Annual Action Project Reviews</td>
</tr>
<tr>
<td>Year 2</td>
<td></td>
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</tr>
<tr>
<td>Year 3</td>
<td>Submit Systems Portfolio</td>
<td></td>
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</tr>
<tr>
<td>Year 4</td>
<td>Possible Comprehensive Quality Review&lt;sup&gt;3&lt;/sup&gt;</td>
<td>Conduct Systems Appraisal</td>
<td>Action on possible Comprehensive Quality Review</td>
</tr>
<tr>
<td>Year 5</td>
<td>Attend one Strategy Forum</td>
<td></td>
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<tr>
<td>Year 6</td>
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<td></td>
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<tr>
<td>Year 7</td>
<td>Submit Systems Portfolio</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Year 8</td>
<td>Submit Comprehensive Quality Review Materials&lt;sup&gt;4&lt;/sup&gt;</td>
<td>Conduct Comprehensive Quality Review (with visit)</td>
<td>Action on Comprehensive Quality Review and Reaffirmation of Accreditation&lt;sup&gt;5&lt;/sup&gt;</td>
</tr>
</tbody>
</table>

<sup>1</sup> HLC will continue to review data submitted by affiliated institutions through the Institutional Update, will apply change processes as appropriate to planned institutional developments and will monitor institutions through reports, visits and other means as it deems appropriate.

<sup>2</sup> All new AQIP Pathway institutions will participate in their first Strategy Forum during their first spring. During the second and subsequent AQIP Pathway cycles, the first Strategy Forum may be completed in either Year 1 or Year 2.

<sup>3</sup> This Comprehensive Quality Review will occur only if significant concerns arise during the prior Comprehensive Quality Review in Year 8, or from the Systems Portfolio and Appraisal processes in Year 3, or upon institutional request or HLC staff determination.

<sup>4</sup> Materials submitted in Year 8 for a Comprehensive Quality Review include a Quality Highlights Report and Federal Compliance Filing. Some institutions will also file materials for a multi-campus review. HLC will provide the results of the institution’s Student Opinion Survey to the institution and peer review team. In addition to these materials, the peer review team conducting the evaluation will review the institution’s latest Systems Appraisal and will have the institution’s entire record of AQIP Pathway activity over the preceding seven years.

<sup>5</sup> Year 8 includes HLC action regarding reaffirmation of accreditation. Action on the Year 8 review will also determine the institution’s future pathway eligibility.

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**Color Key**
- Required institutional activities
- Possible required institutional activities
- HLC decision-making actions
- Peer review activities
- Possible peer review activities and HLC actions
Open Pathway

The Open Pathway follows a 10-year cycle, with an Assurance Review in Year 4 and a comprehensive evaluation in Year 10. The Open Pathway also includes a separate improvement component, the Quality Initiative, that gives institutions the independence to pursue improvement projects that are geared toward their current needs and aspirations.

Assurance Review

In Year 4, institutions complete Assurance Reviews to ensure they are continuing to meet the Criteria for Accreditation. The institution submits an Assurance Filing that demonstrates the institution is in compliance with HLC’s Criteria for Accreditation and has pursued institutional improvement efforts. A peer review team evaluates these materials electronically and makes a recommendation to the Institutional Actions Council on whether the institution should continue on the pathway, or if monitoring is required. Year 4 Assurance Reviews do not typically include an on-site visit, unless requested by the peer review team.

Quality Initiative

Between Years 5 and 9, institutions on the Open Pathway undertake a Quality Initiative Project. The Quality Initiative may be designed to begin and be completed during this time, or an institution may continue an initiative already in progress or achieve a key milestone in the work of a longer initiative.

Institutions submit a proposal for the project, which is reviewed and approved by a panel of peer reviewers. At the end of Quality Initiative period, institutions then submit a report on the results of the project. Peer reviewers evaluate the report and make a recommendation as to whether the institution has made a genuine effort to achieve the goals of the Quality Initiative. In Year 10, this recommendation is sent to the Institutional Actions Council along with the results of the institution’s comprehensive evaluation in order to determine its continued eligibility to choose its pathway.

For institutions that are currently planning or working on their Quality Initiative projects, sample proposals are available at qi.hlcommission.org. The samples illustrate the wide range of projects that can be used as Quality Initiatives and demonstrate the information and level of detail that HLC’s peer reviewers need when evaluating submitted proposals.

Comprehensive Evaluation

In Year 10, institutions on the Open Pathway undergo a comprehensive evaluation that results in a determination of reaffirmation of accreditation. The comprehensive evaluation includes an Assurance Review, a review of Federal Compliance requirements, a student opinion survey and an on-site visit by a team of HLC peer reviewers. The evaluation may also include a multi-campus review, if applicable.
**Open Pathway 10-Year Cycle**

To determine where an institution is in the 10-year cycle, find the date of its next reaffirmation in the institution’s Statement of Affiliation Status. This date is Year 10, and the preceding academic years correspond to the previous years in the cycle. Maps for institutions with reaffirmation dates through 2020–21 are available on hlcommission.org.

<table>
<thead>
<tr>
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<th>Institutional Activities</th>
<th>Peer Review</th>
<th>HLC Decision Making¹</th>
</tr>
</thead>
<tbody>
<tr>
<td>Year 1</td>
<td>Institution may contribute documents to Evidence File</td>
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<tr>
<td>Year 2</td>
<td>Period to submit Quality Initiative Proposal</td>
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<tr>
<td>Year 3</td>
<td>Period to submit Quality Initiative Report</td>
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<tr>
<td>Year 4</td>
<td>Submit <strong>Assurance Filing</strong> (Assurance Argument and Evidence File)</td>
<td>Conduct <strong>Assurance Review</strong> (no visit)²</td>
<td>Acceptance of <strong>Assurance Review</strong>³</td>
</tr>
<tr>
<td>Year 5</td>
<td>Institution may contribute documents to Evidence File</td>
<td>Review <strong>Quality Initiative Proposal</strong></td>
<td></td>
</tr>
<tr>
<td>Year 6</td>
<td>Period to submit Quality Initiative Proposal</td>
<td>Review <strong>Quality Initiative Report</strong></td>
<td></td>
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<tr>
<td>Year 7</td>
<td>Period to submit Quality Initiative Report</td>
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<td>Year 8</td>
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<td>Year 9</td>
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<tr>
<td>Year 10</td>
<td><strong>Submit Comprehensive Evaluation Materials</strong>⁴</td>
<td>Conduct <strong>Comprehensive Evaluation</strong> (with visit)</td>
<td><strong>Action on Comprehensive Evaluation and Reaffirmation of Accreditation</strong>⁵</td>
</tr>
</tbody>
</table>

¹ HLC will continue to review data submitted by affiliated institutions through the Institutional Update, will apply change processes as appropriate to planned institutional developments and will monitor institutions through reports, visits and other means as it deems appropriate.

² Team may require a visit to explore uncertainties in evidence that cannot be resolved at a distance.

³ Certain team recommendations may require IAC action.

⁴ Materials for a comprehensive evaluation include an Assurance Filing (Assurance Argument and Evidence File) and Federal Compliance Filing. Some institutions will also file materials for a multi-campus review. HLC will provide the results of the institution’s Student Opinion Survey to the institution and peer review team.

⁵ Year 10 includes HLC action regarding reaffirmation of accreditation. Action on the Year 10 review will also determine the institution’s future pathway eligibility.

**COLOR KEY**

- Required institutional activities
- Optional institutional activities
- HLC decision-making actions
- Peer review activities
Using the Assurance System

HLC’s Assurance System is a web-based technology that institutions on the Standard and Open Pathways use to provide an Assurance Argument and evidentiary materials. HLC provides institutions with secure login accounts for this purpose. Peer reviewers are also provided access to the Assurance System to conduct the review and write their analysis and recommendation. Beginning in fall 2016, institutions on the AQIP Pathway will transition to using the Assurance System.

The following is a list of frequently asked questions concerning the Assurance System.

Q: Is any additional software needed to use the Assurance System?
A: The system is web-based and provided by HLC. No other technology is required, although some institutions may choose to procure such services or software on their own.

Q: Is there training available for the Assurance System?
A: Training for System Coordinators (the primary institutional manager for the Assurance System) and other institutional users is available via a pre-recorded webinar on HLC’s website. The training video can be found at hlcommission.org/assurance-system.

Q: Which document formats can be uploaded to the Evidence File?
A: The Evidence File allows uploads of PDF documents. This ensures compatibility on a variety of platforms and devices. For the sake of usability, PDFs should be limited in file size to 10 MB or less.

Q: Is there a word limit for the Assurance Argument?
A: The Assurance Argument is limited to 35,000 words for institutions on the Open Pathway and 40,000 words for institutions on the Standard Pathway. (The higher word limit for institutions on the Standard Pathway allows them to articulate how they are improving in various areas related to the Criteria.)

Q: Can information that has been deleted while writing the Assurance Argument be recovered?
A: Yes. The system has a robust version-tracking system that makes it possible to retrieve accidentally deleted information easily.

Most materials in the Evidence File must be uploaded directly into the system as PDF files. HLC allows institutions to provide URLs for the following specific resources:

- Course catalog.
- Class schedules.
- Faculty roster.
- Faculty, staff and student handbooks.
Beyond the Horizon: HLC’s 2020 Strategic Directions

As part of HLC’s strategic planning initiative, the Board of Trustees has endorsed the organization’s 2020 strategic directions: Value to Members, Innovation, Student Success, Thought Leadership and Advocacy (VISTA). These directions were developed from input offered by institutional members and peer reviewers. They will become part of the final strategic plan and reaffirm HLC’s mission to “serve the common good by assuring and advancing the quality of higher learning.” HLC plans to share its final strategic plan in summer 2016. For more information, visit hlcommission.org/about-the-commission/strategic-plan.html.

Institutional Policies

HLC’s institutional policies can be found at policy.hlcommission.org. Institutions should always refer to this website for the current version of HLC policies, which are reviewed regularly by the Board of Trustees. The Board recognizes that higher education is rapidly changing and that HLC policy needs to reflect those changes. Therefore, the Board commits to review its policies and procedures, particularly but not exclusively related to institutional dynamics and change, regularly to evaluate their responsiveness to the higher education environment, their effectiveness in providing quality assurance, and their usefulness in enhancing institutional and educational improvement.

Dues and Fees Schedule

HLC’s dues and fees schedule can be found at hlcommission.org/dues. The dues collection structure for HLC continues to follow the model introduced for the 2015–16 fiscal year. Under this structure, most of the costs previously covered by evaluation fees are included in the annual dues, thereby distributing the cost of maintaining accreditation more evenly over the 10-year reaffirmation period, avoiding the periodic spikes that occurred in the previous system.

Invoices for dues are sent to member institutions in July of each year, following Board action to approve changes to the dues and fees. Payment is due on receipt of the bill and is not refundable.

HLC also bills institutions for direct expenses related to evaluation visits as well as fees associated with other types of processes.

Public Information

Mark of Affiliation

As part of HLC’s Obligations of Affiliation, each institution is required to display HLC’s Mark of Affiliation on its website. The Mark of Affiliation reflects the institution’s current accreditation status and will lead visitors to the institution’s Statement of Accreditation Status on HLC’s website.

Use of HLC Logos and Images

HLC’s logos are not to be used for promotional or advertising purposes by affiliated institutions. HLC’s Mark of Affiliation is available for institutions to identify their affiliation status with HLC.

Publication of Actions and Accredited Status

When an institution reports an HLC action regarding reaffirmation of accreditation, it may state that its accredited status has been continued. If it wishes to disclose additional information, such as the scheduled year of the next comprehensive evaluation, it should also disclose other details, including any interim reports or monitoring required as part of the action. Phrases such as “accreditation
has been continued for a 10-year period” should never be used. Accredited status is not for a specific period of time, but is a continuing relationship between the institution and HLC that is subject to reconsideration periodically or when necessary.

Affiliated institutions must use one of the following statements when referring to their status with HLC in catalogs, advertisements, brochures and other publications:

For accredited institutions, status should be stated as: Accredited by the Higher Learning Commission.

For candidate institutions, status should be stated as: Candidate for accreditation with the Higher Learning Commission.

In keeping with federal requirements, when a college or university makes reference to its affiliation with HLC, it includes HLC’s website address and telephone number. HLC urges the careful placement of this information so as not to confuse the public about how to contact HLC as contrasted with how to obtain information from the institution itself.

Should an affiliated institution be under a sanction by HLC, the specific policies on that sanction dictate when and how it must be disclosed when the institution makes reference to its affiliation status with HLC.

An institution that is unaffiliated should make no reference to affiliation with HLC until HLC has granted accredited status or candidate status.

Public Disclosure Notices and Public Statements

The Board of Trustees issues a public disclosure notice regarding a sanction or an adverse action taken on an affiliated institution. The notice includes a history of the institution's relationship with HLC, the nature of the adverse action, and a brief analysis of the situation that prompted the action.

Public Statements may be issued and posted by HLC when circumstances at an institution trigger inquiries to HLC, or to clarify HLC’s involvement with a situation at an institution.

Institutional Status and Requirements Report

The Institutional Status and Requirements Report is a resource to allow CEOs or Accreditation Liaison Officers (ALOs) to review information regarding the institution's accreditation relationship with HLC. This report is intended to inform the institution only, and is not available to the public. The ISR may only be requested by the CEO or ALO of the institution by using the request form at hlcommission.org/monitoring/institutional-status-and-requirements-report.html.

Features of the Institutional Status and Requirements Report include complete institutional history with HLC, information on the status of current or upcoming accreditation events, and information on the institution’s designated pathway and related events.

News From HLC

Email is HLC’s primary means of communicating with member institutions. Institutions are asked to help ensure that email communications sent from HLC are delivered.

HLC has limited the number of email addresses it uses to send official communications. Five email addresses have been designated as official addresses for HLC, and member institutions are asked to add these addresses to their whitelists:

hlc@hlcommission.org
accreditation@hlcommission.org
peerreview@hlcommission.org
academy@hlcommission.org
annualconference@hlcommission.org

Be sure that the institution's HLC staff liaison's email address is also whitelisted. Each liaison's email address is first initial, last name@hlcommission.org (example: John Smith would be jsmith@hlcommission.org).
**Substantive Change**

HLC recognizes that change at institutions of higher education is constant, and it supports change to improve educational quality. HLC has outlined specific conditions under which an institution needs to inform HLC of change, or obtain authorization before implementing changes.

Some changes require prior HLC approval and should only be implemented after the change has been formally approved. Other institutional changes only require HLC be notified of the change.

**Types of Change**

Substantive changes that typically require HLC notification or prior approval include:

- Programs.
- Competency-based education programs.
- Clock or credit hours.
- Certificate programs.
- Length of term affecting allocation of credit.
- Branch campuses and additional locations.
- Distance delivery.
- Consortial arrangements.
- Contractual arrangements.
- Mission or student body.

Visit hlcommission.org/change for a detailed list of substantive changes and HLC’s requirements for each. Contact changerequests@hlcommission.org for additional information.

Most change processes are subject to a fee. HLC’s fee schedule can be found online at hlcommission.org/dues. The fee schedule is updated annually with the new or revised fees effective on September 1.

**HLC Review Processes**

HLC will determine the appropriate process for review of the proposed change: Desk Review, Change Panel or Change Visit. Recommendations from these processes are forwarded to the Institutional Actions Council (IAC) for final action. If a change request is denied, an institution may choose to resubmit the change application, addressing issues raised by the IAC, no sooner than six months after the decision.

**Desk Review**

A Desk Review consists of a review conducted by HLC staff of an institutional change application. The institution is given an opportunity to review the recommendation prior to its consideration by the decision-making body.

**Change Panel**

A Change Panel will consist of three or more HLC peer reviewers who will 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 modifications as appropriate. The institution is given an opportunity to review the recommendation and provide an institutional response prior to its 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 consists of a team of two or more HLC peer reviewers who review applications for approval of substantive change submitted by institutions. Change visits are set three months or more after the receipt of the change application. The Change Visit team may recommend that the change be approved, approved with modifications, or denied. The institution is given an opportunity to review the recommendation and provide an institutional response prior to its consideration by the decision-making body.

In some instances, the HLC staff liaison will embed the review of a change request into an upcoming comprehensive evaluation or Comprehensive Quality Review. Decision making for the embedded change visit will occur in conjunction with the associated visit.

**Location and Campus Update System**

The Location and Campus Update System is used by Accreditation Liaison Officers (ALOs) for updating their institution's existing additional locations and existing branch campuses. ALOs whose institutions are in the Notification Program for Additional Locations may also use this application to add additional locations. The Location and Campus Update System is available at lcu.hlcommission.org.

**Certificate Application**

Institutions should complete HLC’s online certificate application form for all new certificates. The form includes screening questions that determine if a certificate needs separate HLC approval. The form will display a message indicating when a certificate does not require approval; this message should be saved for the institution’s records. If a certificate does require approval, the form will continue through the full application. A link to the form to apply for approval of certificates is available at hlcommission.org/change.
Off-Campus Activities

New locations for institutions are established through HLC’s Substantive Change Process. Once approved and established, these locations are monitored through peer review visits and are subject to a decision-making process depending on the location type.

Definitions

Campus or Branch Campus
(Same as the federal definition)

The term branch campus is “a location of an institution that is geographically apart and independent of the main campus of the institution.” HLC considers a location of an institution to be independent of the main campus if the location:

• Is permanent in nature;
• Offers courses in educational programs leading to a degree, certificate, or other recognized educational credential;
• Has its own faculty and administrative or supervisory organization; and
• Has its own budgetary and hiring authority.

A branch campus must have all four of these attributes.

Additional Location

A place, geographically separate from any main or branch campus, where instruction takes place and students can do one or more of the following:

• Complete 50 percent or more of the courses leading to a degree program.

• Complete 50 percent or more of the courses leading to a Title IV eligible certificate.

• Complete a degree program that they began at another institution even if the degree completion program provides less than 50 percent of the courses leading to a degree program.

There is no base or threshold number of students or distance from the campus necessary for a facility to qualify as an additional location under this definition.

An additional location typically does not have a full range of administrative and student services staffed by the facilities personnel. Such services may be provided from the main campus or another campus.

A facility may provide access to instruction requiring students to be present at a physical location that receives interactive TV, video, or online teaching. It is considered an additional location when 50 percent or more of a distance delivery program is available through one or more of these modalities at that facility.

Note: The change must be reported the same to HLC and the U.S. Department of Education as either an additional location(s) or branch campus.

Additional Location Confirmation Visit

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

**Campus Evaluation Visit**

An on-site evaluation of campuses and branches must be conducted within six months of matriculation of students and initiation of instruction at the campus or branch. These visits are conducted after HLC has approved a new campus through the substantive change process, an initial review done typically by a Change Panel. If an institution is expanding into a previously approved campus from an active additional location with enrolled students and multiple degree programs, a Campus Evaluation Visit may be conducted both to approve the campus and to assure its quality and its capacity to sustain that quality.

**Multi-location Evaluation Visit**

If an institution has more than three off-campus additional locations, HLC will conduct on-site visits of a representative sample of the additional locations in Years 3 and 8 for institutions in the Open or Standard Pathways and in Years 3 and 7 for institutions in the AQIP Pathway. The visit is made by HLC peer reviewers and will be to confirm the continuing effective oversight by the institution of its additional locations. Further monitoring of an institution’s additional locations through HLC’s established monitoring processes may be recommended.
**FINANCIAL AND NON-FINANCIAL INDICATORS**

**Institutional Update**

Each year HLC requires each member institution to provide an update on organizational health through the Institutional Update. Certain financial and non-financial indicators of organizational health are reviewed to determine whether there are any trends that suggest HLC follow-up. Information provided to HLC through the Institutional Update also serves other purposes:

- Some information is used to update the Statement of Affiliation Status posted on HLC’s website.
- Some changes may require review through HLC’s policies and procedures on institutional change.
- Some information is collected and monitored in compliance with federal requirements.
- Student enrollment and instructional location data are used to calculate HLC membership dues.

**Financial Indicators**

HLC reviews the financial data submitted in the Institutional Update to determine whether an institution operates with integrity in its financial functions (see Criterion 2, Core Component 2.A.).

The financial data submitted in the Institutional Update generate a Composite Financial Index (CFI). For private institutions, HLC uses the financial ratios required by the U.S. Department of Education, and for public institutions, HLC relies on the financial ratios recommended in Strategic Financial Analysis for Higher Education: Identifying, Measuring & Reporting Financial Risks (Seventh Edition), by KPMG LLP; Prager, Sealy & Co., LLC; Attain LLC.

**Non-financial Indicators**

HLC reviews non-financial data submitted in the Institutional Update for seven indicator conditions and requests responses from institutions when certain indicator conditions occur. The purpose of this process is to identify institutions that may be at risk of not meeting elements of the Criteria for Accreditation.

HLC looks at the following indicators. *Note:* Indicator Conditions 6 and 7 do not apply to graduate-only institutions. "Small Institutions" are those with less than 1,000 students while “large institutions” are those with 1,000 students or more.

1. **Enrollment Changes** – Three-year increase or decrease of 80 percent or more in enrollment for small institutions or 40 percent or more for large institutions.

2. **Degrees Awarded** – Three-year increase or decrease of 75 percent or more in degrees awarded for small institutions and 65 percent or more for large institutions.

3. **Full-time Faculty Changes** – Three-year decrease of 75 percent or more for small institutions or 50 percent or more for large institutions in the headcount of full-time faculty (not full-time equivalent).
4. **Student Default Rates** — Three-year student loan default rate of 30 percent or more for 2-year institutions or 25 percent or more for other institutions.

5. **Minimal Full-time Faculty** — The headcount of full-time faculty (not full-time equivalent) divided by the number of degree programs offered is less than one.

6. **Student to Faculty Ratio** — The number of undergraduate full-time equivalent students divided by the number of undergraduate full-time equivalent faculty is greater than or equal to 35.

7. **Weak Graduation/Persistence Rates Compared to Peers** — The number of full-time equivalent undergraduate students divided by undergraduate degrees awarded is in the top percentages of the institution's peers. Peer groups are either 2-year small or large undergraduate institutions or 4-year small or large undergraduate institutions.
Federal Compliance

As a federally recognized accrediting agency, HLC is required to assure that all its member institutions are meeting their Title IV program responsibilities as well as complying with the expectations of specific regulations accreditors must enforce as a part of their recognition by the U.S. Department of Education. Compliance with these requirements by both institutions and HLC is necessary to ensure that institutions accredited by HLC are eligible for federal financial aid.

Federal Compliance Changes Effective September 2016

Starting September 2016, institutions will be asked to complete a form when submitting information to HLC regarding Federal Compliance. The form was created to communicate more clearly to institutions what information is required and to ensure that Federal Compliance Filings would be complete. The new form is available on HLC’s website.

Areas Addressed in Federal Compliance

The following areas are addressed in the Federal Compliance Process:

• Assignment of Credits, Program Length and Tuition
  » Assignment of Credit Hours and Clock Hours
• Institutional Records of Student Complaints
• Publication of Transfer Policies
• Practices for Verification of Student Identity
• Title IV Program Responsibilities
  » General Program Responsibilities
  » Financial Responsibility Requirements
  » Default Rates
  » Campus Crime Information, Athletic Participation and Financial Aid and Related Disclosures
  » Student Right to Know/Equity in Athletics
  » Satisfactory Academic Progress and Attendance Policies
  » Contractual Relationships
  » Consortial Relationships
• Required Information for Students and the Public
• Advertising and Recruitment Materials and Other Public Information
• Review of Student Outcome Data
• Publication of Student Outcome Data
• Standing with State and Other Accrediting Agencies
• Public Notification of Opportunity to Comment (Third-Party Comment)
• Competency-Based Programs Including Direct Assessment Programs/Faculty-Student Engagement

Third-Party Comment

HLC seeks public comment about institutions as part of its Federal Compliance requirements, which institutions complete for comprehensive evaluations. Institutions are responsible for publicizing the HLC evaluation and publishing invitations and information regarding third-party comment. HLC forwards all comments to the institution
being reviewed and to the peer review team to include in their review of the institution.

For more information, visit hlcommission.org/comment.

**Federal Compliance Process**

HLC’s Federal Compliance process follows three steps:

First, institutions must address the federal requirements in the materials they submit to HLC before a visit. The document “Federal Compliance Filing by Institutions” provides guidance to institutions in addressing these requirements. Applying institutions and member institutions address the Federal Compliance requirements as part of materials prepared for comprehensive evaluations.

Institutions participating in the Open or Standard Pathway can upload information relevant to Federal Compliance requirements to the Assurance System. Institutions on the Open Pathway must demonstrate that they meet the Federal Compliance requirements during the Year 10 comprehensive evaluation. Institutions on the Standard Pathway must demonstrate that they meet the Federal Compliance requirements in the Year 4 and Year 10 comprehensive evaluations. Institutions on the AQIP Pathway address the requirements in the materials prepared for Comprehensive Quality Reviews.

Second, HLC expects that institutions make Federal Compliance supporting information available during the visit (or in the Assurance System). While conducting the visit, peer reviewers verify that the Federal Compliance information they received is accurate and complete and raise any questions they have with institutional representatives.

Third, peer reviewers document that they have conducted a thorough review of the institution’s compliance with federal requirements using the “Federal Compliance Worksheet for Evaluation Teams.” A Federal Compliance Panel reviews the institution’s Federal Compliance materials in advance of the visit and refers any issues to the on-ground team for further exploration and confirmation. In some cases, HLC does not assign a Federal Compliance Panel and instead asks that the on-site peer review team conduct the Federal Compliance Review as part of its work.
Decision Making

**Decision-Making Bodies**

Decision-making bodies comprised of institutional representatives and public members take actions on affiliated institutions. Unless otherwise specified, the decision-making bodies are representative of HLC’s member institutions, with attention to institutional type, control, size and geographical distribution. All decision-making bodies abide by HLC’s conflict of interest policies.

HLC’s three decision-making bodies are the Institutional Actions Council (IAC), the Board of Trustees, and the Appeals Body.

The decision-making processes for individual cases are dependent upon HLC policy. Please review HLC policies to determine how the process might change based on institutional circumstances.

The IAC has the authority to act on cases of reaffirmation of accreditation, including Pathway placement, and substantive change cases. Some cases heard by the IAC require Board action. In these instances the IAC submits a recommendation to the Board for consideration. The Board may either adopt the recommendation of the IAC as its action or it may take another action provided for by HLC policy.

Cases that require final action by the Board of Trustees include granting or denying an institution candidacy or initial accreditation; issuing or withdrawing a sanction; withdrawing status from an accredited institution; issuing or removing a show-cause order; initiating a reconsideration process; approving or denying a Change of Control, Structure, or Organization; and moving an institution from accredited to candidate status.

Although many actions by the Board are considered final actions, an institution may, in some cases, appeal an adverse action of the Board. In these instances, an Appeals Panel hears the cases and has the authority to affirm, amend, or reverse the action of the Board of Trustees. The Appeals Panel may also send the action back to the Board with specific instructions on how to proceed in further consideration. Whatever action the Panel decides on is a final action and must be recognized and implemented by the Board of Trustees.

**Decision-Making Process**

The decision-making process begins once an evaluation concludes. A peer review team report that includes a recommendation is submitted to an HLC decision-making body.

Each year the IAC reviews more than 1,000 cases in two settings. The first is called a meeting, which is held via webinar. Cases that do not require Board action are heard in meetings. Representatives from the institutions are not present at these meetings.

An institution may request, or HLC policy may require, that certain cases go to a hearing rather than a meeting. Representatives from both the institution and peer review team, along with a committee of IAC members, are physically present at these hearings.

A committee of IAC members is selected for each meeting and hearing; they are responsible for reading the entire record related to each case. Approximately every six weeks, three IAC committees review cases in a meeting format. Hearings are conducted three times each year, always timed to occur in advance of the HLC Board of Trustees meetings.
An action taken by the IAC is considered a final action unless the case requires review by the Board of Trustees. If the case requires action by the Board, the IAC includes a recommendation with the report sent on to the Board of Trustees for final action.

**Institutional Response**

Institutions are offered an opportunity to respond after each evaluation and at each stage of the decision-making process. The IAC considers the institutional response as part of the full record of the case, along with the recommendation of the peer review team.

Approximately two weeks after a final action by the IAC or Board of Trustees, an Action Letter is sent to the institution. The Action Letter relays the final action to the institution.
HLC’s Peer Corps is a group of volunteers who employ their knowledge and experience with member institutions to assure and advance institutional quality. The Peer Corps currently consists of approximately 1,500 faculty, administrators and staff who currently have or recently have had an affiliation with institutions within HLC’s 19-state region.

Role of Peer Reviewers

Peer reviewers play various roles in all stages of the accreditation process. Members of the Peer Corps are responsible for assuring that institutions within HLC’s region are meeting the Criteria for Accreditation.

Peer reviewers are active in both the candidacy and reaffirmation processes for institutions. They participate in visits for candidacy, determine whether institutions in candidacy are making progress toward meeting the Criteria for Accreditation (through Biennial Visits), and participate in visits for Initial Accreditation. Peer reviewers conduct two comprehensive evaluations for institutions on the Standard Pathway, a Comprehensive Quality Review and two Systems Appraisals for institutions on the AQIP Pathway, and an Assurance Review and comprehensive evaluation for institutions on the Open Pathway.

Peer reviewers also conduct focused visits and change visits and serve on change panels. Peer reviewers may be asked to visit additional locations or campuses, or conduct paper reviews of information provided by the institution.

Peer Review Training

Training is provided for both new and experienced peer reviewers. New peer reviewers must attend an intensive in-person training session upon entering the Peer Corps. Other training opportunities include sessions at the Annual Conference, online training courses, and just-in-time webinars for updates to processes and the Criteria for Accreditation.

All peer reviewers are trained on the Assurance System review process, evaluation techniques, forms and templates used during evaluations, the Systems Appraisal process (for AQIP Pathway peer reviewers) and how to properly draft and edit the written portions of evaluations prior to being assigned to evaluation teams and panels. HLC ensures all peer reviewers understand the Criteria for Accreditation and know how to establish whether institutions meet the Criteria.

Applying to the Peer Corps

HLC accepts new Peer Corps members each year. Applicants are asked to submit a letter of application describing their relevant experience, a curriculum vitae or resume, and the names and contact information for two professional references. Additional details and application deadlines are available at hlcommission.org/peer-review/peer-reviewer-application.html.

Contact peerreview@hlcommission.org for more information.
HLC GUIDELINES

Determining Qualified Faculty

The document *Determining Qualified Faculty Through HLC’s Criteria for Accreditation and Assumed Practices* provides guidance to institutions and peer reviewers in evaluating the qualifications of faculty including full-time, part-time, adjunct, temporary, and/or non-tenure-track faculty. The guidelines highlight the Criteria for Accreditation and Assumed Practices that speak to the importance of institutions accredited by HLC employing qualified faculty for the varied and essential roles faculty members perform.

These guidelines have been revised following the adoption of a policy revision to Assumed Practice B.2. by HLC’s Board of Trustees in June 2015. This policy revision restated HLC’s longstanding expectations regarding the qualifications of faculty and the importance of faculty members having appropriate expertise in the subjects they teach. The guidelines were revised in March 2016 to make more explicit how HLC intends to review institutions and how peer reviewers will examine contextual nuances regarding faculty qualifications, including as they apply to dual credit faculty.

Dual Credit Guidelines

The document *Dual Credit Guidelines for Institutions and Peer Reviewers* offers institutions and peer reviewers formal guidance on the evaluation of dual credit activity at member institutions. HLC defines dual credit courses as “courses taught to high school students for which the students receive both high school credit and college credit.” Dual credit programs are reviewed in an institution’s comprehensive evaluation, but also may be reviewed at other times if concerns about the programs arise.

Two-Year Institutions Seeking to Offer the Baccalaureate Degree

Before launching baccalaureate programs, two-year institutions must seek HLC approval through a Substantive Change request. As more two-year institutions seek to offer baccalaureate degrees, HLC has developed guidelines, published in the document *Two-Year Institutions Seeking to Offer the Baccalaureate Degree: Considerations of Readiness*, to assist these institutions in an internal review of readiness. The guidelines also serve as a reference to peer reviewers who may be asked to evaluate the change requests.

School of Record Guidelines

Institutions acting as a School of Record must be able to ensure academic integrity and transparency in the transcription of coursework taken abroad by students. They also must ensure appropriately trained personnel are evaluating such courses or programs and that the institution has established processes for evaluation that are applied in a consistent fashion. The document *School of Record Guidelines* highlights the Criteria and Assumed Practices relevant for these institutions.

ONLINE AT

policy.hlcommission.org/criteria

HLC’s Academies

HLC’s Academies are four-year, mentor-facilitated programs that help HLC-accredited institutions define, develop and implement comprehensive strategies for institutional improvement.

Institutions taking part in one of HLC’s Academies are grouped into cohorts, allowing them to work collaboratively and share ideas throughout the Academy cycle. Each participating institution is assigned a mentor and a Scholar who provide regular advice and critique on the institution’s Academy Project biannually for the duration of the four-year program. Select mentors and Scholars also attend Academy events as event facilitators to assist institutional teams in developing and implementing customized projects that lead to the achievement of each institution’s goals.

Assessment Academy

The Assessment Academy is tailored for institutions interested in developing an ongoing commitment to assessing and improving student learning. The Academy offers personalized guidance in gathering the necessary information and data to survey student learning outcomes, determining goals that should be set for the institution, and developing and implementing strategies to achieve those goals.

The Assessment Academy encourages institutions to create new ideas and techniques for improving the assessment of student learning and the institutional capacity to complete those assessments. Institutions participating will develop action plans and processes to regularly test and document effective practices in assessing and improving student learning.

Persistence and Completion Academy

The Persistence and Completion Academy has been developed for institutions with an interest in building institutional capacity for improvement of student persistence and completion. The Academy offers a guided program to teach participating institutions how to best define, track and analyze data on student success; establish clear goals and strategies for student population groups; and achieve those goals.

The Academy focuses on how to use data to evaluate current strategies for improvement and introduce institutions to new techniques for researching and comparing emerging methods of evaluation and improvement. Participating institutions will develop an enhanced capacity to achieve newly established student success goals and means of improving faculty and staff expertise.

Applying to the Academies

Institutions are accepted into the Academies twice each year in a Fall Cohort and a Spring Cohort. For more information, including applications and timelines, visit hlcommission.org/about-the-commission/academy-applications.html.

ONLINE AT
hlcommission.org/academies
HLC Events

Annual Conference

HLC’s Annual Conference is one of the largest events of its kind in higher education, with approximately 4,000 administrators and faculty members attending each year. The five days of programming cover a broad range of topics, including institutional experience with accreditation processes, assessment of student learning, quality improvement, institutional effectiveness, and more.

2017 Annual Conference: Navigating the Future

At the 2017 Annual Conference, HLC will include a special focus on the role of accreditation in “navigating the future” of higher education related to innovation and student success. The conference, taking place March 31 – April 4 in Chicago, will be built on the framework that higher education can be agile and responsive, and will be constructed to provide resources for member institutions navigating the road ahead.

Professional Development Week

HLC’s Professional Development Week, held twice annually, offers key information and strategies designed to spur institutional improvement in the areas of assessment of student learning and student success, persistence and completion. Through informational and interactive workshops, participants receive:

- New insights from experts and accomplished practitioners.
- Guided discussions about promising practices and strategies.
- Opportunities to network with other higher education professionals.

Standard Pathway Seminar

HLC hosts seminars on addressing improvement in the Assurance Argument for institutions on the Standard Pathway that are within two years of a comprehensive evaluation. Attendees develop strategies to demonstrate improvement within the Criteria for Accreditation and identify topics they wish to focus on during the evaluation process.

ONLINE AT

hlcommission.org/programs
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Donna Powless, Professor, College of Menominee Nation, WI
Valdeh Rajagopalan, Professor of Psychology, Saint Charles Community College, MO
Rex Ramsier, Vice Provost, University of Akron, OH
Betty J. Redleaf-Collett, Dean of Academic Affairs, Little Priest Tribal College, NE
Marla Scafe, Quantitative Methods and Research Faculty, Walsh College, MI
R. Craig Schnell, Professor of Pharmaceutical Sciences; Provost Emeritus, North Dakota State University, ND
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Judith P. Siminoe, Special Adviser to the President, St. Cloud State University, MN
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David Starrett, Provost and Vice President for Academic Affairs, Columbus College, MO
Donna S. Statzoll, Director of Institutional Research, Hennepin Technical College, MN
Randall Jay Stiles, Associate Vice President for Analytics and Institutional Research, Grinnell College, IA
Marlene L. Strate, Director, School of Education, Iowa State University, IA
Michael Strong, President (Retired), Oklahoma Quality Award Foundation, OK
Jeanne K. Swarthout, President, Northland Pioneer College, AZ
Mo-Yin S. Tam, Emeritus Professor of Economics, University of Illinois at Chicago, IL
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Devarajan Venugopalan, Vice Provost, University of Wisconsin-Milwaukee, WI
Joaquin Villegas, Associate Professor Emeritus, Teacher Education, Northeastern Illinois University, IL
David Wendler, Vice President for Academic and Emeritus, Martin Luther College, MN
Michael Westerfield, Vice President and Dean of Graduate College; Director of Accreditation Services, William Woods University, MO
Michael Williford, Associate Provost, Ohio University, OH
Benjamin F. Young, Vice President Emeritus, Ivy Tech Community College of Indiana, IN
Deborah Dahlen Zelechowski, Group Dean of Academic Affairs, Local Central Group, DeVry University, IL
The institutions listed below have agreed to share their experiences going through a recent HLC evaluation process. These are examples of how individual institutions have approached these processes, and are not intended to be HLC-recommended models of how to conduct the accreditation process.

HLC thanks the institutional representatives for their willingness to be listed in this resource. Representatives from these institutions will also be in attendance at the Accreditation Share Fair at HLC’s 2016 Annual Conference on April 17.

### Standard Pathway

**Comprehensive Evaluation**

**Bethany Lutheran College (Minnesota)**  
Control: Private NFP  
Highest Degree: Bachelor's  
FT Undergrad: 487; PT Undergrad: 16  
FT Grad: 0; PT Grad: 0  
Contact: Eric Woller, Vice President of Academic Affairs  
Email: eric.woller@blc.edu

**Chamberlain College of Nursing (Illinois)**  
Control: Private FP  
Highest Degree: Doctoral  
FT Undergrad: 5,382; PT Undergrad: 12,436  
FT Grad: 286; PT Grad: 5,100  
Contact: Carla Sanderson, Vice President, Institutional Effectiveness and Professional Regulation  
Email: c.sanderson@chamberlain.edu  
Phone: 731.394.8808

**Ohio Christian University**  
Control: Private NFP  
Highest Degree: Master’s  
FT Undergrad: 1,613; PT Undergrad: 2,125  
FT Grad: 158; PT Grad: 162  
Contact: Hank Kelly, Provost  
Email: h.kelly@ohiochristian.edu  
Phone: 740.420.5924

### AQIP Pathway

**Systems Appraisal**

**Bay de Noc Community College (Michigan)**  
Control: Public  
Highest Degree: Associate's  
FT Undergrad: 837; PT Undergrad: 1,187  
FT Grad: 0; PT Grad: 0  
Contact: Patrick Kennedy, Vice President for Bay College West and Title IX Coordinator  
Email: kennedyp@baycollege.edu

**Nebraska Methodist College of Nursing and Allied Health**  
Control: Private NFP  
Highest Degree: Master's  
FT Undergrad: 453; PT Undergrad: 294  
FT Grad: 173; PT Grad: 80  
Contact: Deb Carlson, Executive Vice President  
Email: Deb.carlson@methodistcollege.edu  
Phone: 402.354.7023  
Online Report: methodistcollege.edu/about/overview/institutional-research/systems-portfolio

### Comprehensive Quality Review

**Ohio University**  
Control: Public  
Highest Degree: Doctoral  
FT Undergrad: 21,661; PT Undergrad: 11,894  
FT Grad: 2,850; PT Grad: 2,796  
Contact: Michael Williford, Associate Provost  
Email: michael.williford@ohiou.edu  
Phone: 740.593.1056  
Online Report: ohio.edu/provost/accreditation/index.cfm

**Southwestern Illinois College**  
Control: Public  
Highest Degree: Associate's  
FT Undergrad: 4,591; PT Undergrad: 5,954  
FT Grad: 0; PT Grad: 0  
Contact: Janet Fontenot, Dean, Business Division  
Email: Janet.Fontenot@swic.edu  
Phone: 618.641.5735  
Online Report: swic.edu/hlc-CQR-finalreport
Open Pathway

**Assurance Review**

**Henderson State University (Arkansas)**
Control: Public
Highest Degree: Specialist
FT Undergrad: 2,923; PT Undergrad: 303
FT Grad: 71; PT Grad: 324

Contact: Wrenette Tedder, Director of Assessment
Email: tedderw@hsu.edu
Phone: 870.230.5270
Online Report: hsu.edu/OurCampus/AboutHenderson/Accreditations.html

**Oklahoma City University**
Control: Private NFP
Highest Degree: Doctoral
FT Undergrad: 1,578; PT Undergrad: 256
FT Grad: 863; PT Grad: 375

Contact: Jo Lynn Digranes, Coordinator for Assessment
Email: jadigranes@okcu.edu
Phone: 405.208.5047

**Quality Initiative Proposal**

**University of Arkansas at Pine Bluff**
Control: Public
Highest Degree: Doctoral
FT Undergrad: 2,188; PT Undergrad: 213
FT Grad: 36; PT Grad: 76

Contact: Mary Brentley, Quality Initiative Chair
Email: brentleym@uapb.edu
Phone: 870.575.8341

**Quality Initiative Report**

**U.S. Army Command and General Staff College (Kansas)**
Control: Public
Highest Degree: Master’s
FT Undergrad: 0; PT Undergrad: 0
FT Grad: 1,685; PT Grad: 7,790

Contact: Robert Baumann, Director of Graduate Degree Programs
Email: robert.f.baumann.civ@mail.mil
Phone: 913.684.2742

Comprehensive Evaluation

**Iowa State University of Science and Technology**
Control: Public
Highest Degree: Doctoral
FT Undergrad: 27,435; PT Undergrad: 1,458
FT Grad: 3,436; PT Grad: 2,106

Contact: Karen Zunkel, Director, Undergraduate Programs and Academic Quality
Email: kzunkel@iastate.edu
Phone: 515.294.7063
Online Report: provost.iastate.edu/academic-programs/accreditation

**Marian University (Indiana)**
Control: Private NFP
Highest Degree: Doctoral
FT Undergrad: 1,710; PT Undergrad: 427
FT Grad: 355; PT Grad: 279

Contact: William Harting, Assistant Provost
Email: bharting@marian.edu
Phone: 317.955.6015

**Marshall University (West Virginia)**
Control: Public
Highest Degree: Doctoral
FT Undergrad: 8,142; PT Undergrad: 1,394
FT Grad: 1,925; PT Grad: 1,920

Contact: Gayle L. Ormiston, Senior Vice President for Academic Affairs and Provost
Email: ormiston@marshall.edu
Phone: 304.696.3716
Online Report: marshall.edu/hlccreditationreview/

**Change Visit**

**University of Wisconsin Colleges**
Control: Public
Highest Degree: Bachelor’s
FT Undergrad: 7,643; PT Undergrad: 3,771
FT Grad: 0; PT Grad: 0

Contact: Gregory P. Lampe, Provost and Vice Chancellor for Academic and Student Affairs
Email: greg.lampe@uwc.edu
Phone: 608.263.1794

**HLC Online Resources**

HLC offers sample institutional materials for multiple accreditation processes on its website:
- Action Project Directory Archive (AQIP Pathway) apdarchive.hlcommission.org
- Assurance Arguments (Standard and Open Pathways) hlcommission.org/assurance-samples
- Federal Compliance Credit Hour Worksheets hlcommission.org/federal-compliance
- Quality Initiative Proposals (Open Pathway) qi.hlcommission.org

HLC’s Collection of Papers also features specific examples of institutional experiences with evaluation, accreditation and institutional improvement. It is available at cop.hlcommission.org.

HLC Accreditation

accreditation agency – A nongovernmental body established to administer accrediting procedures.

Accreditation Liaison Officer (ALO) – An individual identified by the chief executive officer of the institution to be second in the line of communication (behind the CEO) with HLC regarding policies, practices and other accreditation matters.

accreditation, institutional – Accreditation that evaluates an entire educational institution and accredits it as a whole.

accreditation, national – A type of institutional accreditation primarily for religious colleges and universities, private trade and technical schools, private business colleges, and colleges focusing on health-related fields, as well as institutions offering programs primarily through distance delivery and home study.

accreditation, regional – A type of institutional accreditation provided by accrediting agencies recognized by the U.S. Department of Education.

accreditation, specialized (also called program accreditation) – Accreditation of units, schools or programs within a larger educational institution or for the sole program or area of concentration of an independent, specialized institution.

accredited status – Status that indicates an institution meets HLC’s Criteria for Accreditation.

AQIP Pathway – A pathway for maintaining accreditation with HLC based on the principles of continuous quality improvement. (AQIP stands for Academic Quality Improvement Program)

Assumed Practices – A set of practices shared by institutions of higher education that is unlikely to vary by institutional mission or context. Institutions must meet the Assumed Practices to obtain accreditation with HLC.

Board of Trustees – The governing body of HLC, made up of 15 to 21 representatives from HLC member institutions and the public.

Core Components – Subcategories of each Criterion for Accreditation that are reviewed in order to determine whether an institution meets each Criterion.

Criteria for Accreditation – The framework for determining an institution’s accreditation.

financial indicators – Financial data provided by the institution through the Institutional Update that allow HLC to determine if the institution is operating with integrity in its financial functions.

Higher Learning Commission (HLC) – One of six regional accreditors in the United States, HLC accredits degree-granting institutions in the North Central region, which includes 19 states.

Institutional Status and Requirements Report (ISR Report) – A resource available to an institution’s CEO or Accreditation Liaison Officer that includes the complete institutional history with HLC, information on the status of current and upcoming accreditation events, and information on the institution’s designated pathway and related events.

maintaining accreditation – An institution actively participating in HLC’s accreditation processes to ensure it meets the Criteria for Accreditation.

non-financial indicators – Data provided by institutions through the Institutional Update that help HLC determine if the institution may be at risk of not meeting components of the Criteria for Accreditation.

Obligations of Affiliation – The responsibilities that institutions affiliated with HLC are required to fulfill in order to maintain their affiliation.

Open Pathway – A pathway for maintaining accreditation with HLC that features a 10-year reaffirmation cycle where quality assurance and quality improvement are addressed separately.

Reaffirmation of Accreditation – An action by HLC’s Board of Trustees confirming an institution meets all of the requirements necessary to keep its accredited status with HLC.

staff liaison – One of HLC’s Vice Presidents for Accreditation Relations who serves as a resource for affiliated institutions.

Standard Pathway – A pathway for maintaining accreditation with HLC that features a 10-year reaffirmation cycle where quality assurance and quality improvement are integrated for comprehensive evaluations.

Statement of Accreditation Status (SAS) – A public summary of the relationship between the institution and HLC that identifies the nature of the institution, the conditions of affiliation, and the degree levels included in accreditation.

Accreditation Activities

Action Project – One of multiple, simultaneous quality improvement projects an institution in the AQIP Pathway conducts.

Action Project Update – A required report submitted by an institution in the AQIP Pathway describing the progress of one of its Action Projects.

advisory visit – In response to rapidly changing dynamics at an institution, HLC may send a team of peer reviewers to visit the institution. In collaboration with the institution, HLC determines the scope of the team’s inquiry.

AQIP Pathway Categories – The framework linked to the Criteria for Accreditation that institutions in the AQIP Pathway use to examine their internal processes and explore opportunities for improvement.

Assurance Argument – A narrative in which the institution explains how it meets HLC’s Criteria for Accreditation that is linked to documents in the Evidence File.

Assurance Filing – Created and submitted by the institution, the filing includes the Assurance Argument with embedded links to documents in the Evidence File.

Assurance Review – The peer review evaluation of the Assurance Filing.

Assurance System – An online system used by institutions to provide an Assurance Argument and evidentiary materials and used by peer reviewers to complete the Assurance Review.

comprehensive evaluation – The process used to determine whether an institution meets or continues to meet the Criteria for Accreditation. The comprehensive evaluation includes an Assurance Review or Comprehensive Quality Review, Federal Compliance review, an on-site visit, a student survey and a multi-campus visit, if necessary.

Comprehensive Quality Review (CQR) – As part of the comprehensive evaluation for institutions in the AQIP Pathway, the Comprehensive Quality Review shows how the institution meets the Criteria and includes a review of the institution’s most recent Systems Portfolio, Systems Appraisal and Quality Highlights Report.

dual credit – Courses taught to high school students for which the student receives both high school credit and college credit.

Evaluation Summary Sheet – A document created prior to each evaluation that includes contact information for the institution and peer review team members and other information pertinent to the evaluation.

Evidence File – Documents used in the Assurance Filing that support the institution’s Assurance Argument.

Federal Compliance Requirements – HLC must enforce certain requirements as part of its recognition by the U.S. Department of Education.
This includes assuring its members are meeting their Title IV program responsibilities and complying with other expectations.

**focused visit** – A team visit that occurs between comprehensive evaluations to examine specific aspects of an institution as a form of special monitoring.

**institutional update** – An online report completed annually by affiliated institutions regarding institutional health.

**interim report** – Special monitoring that occurs in between evaluations to provide updates to HLC on the institution.

**multi-campus visit** – A visit to a selection of an institution’s additional campuses that occurs as part of the comprehensive evaluation.

**multi-location visit** – Institutions with three or more off-campus additional locations undergo a visit every five years to a sampling of the institution’s additional locations.

**principles for continuous quality improvement** – The ideas on which the AQIP Pathway is premised.

**quality initiative** – A major quality improvement effort conducted by institutions between Years 5 and 9 of the Open Pathway that addresses a current concern or aspiration specific to the institution.

**quality initiative proposal** – A proposal submitted by an institution in the Open Pathway explaining the major improvement effort the institution will undertake as its Quality Initiative.

**quality initiative report** – A report submitted by an institution in the Open Pathway upon completing its Quality Initiative that reflects on accomplishments, documents achievements and strategies, and defines new priorities and challenges.

**stipulations** – Limits placed on an institution’s development of new activities or programs.

**strategy forum** – An event for institutions in the AQIP Pathway to facilitate new strategies and tactics for institutional improvements.

**student opinion survey** – An online survey conducted by HLC as part of comprehensive evaluations. The opinions and data gathered assist peer reviewers in developing questions for their meetings during the on-site visit.

**systems appraisal** – A peer review of the Systems Portfolio.

**systems appraisal feedback report** – A peer review team’s report evaluating the Systems Portfolio of an institution on the AQIP Pathway.

**systems portfolio** – A document demonstrating that an institution on the AQIP Pathway meets the Criteria for Accreditation by describing how it fulfills the related AQIP Pathway Categories.

**peers** – Members of HLC’s Peer Corps who may also serve as a member of HLC decision-making groups.

**peer reviewer** – A member of HLC’s Peer Corps Data Update System (PRDUS) – The online system used by the Peer Corps that provides peer reviewers an avenue to update contact information, view scheduled visits and update availability.

**team chair** – The lead of a peer review team who handles contacting the institution and HLC on behalf of the team.

**team report** – A report submitted by the peer review team to HLC documenting its findings and recommendation following an evaluation.

**decision making**

**action letter** – Official correspondence from HLC to the institution detailing an action taken by one of HLC’s decision-making bodies regarding that institution.

**adverse action** – An action by HLC’s Board of Trustees that withdraws or denies accreditation (except in denial of early initial accreditation where the institution continues candidate status), withdraws or denies candidacy, or moves the institution from accredited to candidate status.

**appeals body** – A group of 10 Institutional Actions Council members appointed by the Board of Trustees.

**appeals panel** – A group of five individuals selected from the Appeals Body by HLC’s President, that hears an institution’s appeal to an adverse action by the Board of Trustees.

**institutional actions council (iac)** – HLC’s decision-making body made up of experienced peer reviewers and representatives of the public.

**institutional response** – An institution’s written response to a peer review team or institutional Actions Council recommendation.

**notice** – A sanction signifying an institution is pursuing a course of action that could result in its being unable to meet one or more of the Criteria for Accreditation.

**official action** – An official HLC decision made by HLC staff, the Institutional Actions Council or HLC’s Board of Trustees.

**probation** – A sanction signifying that an institution no longer meets one or more of the Criteria for Accreditation.

**public disclosure notice** – A document HLC may post to explain to the public a particular situation at an affiliated institution.

**show-cause order** – An order by HLC’s Board of Trustees requiring an institution to show cause as to why its accredited status should not be removed.

**institutional change**

**additional location** – A place, geographically separate from any main or branch campus, where instruction takes place and students can do one or more of the following:

- Complete 50 percent or more of the courses leading to a degree program.
- Complete 50 percent or more of the courses leading to a Title IV eligible certificate.
- Complete a degree program that they began at another institution even if the degree completion program provides less than 50 percent of the courses leading to a degree program.

There is no base or threshold number of students or distance from the campus necessary for a facility to qualify as an additional location under this definition.

An additional location typically does not have a full range of administrative and student services staffed by the facility’s personnel. Such services may be provided from the main campus or another campus.

A facility may provide access to instruction requiring students to be present at a physical location that receives interactive TV, video or online teaching. It is considered an additional location when 50 percent or more of a distance delivery program is available through one or more of these modalities at that facility.

**additional location confirmation visit** – A visit to an institution’s new additional location to confirm it is operating as described in the institution’s original change request.

**campus/branch campus** – A location of an institution that is geographically apart from the main campus if the location has all four of the following attributes:

- It is permanent in nature.
- It offers courses in educational programs leading to a degree, certificate or other recognized educational credential.
- It has its own faculty and administrative or supervisory organization.
- It has its own budgetary and hiring authority.

**campus evaluation visit** – A visit to a new campus or branch after the campus has been approved by HLC and within six months of matriculation to assure the quality of the campus and its programs in meeting the needs of the institution’s constituencies and to assure the capacity to sustain that quality.

**change of control** – A transaction that affects, or may affect, corporate control, structure or governance of the accredited or candidate institution.

**change panel** – A panel of three or more peer reviewers that evaluate substantive change applications submitted by institutions.

**change visit** – An on-site visit by a peer review team in response to one or more substantive change applications submitted by institutions.

**consortial arrangement** – An arrangement in which an HLC-accredited institution develops an agreement with an institution or group of institutions—that is, the consortial party(ies) agree to provide some portion of one or more educational programs (i.e., degrees or certificates offered for academic credit) offered by the HLC-accredited institution.

**consortial arrangement screening form** – An online form used by institutions to initiate the process of adding or updating consortial arrangements.

**contractual arrangement** – An arrangement in which the institution sources some portion of its educational programs—that is, degrees or certificates offered for academic credit (including instruction, oversight of the curriculum, assurance of the consistency in the level and quality of instruction and in expectations of student performance and the establishment of the academic qualifications for instructional personnel)—to:

1. An unaccredited institution.
Eligibility and Candidacy

candidacy – Preaccreditation status offering affiliation, not membership, with HLC.

Candidate for Accreditation – An institution with the preaccredited candidacy status that has met HLC’s eligibility requirements and shows evidence that it is making progress toward meeting all the Criteria for Accreditation.

Candidacy Program – The steps an institution must take to gain candidacy with HLC.