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HLC’s 2016 Annual Conference: Beyond the Horizon – April 15 - 19, 2016

HLC’s Resource Guide will be published each year in time for the Annual Conference. The next issue will be published in April 2016. For up-to-date information from HLC, visit hlcommission.org.
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, the 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.

Guiding Values

The HLC’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 each institution to produce evidence that it does so.

Many of HLC’s 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 a 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, HLC regards the teaching mission of any institution as primary. Institutions will have other missions, such as research, healthcare, 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 co-curricular offerings; the effectiveness of their programs; 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; 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 to currency and sufficiency of the curriculum, expectations for student performance, qualifications of the instructional staff, and adequacy of resources for instructional support.

### 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 for Accreditation. 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.

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.

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. The current version of the Criteria for Accreditation and the Assumed Practices can be found at hlcommission.org/criteria.

The Criteria for Accreditation are as follows:

Criterion One. Mission
The institution’s mission is clear and articulated publicly; it guides the institution’s operations.

Core Components

1A. 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.)

1B. 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 Two. 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 Three. 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. Co-curricular programs are suited to the institution’s mission and contribute to the educational experience of its students.

2. The institution demonstrates any claims it makes about contributions to its students’ educational experience by virtue of aspects of its mission, such as research, community engagement, service learning, religious or spiritual purpose, and economic development.

Criterion Four. Teaching and Learning: Evaluation and Improvement

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

4.A. The institution demonstrates responsibility for the quality of its educational programs.

1. The institution maintains a practice of regular program reviews.

2. The institution evaluates all the credit that it transcripts, including what it awards for experiential learning or other forms of prior learning, or relies on the evaluation of responsible third parties.

3. The institution has policies that assure the quality of the credit it accepts in transfer.

4. The institution maintains and exercises authority over the prerequisites for courses, rigor of courses, expectations for student learning, access to learning resources, and faculty qualifications for all its programs, including dual credit programs. It assures that its dual credit courses or programs for high school students are equivalent in learning outcomes and levels of achievement to its higher education curriculum.

5. The institution maintains specialized accreditation for its programs as appropriate to its educational purposes.

6. The institution evaluates the success of its graduates. The institution assures that the degree or certificate programs it represents as preparation for advanced study or employment accomplish these purposes. For all programs, the institution looks to indicators it deems appropriate to its mission, such as employment rates, admission rates to advanced degree programs, and participation rates in fellowships, internships, and special programs (e.g., Peace Corps and Americorps).

4.B. The institution demonstrates a commitment to educational achievement and improvement through ongoing assessment of student learning.

1. The institution has clearly stated goals for student learning and effective processes for assessment of student learning and achievement of learning goals.

2. The institution assesses achievement of the learning outcomes that it claims for its curricular and co-curricular programs.

3. The institution uses the information gained from assessment to improve student learning.

4. The institution’s processes and methodologies to assess student learning reflect good practice, including the substantial participation of faculty and other instructional staff members.

4.C. The institution demonstrates a commitment to educational improvement through ongoing attention to retention, persistence, and completion rates in its degree and certificate programs.

1. The institution has defined goals for student retention, persistence, and completion that are ambitious but attainable and appropriate to its mission, student populations, and educational offerings.

2. The institution collects and analyzes information on student retention, persistence, and completion of its programs.

3. The institution uses information on student retention, persistence, and completion of programs to make improvements as warranted by the data.

4. The institution’s processes and methodologies for collecting and analyzing information on student retention, persistence, and completion of programs reflect good practice. (Institutions are not required to use IPEDS definitions in their determination of persistence or completion rates. Institutions are encouraged to choose measures that are suitable to their student populations, but institutions are accountable for the validity of their measures.)

Criterion Five. 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.

ASSUMED PRACTICES

The Assumed Practices below include changes that will be considered on Second Reading by the Board in June 2015. 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).

The Assumed Practices are as follows:

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.

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

10. The institution documents outsourcing of all services in written agreements, including agreements with parent or affiliated organizations.

11. The institution takes responsibility for the ethical and responsible behavior of its contractual partners in relation to actions taken on its behalf.

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

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

1. Programs, Courses, and Credits

a. The institution conforms to commonly accepted minimum program length: 60 semester credits for associate’s degrees, 120 semester credits for bachelor’s degrees, and 30 semester credits beyond the bachelor’s for master’s degrees. Any variation from these minima must be explained and justified.

b. The institution maintains structures or practices that ensure the coherence and quality of the programs for which it awards a degree. Typically
institutions will require that at minimum 30 of the 120 credits earned for the bachelor’s degree and 15 of the 60 credits for the associate’s degree be credits earned at the institution itself, through arrangements with other accredited institutions, or through contractual relationships approved by HLC. Any variation from the typical minima must be explained and justified.

c. The institution’s policy and practice assure that at least 50% of courses applied to a graduate program are courses designed for graduate work, rather than undergraduate courses credited toward a graduate degree. (Cf. Criterion 3.A.1 and 2.) (An institution may allow well-prepared advanced students to substitute its graduate courses for required or elective courses in an undergraduate degree program and then subsequently count those same courses as fulfilling graduate requirements in a related graduate program that the institution offers. In “4+1” or “2+3” programs, at least 50% of the credits allocated for the master’s degree – usually 15 of 30 – must be for courses designed for graduate work.)

d. The institution adheres to policies on student academic load per term that reflect reasonable expectations for successful learning and course completion.

e. Courses that carry academic credit toward college-level credentials have content and rigor appropriate to higher education.

f. The institution has a process for ensuring that all courses transferred and applied toward degree requirements demonstrate equivalence with its own courses required for that degree or are of equivalent rigor.

g. The institution has a clear policy on the maximum allowable credit for prior learning as a reasonable proportion of the credits required to complete the student’s program. Credit awarded for prior learning is documented, evaluated, and appropriate for the level of degree awarded. (Note that this requirement does not apply to courses transferred from other institutions.)

h. The institution maintains a minimum requirement for general education for all of its undergraduate programs whether through a traditional practice of distributed curricula (15 semester credits for AAS degrees, 24 for AS or AA degrees, and 30 for bachelor’s degrees) or through integrated, embedded, interdisciplinary, or other accepted models that demonstrate a minimum requirement equivalent to the distributed model. Any variation is explained and justified.

2. Faculty Roles and Qualifications

a. Qualified faculty are identified primarily by credentials, but other factors may be considered in addition to the degrees earned. Instructors (excluding for this requirement teaching assistants enrolled in a graduate program and supervised by faculty) possess an academic degree relevant to what they are teaching and at least one level above the level at which they teach, except in programs for terminal degrees or when equivalent experience is established. In terminal degree programs, faculty members possess the same level of degree. When faculty members are employed based on equivalent experience, the institution defines a minimum threshold of experience and an evaluation process that is used in the appointment process. Faculty teaching general education courses, or other courses that transfer, typically hold a master’s degree or higher in the discipline or subfield. If a faculty member holds a master’s degree or higher in a discipline or subfield other than that in which he or she is teaching, that faculty member should have completed a minimum of 18 graduate credit hours in the discipline or subfield in which they teach.

b. Instructors teaching in graduate programs should hold the terminal degree determined by the discipline or have a record of research scholarship or achievement appropriate for the graduate program.

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

d. Faculty participate substantially in:

a. oversight of the curriculum—its development and implementation, academic substance, currency, and relevance for internal and external constituencies;

b. assurance of consistency in the level and quality of instruction and in the expectations of student performance;

c. establishment of the academic qualifications for instructional personnel;
d. analysis of data and appropriate action on assessment of student learning and program completion.

3. Support Services
   a. Financial aid advising clearly and comprehensively reviews students’ eligibility for financial assistance and assists students in a full understanding of their debt and its consequences.
   b. The institution maintains timely and accurate transcript and records services.

C. Teaching and Learning: Evaluation and Improvement

1. Instructors (excluding for this requirement teaching assistants enrolled in a graduate program and supervised by faculty) have the authority for the assignment of grades. (This requirement allows for collective responsibility, as when a faculty committee has the authority to override a grade on appeal.)

2. The institution refrains from the transcription of credit from other institutions or providers that it will not apply to its own programs.

3. The institution has formal and current written agreements for managing any internships and clinical placements included in its programs.

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.¹

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.)

¹Institutions under federal control are exempted provided that they have other reliable information to document the institution’s fiscal resources and management.
HLC has three pathways for reaffirmation of accreditation: Standard, AQIP and Open. Eligible institutions may choose to change pathways only upon completion of an institution’s current cycle, which is after reaffirmation of accreditation in Year 10 of the Standard and Open Pathway and Year 8 in the AQIP Pathway.

Institutions may be able to choose between the three pathways, or may be limited to the Standard Pathway. HLC determines such limitation based upon the institution’s present condition and past relationship with the HLC. An institution may be limited to the Standard Pathway if it meets one or more of the following conditions at the time of determination:

• 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.

More information on the Standard, AQIP and Open Pathways is available at hlcommission.org/pathways.

STANDARD PATHWAY

In the Standard Pathway, both quality assurance and quality improvement are integrated into comprehensive evaluations. Institutions in the Standard Pathway also address quality assurance and improvement through interim monitoring as required.

The institution addresses both assurance and improvement requirements in the Assurance Argument and Evidence File. Peer reviewers evaluate the progress the institution has made in addressing issues identified in previous evaluations as needing improvement. Institutions without previously identified improvement requirements will be allowed to identify and work on projects of their choosing.

Comprehensive evaluations are conducted twice in the Standard Pathway, once in Year 4 and again in Year 10. The comprehensive evaluation includes the Assurance Review, a review of federal compliance requirements, a multi-campus review if applicable, and an on-site visit. The Year 10 comprehensive evaluation results in a determination regarding reaffirmation of accreditation. Except in circumstances involving institutions following Initial Accreditation, approval of change of control, or removal of probation, most Year 4 reviews do not include such a determination, but instead determine if follow-up monitoring is necessary.

All institutions eligible to choose a pathway may participate in the Standard Pathway.
**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. Institutions that have already transitioned to the Standard Pathway may have modified timelines to accommodate the transition. 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</td>
<td>Submit interim reports and undergo visits if required</td>
<td>Review interim reports and conduct visits if required</td>
</tr>
<tr>
<td>Year 2</td>
<td>Submit Comprehensive Evaluation Materials</td>
<td>Submit interim reports and undergo visits if required</td>
<td>Conduct Comprehensive Evaluation (with visit)</td>
</tr>
<tr>
<td>Year 3</td>
<td>Institution may contribute documents to Evidence File</td>
<td>Submit interim reports and undergo visits if required</td>
<td>Conduct Comprehensive Evaluation (with visit)</td>
</tr>
<tr>
<td>Year 4</td>
<td>Submit Comprehensive Evaluation Materials</td>
<td>Submit interim reports and undergo visits if required</td>
<td>Conduct Comprehensive Evaluation (with visit)</td>
</tr>
<tr>
<td>Year 5</td>
<td>Institution may contribute documents to Evidence File</td>
<td>Submit interim reports and undergo visits if required</td>
<td>Conduct Comprehensive Evaluation (with visit)</td>
</tr>
<tr>
<td>Year 6</td>
<td>Submit Comprehensive Evaluation Materials</td>
<td>Submit interim reports and undergo visits if required</td>
<td>Conduct Comprehensive Evaluation (with visit)</td>
</tr>
<tr>
<td>Year 7</td>
<td>Submit Comprehensive Evaluation Materials</td>
<td>Submit interim reports and undergo visits if required</td>
<td>Conduct Comprehensive Evaluation (with visit)</td>
</tr>
<tr>
<td>Year 8</td>
<td>Submit Comprehensive Evaluation Materials</td>
<td>Submit interim reports and undergo visits if required</td>
<td>Conduct Comprehensive Evaluation (with visit)</td>
</tr>
<tr>
<td>Year 9</td>
<td>Submit Comprehensive Evaluation Materials</td>
<td>Submit interim reports and undergo visits if required</td>
<td>Conduct Comprehensive Evaluation (with visit)</td>
</tr>
<tr>
<td>Year 10</td>
<td>Submit Comprehensive Evaluation Materials</td>
<td>Submit interim reports and undergo visits if required</td>
<td>Conduct Comprehensive Evaluation (with visit)</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.

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 Eight-Year Cycle

Current AQIP Pathway institutions have been provided with a unique chart mapping their transition to the eight-year cycle. If you have questions about an institution’s transition, 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>New AQIP Institutions: First-Year Mentoring</td>
<td>Attend one Strategy Forum&lt;sup&gt;3.1&lt;/sup&gt;</td>
<td>Annual Actions Projects Update&lt;sup&gt;2.1&lt;/sup&gt;</td>
</tr>
<tr>
<td>Year 2</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Year 3</td>
<td>Submit Systems Portfolio&lt;sup&gt;4.1&lt;/sup&gt;</td>
<td>Conduct Systems Appraisal&lt;sup&gt;4.1&lt;/sup&gt;</td>
<td></td>
</tr>
<tr>
<td>Year 4</td>
<td>Possible Comprehensive Quality Review&lt;sup&gt;5.1&lt;/sup&gt;</td>
<td>Conduct possible Comprehensive Quality Review&lt;sup&gt;5.1&lt;/sup&gt; (with visit)</td>
<td></td>
</tr>
<tr>
<td>Year 5</td>
<td>Attend one Strategy Forum&lt;sup&gt;3.2&lt;/sup&gt;</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Year 6</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Year 7</td>
<td>Submit Systems Portfolio&lt;sup&gt;4.2&lt;/sup&gt;</td>
<td>Conduct Systems Appraisal&lt;sup&gt;4.2&lt;/sup&gt;</td>
<td></td>
</tr>
<tr>
<td>Year 8</td>
<td>Submit Comprehensive Quality Review&lt;sup&gt;5.2&lt;/sup&gt;</td>
<td>Conduct Comprehensive Quality Review&lt;sup&gt;5.2&lt;/sup&gt; (with visit)</td>
<td></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. Action Projects Update and Action Projects Review

2.1. AQIP institutions will continue to maintain at least three Action Projects during each year of the 8-Year Cycle. The institutions will submit an Action Projects Update three times annually and will receive response comments subsequent to these filings through the Action Projects Review.

3. Strategy Forum

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

3.2. The second Strategy Forum in the AQIP cycle will be Chicago-based and may be completed in either Year 5 or Year 6.

4. Systems Portfolio and Systems Appraisal

4.1. The Systems Portfolio will provide evidence on how the institution plans, implements, reports, and utilizes data for the AQIP Categories. This Systems Portfolio will focus on the AQIP Categories and will also include evidence related to the Criteria for Accreditation for purposes of a “soft review” of the Criteria and Core Components during the Systems Appraisal.

**COLOR KEY**

- Required institutional activities
- Possible required institutional activities
- HLC decision-making actions
- Peer Review activities
- Possible Peer Review activities and HLC actions
**AQIP Pathway**

The Academic Quality Improvement Program (AQIP) Pathway is designed to assist institutions in achieving sustainable quality improvement while reaffirming the institution’s accredited status once every eight-year cycle.

All institutions eligible to choose a pathway may participate in the AQIP Pathway.

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. In 2015, there will also be new technology for posting Action Projects and more details about the new Comprehensive Quality Review. In fall 2016, HLC anticipates making the Assurance System available to AQIP institutions.

**Action Projects**

As part of the AQIP Pathway, institutions conduct multiple and simultaneous improvement projects that the institution believes has the most impact on quality improvement. These Action Projects are identified, designed, and initiated by each institution to suit its needs. Institutions conduct at least three action projects on an annual basis; one Action Project is always to be focused on student learning.

**Systems Portfolios and Systems Appraisals**

In Year 3 and Year 7, the institution submits a Systems Portfolio that amasses evidence in response to the six 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 the 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 the Comprehensive Quality Review in Year 8.

**Strategy Forums**

Institutions in 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 institutions to review the feedback gained either through the Systems Appraisal reports or upon reaffirmation of accreditation to develop strategies for further progress in its quality improvement efforts. At least one Action Project submission emerges from the Strategy Forum along with the groundwork for several more.

**Comprehensive Quality Review**

In Year 8, the institution hosts an on-site Comprehensive Quality Review visit, which includes the third-party comment process. 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. The peer reviewers also determine whether the institution has satisfied Federal Compliance requirements, conduct a multi-campus review if applicable, and perform the final evaluation to ensure that the Criteria for Accreditation are met.

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.

The Comprehensive Quality Review visits are replacing the Quality Checkup Visits beginning in Academic Year 2015-16.

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 for more information.

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4.2. The Systems Portfolio will provide matured evidence on how the institution plans, implements, reports, and utilizes data for the AQIP Categories. The Appraisal will verify continuing improvements in relation to the AQIP Categories and will also provide an intensive screening of the Criteria for Accreditation and the Core Components. This screening occurs a year prior to the Comprehensive Quality Review in Year 8.

5. Comprehensive Quality Review (Note: Comprehensive Quality Review is a visit and replaces the Quality Checkup Visit)

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

5.2. The Comprehensive Quality Review visit team will engage the institution in discussions about its Action Projects, initiatives featured in the Systems Portfolio, and strategies designed through the Strategy Forums. 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. This visit may handle, as appropriate, a review of multi-campus and distance education, as well as federal compliance documentation.

6. Reaffirmation of Accreditation

6.1. The final report of the Comprehensive Quality Review visit team and the documentation that informs that report (e.g., past Systems Portfolios and Appraisals, Action Projects Update/Action Projects Review information, federal compliance documentation, etc.) will serve as the basis for reaffirming the institution’s accreditation through the Institutional Actions Council (IAC). The new, eight-year cycle eliminates the need for the Reaffirmation Panel.
Open Pathway

The Open Pathway is unique in that its improvement component gives institutions the independence to pursue improvement projects that are geared toward their current needs and aspirations.

The Open Pathway follows a 10-year cycle. In Year 4, institutions complete Assurance Reviews to ensure they are continuing to meet the Criteria for Accreditation. 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.

Between Years 5 and 9, institutions on the Open Pathway undertake a Quality Initiative Project designed by the institution to meet its current needs or aspirations. 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. This recommendation is included along with the results of the comprehensive evaluation in order to determine the institution’s continued eligibility to choose its pathway.

In Year 10, institutions in 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 multi-campus review if applicable, and an on-site visit.

All institutions eligible to choose a pathway may participate in the Open Pathway.

Pathways updates in 2014 – 2015

AQIP Pathway Updates. The review of the AQIP Pathway was completed in June 2014 with the HLC Board of Trustees approving the policy changes related to the AQIP Pathway. Several policy changes were required to provide authorization for the most significant aspects of the changes to the AQIP Pathway, particularly the eight-year accreditation cycle and the on-site Comprehensive Quality Review. The policy changes also include numerous minor amendments to update other policies that reference key AQIP Pathway events and expectations.

Quality Initiative Proposal Samples. HLC has selected a number of Quality Initiative Proposals as samples for institutions in the Open Pathway that are currently planning or working on their own proposals. 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. To review the samples, visit qi.hlcommission.org.

Coming Soon: Additional Online Information. The HLC website is continually updated to reflect changes in processes and to include new information. Coming Soon: Detailed information on the Standard, AQIP and Open Pathways and their components will be added in an easy-to-navigate format.
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. Institutions that have already transitioned to the Open Pathway may have modified timelines to accommodate the transition. 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-Making¹</th>
</tr>
</thead>
<tbody>
<tr>
<td>Year 1</td>
<td>Institution may contribute documents to Evidence File</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Year 2</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Year 3</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Year 4</td>
<td>Submit Assurance Filing (Assurance Argument and Evidence File)</td>
<td>Conduct Assurance Review (no visit)²</td>
<td>Acceptance of Assurance Review³</td>
</tr>
<tr>
<td>Year 5</td>
<td>Institution may contribute documents to Evidence File</td>
<td>Period to submit Quality Initiative Proposal</td>
<td>Review Quality Initiative Proposal</td>
</tr>
<tr>
<td>Year 6</td>
<td>Period to submit Quality Initiative Proposal</td>
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<tr>
<td>Year 7</td>
<td>Period to submit Quality Initiative Report</td>
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<tr>
<td>Year 8</td>
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<tr>
<td>Year 9</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Year 10</td>
<td>Submit Comprehensive Evaluation Materials⁴</td>
<td>Conduct Comprehensive Evaluation (with visit)</td>
<td>Action on Comprehensive Evaluation and Reaffirmation of Accreditation⁵</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.
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
**Top 5 Questions regarding the Assurance System**

HLC’s Assurance System is a web-based technology that institutions in 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.

The following are 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/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/Pathways/assurance-system-training.html](http://hlcommission.org/Pathways/assurance-system-training.html).

**Q.** What type of 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.

The Evidence File also allows six specific URLs to be provided by the institution – course catalog; faculty, staff, and student handbooks; class schedules; and faculty roster. URLs of other pages are not permitted and are blocked by the system.

**Q.** Is there a word limit for the Assurance Argument?

**A:** The Assurance Argument is limited to 35,000 words for institutions in the Open Pathway, and 40,000 words for institutions in the Standard Pathway (the 5,000 extra is so institutions in the Standard Pathway can articulate how they are improving in various areas related to the Criteria).

**Q.** Can information that has been deleted from the Assurance Argument be recovered?

**A:** Because up to 15 people at an institution might be contributing to the Assurance Argument, the System has a robust version tracking system so that anything accidentally deleted can be retrieved easily.
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.

Changes to the Dues and Fees Schedule

As announced previously, HLC will implement a change to the dues structure for the 2015-16 fiscal year. HLC considered a number of approaches to the financial needs of the new Pathways model and determined, after consultation with institutional CFOs and others, that a more evenly distributed financial structure was needed.

Under the new structure, most of the costs now covered by the evaluation fees will be included in the annual dues, thereby distributing the cost of maintaining accreditation more evenly over the eight- or 10-year reaffirmation period, rather than the periodic spikes that occur in the current system.

In the Standard and Open Pathways, base fees for comprehensive visits will be removed and no base fees will be assessed for Assurance Reviews or for Quality Initiatives. In the AQIP Pathway, fees that will be removed include base fees for Quality Checkup Visits, Annual Updates, and reaffirmations for institutions (there will still be an adjusted base fee for System Appraisals and Strategy Forums). Fees that will continue in all Pathways include separate fees for direct expenses related to each of these activities, in particular travel, lodging, meals, and honoraria for peer review team members.

This change will not increase HLC’s revenue; rather it is a different way of collecting the same revenue. Fees for other types of processes, such as institutional changes, will not be affected by this new structure.

Invoices for dues are sent to member institutions in July of each year, following Board action to approve changes to the dues and fees.

Student Opinion Survey

In 2014, HLC began implementing a student opinion survey to gather information about student experience. HLC provides institutions hosting comprehensive evaluations and Comprehensive Quality Reviews with a survey link to send to their student bodies shortly before these reviews. The results assist peer reviewers in identifying possible questions for meetings with faculty, staff and students during the visit.

More information on the student opinion survey is available at hlcommission.org/Pathways/student-survey.html.

Third-Party Comment

HLC seeks public comment about institutions as part of comprehensive evaluations and Comprehensive Quality Reviews. 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/HLC-Institutions/third-party-comment.html.

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 direct viewers to the institution’s Statement of Affiliation Status on HLC’s website when clicked upon.
Use of HLC Logos/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 use to identify their affiliation status with HLC.

Publication of Actions and Accredited Status

When an institution reports an HLC action regarding reaffirmed accreditation, it may simply state that accredited status has been continued. If it wishes to disclose additional details, such as the scheduled year of the next comprehensive evaluation, it should also disclose the 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. With the move to the new Pathways model for reaffirmation of accreditation, all institutions in the Standard and Open Pathways will be on a 10-year cycle with an Assurance Review or comprehensive evaluation in Year 4.

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.

The affiliated institution must use one of these statements when it refers to its status with HLC in catalogs, advertisements, brochures, and other publications. An institution that is unaffiliated should make no reference to affiliation with HLC until HLC has granted accredited status or candidate status.

Should an affiliated institution be under a sanction by HLC, the specific policies on that sanction dictate when and how it must be disclosed whenever the institution makes reference to its HLC status. 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’s Obligations of Affiliation also require that institutions display HLC’s Mark of Affiliation on their website. HLC urges the careful placement of this information so as not to confuse the public about how to contact HLC as contrasted with where to obtain information from the institution itself.

Public Disclosure Notices/Public Statements

The Board of Trustees issues a public disclosure notice regarding a sanction or an adverse action taken on the 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. In other situations, HLC staff may collaborate with an institution to develop a public disclosure notice that will serve the needs of both the institution and HLC. The notice includes the institution’s historical relationship with HLC, a brief analysis of the situation that prompted the notice, and an explanation of any pending or final HLC processes and decisions. The notice is available to the public on request.

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 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. 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
- academies@hlcommission.org
- annualconference@hlcommission.org

Be sure that the institution’s HLC staff liaison email address is also whitelisted. Their 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
- Clock or Credit Hours
- Certificate Programs
- Length of Term Affecting Allocation of Credit
- Direct Assessment Competency-based Programs
- 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 the HLC requirements for each.

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.

UPDATES TO SUBSTANTIVE CHANGE IN 2014

New Distance Education Approval Process. In February 2014 the HLC Board of Trustees approved changes to the Institutional Change policy, number INST.F.20.040, to simplify the approval of distance education programs. HLC now requires prior approval of the first online course and then the first two academic programs, whether degree or certificate programs, offered by an institution through distance education. The institution may then offer any of its degree and certificate programs through distance education. Regular review of distance education offerings is included in the comprehensive evaluations. If an academic program is new to the institution, it may require HLC approval before it can be offered.

Elimination of Expedited Desk Review. To simplify the process of opening and closing additional locations, the Board of Trustees also approved in February 2014 a policy eliminating the Expedited Desk Review program. Institutions that frequently open and close additional locations will now, after applying and approved to do so, utilize the Notification Program for Additional Locations. Institutions with a limited history of oversight of additional locations will file an application for prior approval of each new additional location.

New Location and Campus Update System. All institutions are now able to access the Location and Campus Update System. Accreditation Liaison Officers have access to the system and may use it to update existing locations and branch campuses. Institutions in the Notification Program for Additional Locations also use this system to add additional locations.

New Contractual Arrangement Screening Form. The contractual arrangement screening form has been streamlined so that institutions can more easily notify HLC of new or updated contractual arrangements. After submitting the form, institutions will receive an automated message detailing the next required steps. If HLC approval is not required, the institution will have satisfied their obligation to notify HLC of the arrangement simply by completing the form.
information on contractual arrangements, along with a link to the screening form, can be found at hlcommission.org/Monitoring/contractual-arrangements.html.

**New Consortial Arrangement Screening Form.** A new online screening form has been developed for consortial arrangements. Institutions wishing to add or update a consortial arrangement will initiate the process by completing the online screening form. If the arrangement doesn’t require formal approval, the institution will have satisfied its obligation to notify HLC of the arrangement by simply completing the screening form. More information on consortial arrangements and the online screening form can be found at hlcommission.org/Monitoring/consortial-arrangements.html.
New locations for institutions are established through HLC’s Institutional 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 VISITS**

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.

Visit [hlcommission.org/change](http://hlcommission.org/change) for more information.
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
The Institutional Update includes financial data, which is reviewed through HLC’s Financial Indicator Process.

HLC reviews accredited and candidate institutions’ financial information 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 also reviews non-financial indicators as part of the Institutional Update. HLC reviews non-financial data 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.

1. Enrollment Changes
2. Degrees Awarded
3. Full-time Faculty Changes
4. Student Default Rates
5. Minimal Full-time Faculty
6. Student to Teacher Ratio
7. Weak Graduation/Persistence Rates Compared to Peers

For more information on the Institutional Update, financial indicators and non-financial indicators, visit hlcommission.org/Monitoring/institutional-update.html.
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 accreditation 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.

HLC Federal Compliance Program follows a three-step process:

First, institutions must address the federal requirements in the materials they submit to HLC before a visit. “Federal Compliance Filing by Institutions” provides guidance to institutions in addressing these requirements and is available on HLC’s website. Applying institutions and member institutions address the Federal Compliance requirements as part of materials prepared for comprehensive evaluation visits. AQIP Pathway institutions address the requirements in the materials prepared for Comprehensive Quality Reviews.

Institutions participating in the Open or Standard Pathway can upload information relevant to Federal Compliance Requirements to the Assurance System once they gain access to that system. Institutions participating in the Open Pathway must demonstrate that they meet the Federal Compliance Requirements during the Year 10 comprehensive evaluation. Institutions participating in the Standard Pathway must demonstrate that they meet the Federal Compliance Requirements in the Year 4 and Year 10 comprehensive evaluations.

Second, HLC expects that institutions make additional supporting information available with the filing. 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.”

In 2014 – 2015, HLC began transitioning the Federal Compliance Review to a panel of peer reviewers. Through this method, panelists review the institution’s Federal Compliance materials in advance of the regular review and refer any issues to the on-ground team for further exploration and confirmation. In some cases at its discretion, HLC does not assign a Federal Compliance Panel and instead asks that the on-ground team conduct the Federal Compliance Review as part of its work.

More information is available on at hlcommission.org/Policies/federal-compliance-program.html.
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 the HLC’s conflict of interest policies.

HLC’s three decision-making bodies are the Institutional Actions Council, 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.

Decision-making Bodies

The Institutional Actions Council has the authority to act on cases of reaffirmation of accreditation, including Pathway placement, and substantive change cases. Some cases heard by the Institutional Actions Council require Board action. In these instances the Institutional Actions Council submits a recommendation to the Board for consideration. The Board may either adopt the recommendation of the Institutional Actions Council 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 Institutional Actions Council 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, certain cases go to a hearing rather than a meeting. Representatives from both the institution and peer review team, along with a committee of Institutional Actions Council members, are physically present at these hearings.

A committee of Institutional Actions Council 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 Institutional Actions Council 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.

The action taken by the Institutional Actions Council is considered final action unless the case requires review by the Board of Trustees. If the case requires action by the Board, the Institutional Actions Council 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 Institutional Actions Council 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 Institutional Actions Council 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 towards meeting the Criteria for Accreditation (called a Biennial Visit), 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 in the Open Pathway.

Peer reviewers also conduct focused visits, 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 (AQIP reviewers begin this component in 2016), evaluation techniques, forms and templates used during visits and paper evaluations, the Systems Appraisal process (if an AQIP reviewer) 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**

To apply to HLC’s Peer Corps:

1. Read the Peer Corps Member Position Description (available at hlcommission.org/Peer-Review/peer-reviewer-application.html).
2. Prepare the following materials:
   - Letter of Application, 600 words maximum, describing relevant experience to the role of peer reviewer as described. Note any prior experience with institutional evaluation and assessment, team leadership, facilitation skills, financial oversight, or other skills relevant to successful service as a peer reviewer.
   - CV or resume.
   - Provide the names, titles, and contact information for two professional references. At least one of these references must be from someone at the applicant’s current institution.
3. Submit all materials as a PDF in a single email to: peerreview@hlcommission.org. Address correspondence to Jamie Stanesa, Ph.D., AVP and Director of the Peer Corps, at the Higher Learning Commission.

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

HLC has developed the following guidelines to assist institutions and peer reviewers in determining whether an institution is meeting the Criteria for Accreditation.

The guidelines can be found at hlccommission.org/Criteria-Eligibility-and-Candidacy/criteria-and-core-components.html.

Determining Qualified Faculty: Guidelines for Institutions and Peer Reviewers

Determining Qualified Faculty 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.

Dual Credit Guidelines for Institutions and Peer Reviewers

Dual Credit Guidelines 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 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: Considerations of Readiness

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 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 School of Record Guidelines highlight the Criteria and Assumed Practices relevant for these institutions.
All member institutions may apply to participate in HLC’s Academies to develop strategies to advance the assessment of student learning or improve student persistence and completion.

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 who provides regular advice and critique. Mentors also attend each Academy event to assist institutional teams in developing and implementing projects that lead to the achievement of each institution’s goals.

**THE 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. Participating institutions will develop a process to regularly test and document effective practices in assessing and improving student learning.

**THE PERSISTENCE AND COMPLETION ACADEMY**

The Persistence and Completion Academy has been developed for institutions with an interest in identifying patterns and developing strategies related to 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 the best ways to achieve those goals.

The Persistence and Completion 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 in the area.

**APPLYING TO THE ACADEMIES**

For more information about the Academies, including applications and timelines, visit hlcommission.org/academies.
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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 models of how to conduct the accreditation process. HLC thanks the institutional representatives for their willingness to be listed in this resource. Institutions marked with an asterisk (*) will have representatives in attendance at the Accreditation Share Fair at HLC’s 2015 Annual Conference on March 29.

**INSTITUTIONAL EXAMPLES**

- **Kaplan University***
  1801 E. Kimberly Rd., Suite 1
  Davenport, IA 52807
  Control: Private FP; Highest Degree: Doctoral
  FT Undergrad: 5,625; PT Undergrad: 36,325
  FT Grad: 0; PT Grad: 0
  Contact: Ellen Falduto, Chief Information & Planning
  Phone: 330.263.2230
  Email: tfalduto@kaplan.edu

- **Butler County Community College**
  901 S. Haverhill Rd.
  El Dorado, KS 67042
  Control: Public; Highest Degree: Associate’s
  FT Undergrad: 2,077; PT Undergrad: 39
  FT Grad: 0; PT Grad: 0
  Contact: Joan Hawthorne, Director of Assessment
  Phone: 701.777.4684
  Email: joan.hawthorne@bsu.edu

- **Ball State University**
  264 Centennial Drive, Stop 8193
  Muncie, IN 47306
  Control: Public; Highest Degree: Doctoral
  FT Undergrad: 5,625; PT Undergrad: 611
  FT Grad: 0; PT Grad: 783
  Contact: Marilyn M. Buck, Associate Provost and Dean, University College
  Phone: 765.285.3716
  Email: mbuck@bsu.edu

- **Yavapai College***
  1100 E. Sheldon
  Prescott, AZ 86301
  Control: Public; Highest Degree: Associate’s
  FT Undergrad: 4,111; PT Undergrad: 5,031
  FT Grad: 0; PT Grad: 0
  Contact: Gene George, Associate VP, research and effectiveness
  Phone: 928.776.2205
  Email: gggeorge@butlercc.edu

- **Otterbein University***
  1 South Grove Street
  Westerville, OH 43081
  Control: Private NFP; Highest Degree: Doctoral
  FT Undergrad: 2,206; PT Undergrad: 273
  FT Grad: 0; PT Grad: 0
  Contact: Wendy Sherman Heckler, Associate Vice President for Academic Affairs, ALO
  Phone: 614.821.3395
  Email: wsherrmheckler@otterbein.edu

- **State Technical College of Missouri***
  1100 E. Market Ave.
  Searcy, AR 72149
  Control: Public; Highest Degree: Associate’s
  FT Undergrad: 4,111; PT Undergrad: 5,031
  FT Grad: 0; PT Grad: 0
  Contact: Viki Schwinke, Dean of Academic and Student Affairs
  Phone: 970.491.6614
  Email: jgenandt@neosho.edu

- **Yavapai College***
  901 S. Haverhill Rd.
  El Dorado, KS 67042
  Control: Public; Highest Degree: Associate’s
  FT Undergrad: 2,077; PT Undergrad: 39
  FT Grad: 0; PT Grad: 0
  Contact: Ellen Falduto, Chief Information & Planning
  Phone: 330.263.2230
  Email: tfalduto@wooster.edu

**COMPREHENSIVE EVALUATION**

- **Ball State University***
  1 South Grove Street
  Westerville, OH 43081
  Control: Public; Highest Degree: Doctoral
  FT Undergrad: 9,385; PT Undergrad: 2,339
  FT Grad: 0; PT Grad: 0
  Contact: James D. Genandt, Vice President for Student Learning
  Phone: 620.432.0302
  Email: jgenandt@neosho.edu

- **Neosho County Community College**
  1100 E. Sheldon
  Prescott, AZ 86301
  Control: Public; Highest Degree: Associate’s
  FT Undergrad: 2,077; PT Undergrad: 39
  FT Grad: 0; PT Grad: 0
  Contact: Ellen Falduto, Chief Information & Planning
  Phone: 330.263.2230
  Email: efalduto@wooster.edu

- **Otterbein University***
  915 E. Market Ave.
  Searcy, AR 72149
  Control: Public; Highest Degree: Associate’s
  FT Undergrad: 4,111; PT Undergrad: 5,031
  FT Grad: 0; PT Grad: 0
  Contact: Gene George, Associate VP, research and effectiveness
  Phone: 928.776.2205
  Email: gggeorge@butlercc.edu

- **Harding University***
  915 E. Market Ave.
  Searcy, AR 72149
  Control: Private NFP; Highest Degree: Doctoral
  FT Undergrad: 4,111; PT Undergrad: 5,031
  FT Grad: 0; PT Grad: 0
  Contact: Gene George, Associate VP, research and effectiveness
  Phone: 316.322.3338
  Email: jgenandt@neosho.edu

- **Kansas City University of Medicine and Biosciences**
  175 Independence Avenue
  Kansas City, MO 64106-1453
  Control: Private NFP; Highest Degree: Doctoral
  FT Undergrad: 0; PT Undergrad: 0
  FT Grad: 1,033; PT Grad: 1
  Contact: Adrian Clark, Associate Provost for Institutional Effectiveness, Accreditation and Inclusion
  Phone: 816.654.7905
  Email: arclark@kcumb.edu

- **University of North Dakota**
  264 Centennial Drive, Stop 8193
  Grand Forks, ND 58202-8193
  Control: Public; Highest Degree: Doctoral
  FT Undergrad: 9,385; PT Undergrad: 2,339
  FT Grad: 0; PT Grad: 0
  Contact: James D. Genandt, Vice President for Student Learning
  Phone: 620.432.0302
  Email: jgenandt@neosho.edu

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  1100 E. Sheldon
  Prescott, AZ 86301
  Control: Public; Highest Degree: Associate’s
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  FT Grad: 0; PT Grad: 0
  Contact: Ellen Falduto, Chief Information & Planning
  Phone: 330.263.2230
  Email: efalduto@wooster.edu

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  915 E. Market Ave.
  Searcy, AR 72149
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  Phone: 928.776.2205
  Email: gggeorge@butlercc.edu

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  Contact: Gene George, Associate VP, research and effectiveness
  Phone: 316.322.3338
  Email: jgenandt@neosho.edu

- **Kansas City University of Medicine and Biosciences**
  175 Independence Avenue
  Kansas City, MO 64106-1453
  Control: Private NFP; Highest Degree: Doctoral
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  Phone: 816.654.7905
  Email: arclark@kcumb.edu

- **University of North Dakota**
  264 Centennial Drive, Stop 8193
  Grand Forks, ND 58202-8193
  Control: Public; Highest Degree: Doctoral
  FT Undergrad: 9,385; PT Undergrad: 2,339
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  Phone: 620.432.0302
  Email: jgenandt@neosho.edu

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  FT Undergrad: 4,111; PT Undergrad: 5,031
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  Contact: Gene George, Associate VP, research and effectiveness
  Phone: 316.322.3338
  Email: jgenandt@neosho.edu
**Glossary of Terms**

**Academy mentors** – A group of trained individuals with expertise in either of the Academy topics at the course, program, and institutional level. Mentors facilitate team thinking throughout the Academies.

**accreditation association or commission** – A nongovernmental body established to administer accrediting procedures.

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

**accreditation, regional** – A type of institutional accreditation provided by seven recognized accrediting commissions of the six regional accrediting associations.

**Action Projects** – Projects institutions in the AQIP Pathway develop as mechanisms to improve quality.

**AQIP Pathway** – One of the three HLC Pathways for reaffirmation of accreditation, it is based on the principles of continuous improvement.

**AQIP Pathway Categories** – Six categories to assist institutions in examining their key processes and understanding their opportunities for improvement.

**Assessment Academy** – One of HLC’s Academies for institutions interested in developing an ongoing commitment to assessing and improving student learning.

**Assumed Practices** – Practices shared by all institutions of higher education that are unlikely to vary by institutional mission or context.

**Assurance Argument** – Part of the Assurance Filing, a narrative demonstrating how an institution meets the Criteria for Accreditation. The Assurance Argument contains links to the Evidence File.

**Assurance Filing** – The Assurance Argument and Evidence File the institution submits demonstrating that it meets the Criteria for Accreditation.

**Assurance Review** – An HLC review of the Assurance Filing submitted by an institution.

**Assurance System** – A web-based technology that institutions use to provide an Assurance Argument and evidentiary materials.

**Board of Trustees** – The governing body of HLC, made up of 15-21 members of HLC and representatives of the public.

**candidacy** – Preaccreditation status, which does not carry membership in HLC.

**comprehensive evaluation** – An evaluation of an institution that results in a decision on the reaffirmation of accreditation.

**Comprehensive Quality Review** – An onsite visit to an institution in the AQIP Pathway to affirm the accuracy of the institution’s Systems Portfolio, review the Action Projects, assure the continuing quality improvement commitment, and confirm the institution’s compliance with the Criteria for Accreditation.

**Core Components** – Subcategories of the Criteria for Accreditation that are reviewed in order to determine whether an institution meets the Criteria.

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

**Evidence File** – Part of the Assurance Filing, the Evidence File contains evidence the institution meets the Criteria for Accreditation.

**Federal Compliance Program** – The program used by HLC to assure that its institutions are complying with the expectations of specific regulations accreditors must enforce as a part of their federal recognition.

**Guidelines** – Documents developed for institutions and peer reviewers to add clarity to HLC requirements.

**HLC Collaboration Network** – An online forum for feedback, shared learning and dialogue on Academy Projects and the work of Academy Teams.

**Institutional Action Council (IAC)** – Decision-making body of HLC made up of approximately 80 to 100 experienced peer reviewers and several representatives of the public.

**Institutional Update** – Online report completed annually by affiliated institutions.

**Location and Campus Update System** – An online system that institutions may use to update existing locations and branch campuses and may be used by institutions in the Notification Program to add additional locations.

**Mark of Affiliation** – A digital image used by member institutions to identify their affiliation with HLC.

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

**Open Pathway** – One of the three HLC Pathways for reaffirmation of accreditation, it features a 10-year reaffirmation cycle. Quality Assurance and Improvement are separated in the Open Pathway.

**Pathway** – A mode of verification that institutions are meeting threshold standards and are engaged in continuous improvement. The three Pathways include Standard Pathway, AQIP Pathway, and Open Pathway.

**Peer Corps** – The group of trained professionals who serve in accreditation processes.

**peer reviewer** – A member of the Peer Corps.

**Persistence and Completion Academy** – One of HLC’s Academies for institutions with an interest in identifying student persistence and completion strategies, programs, and student populations.

**Quality Initiative** – A major improvement effort required of institutions in the Open Pathway that suits the institutions current concerns or aspirations. It takes place between years 5 and 9 of the Open Pathway Cycle.

**Reaffirmation of Accreditation** – A determination that an accredited institution is still meeting the requirements of the Criteria for Accreditation.

**staff liaison** – HLC staff member who serves as resource person for and liaison to an institution.

**Standard Pathway** – One of the three HLC Pathways for reaffirmation of accreditation, it features a 10-year reaffirmation cycle. Quality assurance and quality improvements are integrated into comprehensive evaluations.

**Statement of Affiliation Status (SAS)** – An official document that summarizes the status of the institution with HLC.

**Strategy Forums** – A workshop for institutions in the AQIP Pathway to facilitate new strategies and tactics for institutional improvements.

**Systems Appraisal** – In the AQIP Pathway, a response to the institution’s Systems Portfolio that provides professional feedback to the institution with quality improvement as the focus.

**Systems Portfolio** – In the AQIP Pathway, a document describing the processes, results, and improvements in each system of the AQIP Pathway Categories. It also provides proof the institution is meeting the HLC Criteria for Accreditation.