

A GUIDE TOWARD WASC ACCREDITATION

For Institutions Incorporated or Operating Primarily
Outside of the United States



Western Association of Schools and Colleges

Accrediting Commission for Senior Colleges and Universities

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Introduction

Welcome to WASC!

At its meeting in February 2012, the WASC Accrediting Commission for Senior Colleges and Universities (referred to as WASC throughout this document) determined that WASC would accept applications for accreditation from universities outside the United States as a matter of policy. The Commission has thus launched an international initiative that will develop carefully and deliberately as we gain experience and have the opportunity to work with others around the world. This *Guide* has been prepared to assist colleges and universities that may be interested in WASC accreditation. It is not an exhaustive document, and institutional representatives are encouraged to visit the WASC website (www.wascsenior.org) for additional information and assistance. I also strongly encourage you to consult with me before moving forward to discuss your institution's intention and readiness to pursue accreditation.

WASC is in the process of creating a special tab within its website as an international resource, and we encourage you to monitor the website for the development of this resource. The most current version of the *Guide* will be posted to the website, along with other information and links.

As the Senior Advisor for International Affairs, I am pleased to address any questions or concerns that may arise from reading the *Guide*. Please feel free to contact me at wplater@wascsenior.org.

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About This Guide

This guide is intended to assist universities and colleges located, incorporated, or operating primarily in nations outside the United States and its territories that wish to consider seeking accreditation through the Western Association of Schools and Colleges Accrediting Commission for Senior Colleges and Universities (WASC). Consistent with its continual review of its own standards, policies and procedures, WASC has acted to develop an international perspective on quality assurance, including the accreditation of qualified institutions abroad, for the benefit of its members. By including international institutions among its members, the Association will gain the experiences, insights, and innovations of organizations that both share the values of WASC and that aspire to be among the most effective learning organizations in the world.

WASC seeks to develop a coherent, cohesive community of members from differing cultures and contexts as well as institutional sizes and types, all based on shared values and standards. Recognizing that there are differences among nations and their institutions of higher education, the Commission seeks to establish procedures and policies that will ensure comparability and functional equivalence while adhering to WASC's fundamental values and standards. Many US governmental agencies, nongovernmental organizations, foundations, and corporations have followed such a principle of equivalency in their global interactions. Similarly, educational institutions and associations can simultaneously enhance the quality of their own educational effectiveness while expanding their reach to institutions that share similar values and aspirations.

This guide is intended to set forth the process for the exploration of accreditation for institutions located abroad that aspire to join the WASC community. Accordingly, WASC has developed (1) threshold criteria to assist institutions in assessing whether or not they wish to pursue accreditation through WASC; (2) procedures for seeking accreditation; (3) a fee schedule to reflect increased direct and indirect costs of serving institutions outside the traditional WASC geographic region; and (4) a protocol for adapting its own Criteria for Eligibility and for review under its Standards of Accreditation for institutions outside the region.

The procedure to be followed by international institutions parallels that for domestic institutions, but there are significant differences, beginning with a requirement that international institutions file an application and participate in a diagnostic visit to ensure both compatibility of institutional interests with those of WASC and to assess the readiness of the institution to meet WASC standards and criteria. Although there will be differential applications of the *WASC Handbook of Accreditation* (available on the WASC website) to account for international differences, all international institutions are expected to comply with the requirements of the *Handbook*, with accommodations made where appropriate to reflect the national and cultural differences of the prospective international institutions. As of 2012, WASC is modifying its *Handbook*, including the Standards of Accreditation, the procedures it follows for institutional reviews, and many of its policies. The most current—

and therefore the applicable—policies and procedures may be found on the WASC website. These new policies and procedures will therefore apply to all institutions—international and domestic—and institutions considering WASC accreditation should ensure that they are following them. This *Guide* will also be revised and updated periodically to reflect Commission-approved changes.

International institutions seeking accreditation will notice that the fee structure for participation is different from that for institutions within the region. In most instances, fees and annual dues are 150% of fees and dues for domestic institutions. Based on its experience with international accreditation, WASC staff and Commissioners have learned that they need to make significantly greater commitments of time as well as to meet demands for knowledge and expertise beyond that ordinarily required for domestic accreditation. Institutions seeking initial accreditation should anticipate fees of \$60,000 or higher and a process that could take as long as eight years, as is the case for many domestic institutions. Established colleges and universities may be able to accelerate the approval process and complete it within three to four years.

Threshold Criteria for Consideration

WASC has established the following *threshold* criteria that institutions located abroad are expected to observe to ensure that they meet the expectations of WASC members. Because WASC membership is extended to a limited number of institutions outside its geographic region, these criteria exceed and augment the criteria for eligibility for domestic institutions within the WASC service region. Many institutions will not find these criteria to be in accord with their own interests, missions, or the regulations of their respective countries. Accordingly, they will not wish to pursue accreditation through WASC. These threshold criteria, therefore, are intended to aid institutions in determining whether or not WASC may be a viable option in meeting its needs.

By clarifying what it means to seek voluntary association through WASC, the Commission intends to make clear that it will not impose its expectations on others. Instead, it has identified those standards, values and qualities that define its community, including institutions outside the US. Because seeking WASC accreditation is elective, applicants will be expected to have met these criteria and to seek accredited status because they share these values. Further, they will agree to conduct their affairs in accord with WASC standards, policies, and criteria. Thus, being approved to pursue WASC accreditation is a milestone requiring extensive and substantive preparation.

Through the Senior Advisor for International Affairs, WASC invites international institutions to confer about the mutual interests and benefits of accreditation under the WASC Standards and to explore what steps and costs might be required to pursue accreditation.

These consultations occur without cost or obligation, ordinarily via email, telephone, or other electronic communication. If an institution wishes to proceed to an application, it will be required to submit a formal application (Appendix 1) that addresses the criteria for the consideration of international applications described below. The application must be accompanied by a non-refundable fee.

International colleges and universities will have met *or be able to meet* the following specific threshold criteria that supplement and augment the criteria for domestic applicants. If an applicant does not meet the threshold criteria at the time of filing the application but intends to do so and is prepared to address the criteria requiring adjustments during the diagnostic visit, the institution may proceed with an application in which areas needing adjustment are identified. Information regarding these threshold criteria is required in the application.

1. Demonstrate a reasonable expectation that the institution has considered the WASC Standards through self-assessment and is prepared to address all of the WASC Standards and related criteria for eligibility, including some criteria that may depend on establishing a functional equivalency appropriate to the national or cultural context.
2. Specifically, document that the institution has reviewed and accepted the WASC principles for operational integrity, including sound business practices, honesty in communicating with the Commission on any matter that could materially affect the accreditation status, and holding the institution's officers to a standard of ethical conduct consistent with WASC criteria.
3. Provide all documentation in English and host visits that must be conducted with English as the language of interaction. English, however, does not have to be the language of instruction.
4. Demonstrate the capacity to submit all documents electronically via the internet and ensure that institutional officials have the ability to interact electronically with WASC and its members via multiple means and media of communication (e.g., internet, telephone, Skype).
5. Document an educational mission that is based on offering programs that lead to degrees in recognized fields, each of which has defined, published learning objectives at the course, program (major) and degree level, including those that ensure the capacity for life-long learning (e.g., general education or the appropriate equivalent for the field and level of credential). Note: this threshold criterion is most relevant for baccalaureate degrees, which must ultimately satisfy the WASC Criterion 2.2a for Review under the Standards that requires institutions to provide and document "an integrated course of study of sufficient breadth and depth to prepare [graduates] for work, citizenship, and a fulfilling life."
6. Provide evidence of having successfully graduated sufficient numbers of students to support WASC's assessments and judgments about the effectiveness of the institution's programs—typically five or more graduating classes.
7. Typically, half or more of course enrollments should be through programs that are offered in-person and on-site.; if multiple sites are involved or if a substantial portion of

instruction is provided through distance education or learning technologies, the nature and circumstances of the educational program will be assessed for educational effectiveness and operational integrity.

8. Provide evidence of financial sustainability. The diagnostic visiting team will be required to ensure that all financial accounting and auditing practices conform to or are equivalent to generally accepted accounting practices of the United States and for the application the institution should provide assurances that this expectation can be met.
9. Affirm that the institution is not under a current sanction or negative finding from an agency that has jurisdiction over the institution or its programs.
10. Exhibit a commitment and ability to exercise academic freedom among students, faculty and staff sufficient to ensure freedom of inquiry and freedom of expression necessary for the creation, development and dissemination of knowledge, and document that *within the institution* there is no censorship or prohibition of inquiry or expression (even in situations where such freedoms may not be guaranteed in the national or cultural practices of the country). This threshold criterion will be further considered as a part of the eligibility review and the intent of the threshold review is to anticipate any issues that may subsequently arise.
11. Establish and publish standards of academic integrity and intellectual responsibility that reasonably ensure all members of the institution adhere to academic honesty free from plagiarism and other forms of misrepresentation.
12. Document by effectively implemented policy that students, faculty and staff are free from discrimination *within the institution* based on gender, age, race, ethnicity, nationality, religion, or physical ability (even in situations where such values may not be guaranteed in the national or cultural practices of the country).
13. Commit to public transparency and accountability with regard at least to admission requirements, graduation requirements, fees, grievance procedures for students, faculty and staff, and retention and graduation rates for all degrees offered at all levels.
14. Commit to contributing to the WASC association through participation in its activities (via electronic communication and interaction as well as in person) and through continuous self-assessment and continuous improvement.
15. Commit to issuing only a WASC-approved public description of the institution's status with regard to each stage of accreditation review.

Institutions considering WASC accreditation should be prepared to address all of these criteria in an application and to offer evidence of demonstrating compliance with the criteria during the on-site diagnostic visit (not necessarily at the stage of filing an application). WASC recommends that these criteria be discussed by the governing board, executive officers, and appropriate faculty governance leaders as a way to reflect on and self-assess whether to pursue accreditation through WASC. If one or more criteria are not yet compliant with WASC expectations but there is a desire to become compliant, WASC is willing to work with institutions to make the necessary adjustments, and these changes can best be assessed and addressed during the on-site visit. The Commission's Standards, Criteria for Review, policies, and procedures are distinctive within the United States and as international quality assurance measures, they provide members a corresponding distinctive level of assurance of the quality

of their institutions and the likely effectiveness of their practices. Although the required stages of accreditation may appear challenging, they have been carefully designed to reassure members and the constituents they serve that the educational offerings of WASC-accredited institutions are what they appear to be. Accordingly, the fees associated with international accreditation through WASC are higher than may be the case in other regions, but these fees ensure that the Commission is exercising due and careful diligence in serving all of its members, including those located outside the United States.

Steps toward Accreditation

As is the case for institutions located within WASC's domestic service region, each step toward accreditation is separate and does not assure an eventual favorable action by the Commission. There are six distinct stages for institutions located outside the United States to follow, most of which are the same for domestic institutions. Depending on the institution's readiness, the entire process may take as long as eight years and may entail as many as five on-site visits by WASC-appointed teams ranging from three to seven members. However, the initial diagnostic visit will help establish the probable timeframe and steps expected for an institution to move to initial accreditation. The following guide outlines all of the possible steps; at the end of the description of the full process, an explanation of an accelerated process is described briefly.

I. Stage One: Initial Inquiry and Application (Steps 1, 2 and 3)

A college or university that wishes to be considered for accreditation must notify WASC of its intent to seek accreditation in writing. WASC encourages preliminary discussions with the Senior Advisor for International Affairs prior to submitting a formal notification. The institution must then file an application including required documentation of having met (or having a reasonable expectation of meeting) the initial application, or threshold, criteria noted above. One stipulation required at the initial application stage is an explicit written acknowledgement by both the CEO and the board of trustees (or equivalent) that:

1. The board has adopted a resolution acknowledging that the institution is seeking accreditation under WASC's standards;
2. The board accepts responsibility (or is prepared to accept responsibility) to operate in conformity with WASC policies and standards;
3. The board is committed to follow WASC policies with regard to such matters as addressing complaints, submitting substantial changes in programs or operations to WASC for review prior to implementation, seeking prior approval for new degrees, and other such matters as outlined in WASC policies; and
4. Acknowledgement that favorable action at one stage of WASC consideration does not predict or obligate any subsequent Commission

action and that all Commission actions are completely independent of any developmental work or capacity building recommended by WASC.

A draft statement is available as a sample in Appendix 2; however, the institution may prepare its own statement in accord with its policies and procedures as long as it addresses the required declarations.

At this time, the institution will be required to submit a non-refundable initial application fee.

The application will be reviewed by the Senior Advisor for International Affairs, who will provide a written response that will assess whether the threshold criteria appear to have been met and further act: (1) to accept the application or request further information; (2) to recommend further institutional development prior to re-submitting an application; or (3) to recommend that the institution not pursue accreditation through WASC. However, this preliminary review will not preclude an institution's filing a request for a diagnostic visit, regardless of the recommendation.

Institutions considering seeking WASC accreditation are required to send a representative (or several) to a WASC-sponsored workshop that describes the level of readiness expected of the institution at each step of the entire process leading to initial accreditation. Workshops are usually offered at least once a year in connection with the Academic Resource Conference (ARC), typically held in April in California.

Timeline: The time required from initial inquiry through a response to a formal application may vary dependent on the completeness of the institution's application, the institution's readiness, and its responsiveness. WASC is committed to providing a written response to an application within two months or less of receiving the application document. Any approved application that does not move to the diagnostic visit within one year will require that the institution submit a new application.

II. Stage Two: Diagnostic Visit (Steps 4, 5, and 6)

A. Institution's Diagnostic Report (Step 4):

The Senior Advisor for International Affairs will work with the institution to arrange a diagnostic visit that typically will include a three-day site visit with a team of three evaluators. The visit may occur as soon as the institution has prepared a report according to an established protocol (Appendix 3) that is based on the initial application but requires greater detail and documentation, as specified by the Senior Advisor for International Affairs. The protocol for the report anticipates the institution's eventually meeting all WASC criteria but it does not require the actual, complete documentation required at the later stages. Instead, the report is intended to assist the institution in determining its

readiness and to provide the visiting diagnostic team with sufficient background information as to make the site visit beneficial. It will assist the diagnostic team if the institution can identify what items on the Compliance Audit list may be problematic or difficult to provide so that the team can discuss these matters during the visit. Although not required at this stage, WASC recommends that the institution designate a single individual to serve as the liaison and point of contact. This person must have access to and support from senior institutional leaders and be able to act on behalf of the institution.

At this time, the institution will be required to submit a non-refundable diagnostic visit fee; all direct expenses will be invoiced to the institution in addition to the fee.

Timeline: The institution is required to submit the pre-visit diagnostic report within six months of receiving WASC approval to proceed with the diagnostic visit.

B. Diagnostic Visit (Step 5):

In cooperation with the institutional liaison, the Senior Advisor for International Affairs will develop a schedule for the visit and specify documentation or evidence that should be available to the team on site beyond that provided in the report. One aspect of the site visit will include a meeting with a representative of the appropriate government and/or quality assurance agency of the nation responsible for authorizing the legal operation of the institution. Additionally, the team will be required to ensure that all financial accounting and auditing practices conform to or are acceptable to generally accepted accounting practices of the United States. The goal of the visit is to determine if the institution has the capacity to meet all basic requirements for WASC accreditation and therefore should proceed to the next step. In addition, the visit will afford the opportunity to provide advice about achieving eventual accreditation.

Timeline: The visit will occur at a mutually acceptable date within one year of submission of the report. However, WASC will expect to conduct the site visit within three months of receipt of the diagnostic report.

C. Diagnostic Visit Report (Step 6)

The visiting team will prepare a detailed report based on its observations, interviews, and document reviews following WASC criteria for eligibility (<http://wascsenior.org/resources/eligibility>), including additional observations and recommendations. The report will include an assessment of the institution's readiness and a decision as to whether the institution should proceed directly to eligibility or requires further preparation. This substantive report will provide detailed directions for next steps should the institution wish to proceed. While

the format and content of the report will vary for each institution based on its unique circumstances, the report will address areas of the Criteria for Eligibility that may require attention before proceeding to the next stage. The report will also identify areas for WASC staff to consider for further actions with regard to eligibility. The report will offer one of two next steps:

1. Eligibility Review: As described below, the institution may move immediately to an eligibility review; or
2. Further Development Required: In this instance, the report will outline the steps that need to be addressed before the institution may request consideration for eligibility. Depending on the extent and nature of the issues identified in the diagnostic report, a second diagnostic visit may be required. At the institution's request, WASC will refer the institution to independent consultants who can assist the institution in necessary development or capacity building. The institution may elect to proceed with preparation for reconsideration on its own without external assistance. Any consultation or capacity building by independent consultants is neither a precondition for reconsideration nor an assurance of any favorable action by the Commission.

Timeline: The WASC report will be submitted within one month of the visit unless additional information or clarification is required.

III. Stage Three: Eligibility (Steps 7 and 8)

Eligibility is a formal stage in the accreditation process and requires formal action by the Commission through the Eligibility Review Committee.

A. Letter of Intent Application (Step 7):

An institution begins the process by submitting the Notification of Intent to Apply for Eligibility Form, which includes stipulations executed by both the president/chief executive officer and the chair of the governing board (or equivalent), indicating its commitment to comply with WASC policies and procedures.

At this time, the institution must also submit the Eligibility Application fee.

Once these are received, the institution will be given access to an online portal through which the full Eligibility application will be submitted. The institution must designate an official Accreditation Liaison Officer (ALO), who will be the primary contact person with WASC on all accreditation matters. At the institution's discretion, the ALO may or may not be the same person who assisted with the diagnostic visit. Regardless, the ALO will be required to be thoroughly familiar with all WASC policies and procedures. The Senior Advisor for International Affairs will be available to assist the institution in defining the

duties of the ALO and explaining WASC's expectations for the role the ALO will play in the institution's interactions with WASC. Detailed information about submitting the application, required forms, fees, and other resources may be found at <http://wascsenior.org/resources/eligibility>. The Eligibility Application, which will be uploaded through the web portal, consists of the following elements:

1. The Eligibility Report which addresses each of the 23 Eligibility Criteria (see pages 4-14 of the guide *How to Become Accredited* for the domestic expectations for eligibility:
[http://wascsenior.org/findit/files/forms/How to Become Accedited May 2011.pdf](http://wascsenior.org/findit/files/forms/How_to_Become_Accedited_May_2011.pdf). NOTE: *Some modifications of these criteria are anticipated for international institutions; the section "Protocols for the Interpretation and Adaptation of WASC Eligibility Criteria or Criteria for Review under the Standards of Accreditation" below outlines those areas currently adopted by the Commission. Others will be added as necessary.*
2. The Summary Data Form
([http://www.wascsenior.org/findit/files/forms/Summary Data Form for Eligible and Candidate Institutions.doc](http://www.wascsenior.org/findit/files/forms/Summary_Data_Form_for_Eligible_and_Candidate_Institutions.doc)) NOTE: *The standard data form in use for domestic institutions will need to be adapted for international institutions. Because of significant variations among national contexts, however, a single "International" Summary Data Form is not practical. Accordingly, the Senior Advisor for International Affairs will work with each institution to make appropriate adjustments to the form.*

Some of the WASC forms and report formats may require further explanation and even modification during the initial period of implementing international accreditation. The Senior Advisor for International Affairs will assist the institution's liaison in making any necessary adjustments or address questions and concerns.

Timeline: Following WASC review of the application and further consultation with the Senior Advisor for International Affairs, the institution may elect to suspend consideration of its application for a period of up to six months to allow it time to address needed changes. The institution may withdraw formally from the Eligibility process without prejudice at any time prior to an Eligibility Review Committee (ERC) panel review and receive a refund of 50 percent of the Eligibility Application fee.

- B. Eligibility Review Committee (Step 8):
- Once the full application is received, WASC will select and convene an ERC panel to review and act upon the application, generally within 30 to 60 days of receiving the application. Panels considering applications from international institutions will comprise members who have previously participated on WASC

teams and who have also had training and experience with international higher education. Panels will be prepared and trained for institutional reviews by WASC staff.

Institutional representatives will be invited to participate in one portion of this review, via conference call, to answer questions and provide clarification, as needed. To the greatest extent possible, meetings will be scheduled to take into consideration the respective needs of participants due to differences in time zones.

At this stage, WASC will formally assign one of its senior staff (ordinarily a vice president or equivalent official) as the WASC liaison, ending the institution's conferring with the Senior Advisor for International Affairs, who will play no role in decision-making other than as an internal advisor to WASC staff. The report prepared following the Diagnostic Visit will be made available to the ERC at the time of this review, and the Senior Advisor for International Affairs will be available to answer questions. This differentiation of responsibilities is to separate formally any consulting or capacity building work—no matter how informal—undertaken prior to formal Commission action from the decision-making process. Appreciating the importance of continuity and accrued knowledge, the Senior Advisor will be available to confer with the institution as needed and to offer advice and suggestions with the clear understanding that the Senior Advisor will play no role in decisions or actions being taken by the Commission.

A WASC staff liaison (other than the Senior Advisor for International Affairs, as noted) is assigned to the institution in time to participate in the conference call. The Senior Advisor for International Affairs may attend the panel review to answer questions about earlier steps but will not be present for the discussion and decision of the ERC. Following the ERC review, all subsequent interaction with WASC will be through the WASC designated liaison. This staff member will work with the institution during the subsequent stages of the review process, providing consultation and helping to appraise institutional readiness for each stage. The institution is expected to work closely and cooperatively with the assigned liaison at each step. This will include setting an appointment to meet with the institution's liaison for planning purposes either via a Skype or video conference or, as mutually arranged, at the institution after the grant of Eligibility and prior to submitting the Letter of Intent (if applicable) and the application for Candidacy/Initial Accreditation. If the WASC liaison visits the institution, the institution will be responsible for all costs for transportation, lodging, and related expenses.

Directly after the Eligibility review, WASC will prepare an action letter (the formal document WASC uses to communicate its actions), detailing the panel's

findings regarding the institution's standing on each of the 23 Criteria. There are three possible outcomes following a review by the ERC: approval, deferral, or denial:

1. If the application is **approved**, the institution is granted Eligibility for a period of up to four years. The institution is then eligible to apply for Candidacy and begins this process by submitting the Application for Candidacy and Initial Accreditation and fee within 60 days of receipt of the action letter indicating approval by the ERC panel. The fee includes WASC staff support through the Candidacy process. (Additional visit-related fees are invoiced at the time of each visit for travel, lodging, meals and other expenses.)

Institutions granted Eligibility will be required to file an Annual Report in accord with instructions provided by WASC.

2. If the application is **deferred**, the institution may re-apply with a supplemental application, addressing only those Criteria that the ERC panel had determined that the institution did not meet in the first application. The first and second readers of the original panel will review the supplemental application.
3. If the application is **denied**, the institution may resubmit an application that addresses all of the Eligibility Criteria. Typically, an ERC panel will act to deny an application rather than defer when an application fails to meet a substantial number of criteria, especially those related to institutional capacity.

An institution wishing to request reconsideration of an action to deny Eligibility by an ERC panel may do so by submitting a statement clearly setting forth the reasons why the institution disagrees with the panel's findings as stated in the action letter. The institution's statement, along with the action letter, is sent to the WASC President within 30 days after receipt of the action letter. These materials are then presented to the Executive Committee of the Commission for its review and final determination.

The Commission Review and Appeal Process (outlined in the *Handbook of Accreditation* for other accreditation decisions) does not apply to Eligibility denials for either domestic or international institutions.

Timeline: This stage can vary from several months—but typically over a year—up to four or more years depending on how ready the institution is and how

quickly it is prepared to act. WASC ordinarily will respond within 30-60 days to an institution's actions.

IV. Stage Four: Candidacy (Steps 9, 10, 11, 12, 13, and 14)

Institutions that have been found Eligible are expected to make expeditious progress toward achieving Candidacy or Initial Accreditation. Adequate progress is demonstrated by submitting the Letter of Intent and other documents described below in a timely manner and by working with the WASC liaison to arrange a site visit within two years of the grant of Eligibility. In order to provide optimal institutional support during the next two stages, WASC staff offer specific support to help institutions understand and work with the Standards of Accreditation, respond to issues identified by the ERC panel during its review of the application, prepare institutional reports, and organize for site visits. As noted, a WASC staff liaison is assigned to the institution at the time that the Eligibility Review Committee convenes to review the application for Eligibility. The fee required at this stage covers the Commission's work related to both candidacy and initial accreditation. The fee covers these activities:

1. WASC follows a two-visit process focused first on the capacity of the institution and its readiness to meet WASC standards and criteria: The Capacity and Preparatory Review (CPR). The second visit focuses on the actual policies and practices of the institution to ensure that there is an appropriate level of educational effectiveness: The Educational Effectiveness Review (EER). The two-visit process is explained in detail in the WASC document, "Expectations for Two Reviews" (<http://www.wascsenior.org/spring2010teamtools>).
2. Staff will review draft reports; establish and orient visiting teams; assist teams with site visits; and follow up with feedback to the institution related to Commission actions; one WASC staff liaison visit to the institution is provided, if requested, with staff travel expenses invoiced to the institution.
3. Staff will evaluate institutional and visiting team reports; when the Commission takes formal action regarding Candidacy, staff draft and send action letters and help to clarify the next steps in seeking Initial Accreditation.

The Candidacy and Initial Accreditation fee is to be submitted with the application for candidacy.

In addition to the Candidacy and Initial Accreditation fee, institutions will cover the costs for each site team's visit expenses (team travel, meal, and hotel expenses); for any legal fees incurred by WASC on behalf of the institution in its pursuit of Eligibility, Candidacy, or Initial Accreditation; and for institutional participation in any workshops provided by WASC. (NOTE: Utilizing these support

services does not guarantee that an institution will achieve its desired standing either in the first or in subsequent attempts.)

The Candidacy Review is an institution's first full and formal review under the Commission's Standards of Accreditation. The granting of Candidacy is a significant step and must be based on evidence of meeting WASC Standards. It is fundamentally a compliance review in which an institution demonstrates that it meets the expectations for accreditation at a minimum level by:

1. Demonstrating that it has reviewed itself with reference to the Standards of Accreditation, including attention to each Criterion for Review and Guideline.
2. Demonstrating that it meets the Criteria for Review and Guidelines at least at a minimum level (if a criterion has not yet been met but the institution is committed to meeting the criterion, this circumstance should be fully explained).
3. Demonstrating that it meets all or nearly all of the Standards of Accreditation at a minimum level.
4. Having a clear and feasible plan in place to meet all the Standards and Criteria for Review at a substantial level by the time of the Initial Accreditation Review.
5. Having developed approaches to self-examination and to ensuring quality in its teaching and learning functions by having in place requisite policies, procedures, and institutional capacities (e.g., institutional research, faculty development, explicit statements of learning outcomes at the program and degree levels, regular program reviews, and similar functions).

An institution seeking Candidacy must have successfully graduated sufficient numbers of students to support judgments about the effectiveness of its programs at the time of the Candidacy Review.

NOTE: Depending on the institution's maturity and readiness, it may be eligible for an accelerated process (see "Process to Accelerate the Candidacy and Initial Accreditation Reviews" below). Most institutions will need to follow the full established multi-visit process. The CPR site team for the Candidacy visit will assess the institution's readiness for an accelerated process.

A. Application (Step 9)

When a determination has been made by the Eligibility Review Committee that an institution meets the eligibility criteria specified above, the institution will then submit a formal **Application for Candidacy**. The application form is to be signed by the chief executive officer of the institution and the chair of the governing board (or equivalent).

At this stage, institutions are also invited to send representatives to the WASC workshops that provide support in preparation for the comprehensive review process.

Timeline: The Application for Candidacy must be submitted within six months of Eligibility being granted.

B. The Candidacy Review (Step 10)

Letter of Intent. At least six months but not more than 12 months prior to the date of the CPR visit, the institution must submit a Letter of Intent (LOI) to the WASC office. The LOI should address the following:

1. Describe how the institution has addressed each of the areas of concern identified as requiring further development in the Eligibility Review Committee (ERC) Action Letter granting Eligibility under each of the Eligibility Criteria. The document “Shifting the Focus” will assist the institution in framing its review around the Standards for accreditation rather than the Eligibility Criteria.
2. Describe how the institution will prepare for the Capacity and Preparatory Review (CPR) and the Educational Effectiveness Review (EER), including organizational structures and timelines, using a comprehensive approach that addresses each of the Standards of Accreditation and related Criteria for Review (CFRs). The letter should address how broad support for the review process will be generated. It should also indicate how key leaders and other stakeholders will be involved in preparing for each review.
3. Identify intended outcomes that the institution wishes to achieve by means of the review process. Key institutional issues arising under the Standards, especially those related to learning results and organizational quality assurance, should be directly addressed, with alignment to the CPR and the EER.
4. Describe and, as needed, explain any changes in the leadership, ownership, or governance structures of the organization that have transpired subsequent to the ERC review, including any changes in the legal or regulatory environment of the country that may have a bearing on institutional operations or governance.
5. Provide the institution’s most recent audited financial statement, with detailed explanations for any negative financial levels or trends and for any matters of concern identified by the auditors in the related Management Letter (which should be included if provided by the auditor); as necessary, the institution must provide information about differences with or variations from generally accepted accounting practices of the United States. As necessary, the WASC liaison will work with the ALO or other designated

institutional representatives to develop the appropriate statements to ensure the equivalent of accounting standards and reports ordinarily required for domestic institutions.

6. Provide the current Summary Data Form, showing enrollment and retention levels and trends by degree level, faculty and staff hires, and similar relevant operational data.
7. Stipulate and agree that the institution will be reviewed only for the degree levels and programs in operation, or explicitly planned and fully documented in all relevant areas of the Eligibility application, at the time of the ERC review. Any new degree levels or programs, off-campus, or distance education programs considered for initiation in the time span between the designation of Eligibility and the awarding of Candidacy requires prior approval by the Eligibility Review Committee. Any new degree levels or programs, off-campus or distance education programs, or other Substantive Changes anticipated during the period between the awarding of Candidacy and the review for Initial Accreditation must receive prior approval from the Substantive Change committee.

While there are no page limits specified for the narrative, it should be concise. Typically, Letters of Intent are between five and ten pages (2,500 to 5,000 words) in length. The Letter of Intent is submitted electronically according to directions provided by WASC. The Letter of Intent is reviewed by the assigned WASC staff liaison, who considers whether the letter provides all the required information and attachments, responds to concerns identified in the previous Eligibility Review Committee or Commission actions, identifies key areas on which the institution will work during the review process, and sets forth a realistic and appropriate plan and timeline for the review.

CPR Report: Prior to the CPR visit, and again before the EER site visit, it is the responsibility of the institution to do a self-review that addresses the five components described under “The Candidacy Review” (above). During the Capacity and Preparatory Review, institutions are expected to address the Standards at the level of performance indicated in each Criterion for Review and related Guidelines, demonstrating that it meets these at least at a minimum level. In writing the Capacity and Preparatory Review Report, institutions should include reflective essays on the institution’s findings under each Standard. During the Educational Effectiveness Review, institutions are again expected to follow a comprehensive approach to the review, which addresses each of the Standards and CFRs. This approach enables an institution to review how well it supports student learning across the institution and how overall quality assurance systems are employed to assess and improve student and organizational learning. Institutions are encouraged to ensure that they have in place both clear statements about expected learning outcomes and processes

for assessing and documenting that graduates are consistently meeting the learning objectives.

The Educational Effectiveness report, due 12 weeks before the site visit, should move beyond description of activities to include analysis and reflection on learning results and the actions that the institution has taken for improvement of those results. It is expected that faculty will be involved in developing the assessment strategy, in writing both the Capacity and Preparatory Review and the Educational Effectiveness Review reports, and in constructing the exhibits that accompany each report. Since these are the initial visits for the institution under Commission Standards, the institution is to give primary attention to presenting evidence demonstrating compliance with Commission Standards.

Compliance Audit: Required of all institutions seeking WASC accreditation, this form is used to confirm that the institution has in place a core set of policies, procedures, and forms essential for operation. As an aspect of the Capacity and Preparatory Review, the institution should complete the form electronically, creating internal links to the required documents. During the site visit, the team will verify the existence of the required documents.

Timeline: The staff liaison ordinarily approves the Letter of Intent within a month after submission. Revisions to the Letter of Intent may be requested if the staff liaison finds the letter to be lacking any key elements or otherwise reveals a lack of the readiness for the institution to pursue Candidacy or Initial Accreditation. Upon approving the Letter of Intent, the staff liaison works with the institution to schedule the CPR site visit within approximately 12 to 18 months. The EER visit typically occurs 12 months after the CPR visit. Under some circumstances, the EER may occur earlier. The CPR report is due three months before the date of the scheduled site visit.

C. Candidacy CPR Site Review (Step 11)

Within a month of approving the Letter of Intent, the WASC liaison will work with the ALO to schedule the site visit. The institution will need enough time to prepare its CPR report and ensure that it has all of the documentation ready for inspection as required by the compliance audit. Any processes and policies that may need refinement or implementation must be sufficiently established prior to the CPR site visit as to allow the team to assess how well they are operating. Once a date for the site visit is selected, the institution must plan to provide the CPR report 12 weeks prior to the date of the visit.

The visiting team will ordinarily consist of three to seven members and will spend at least three full days on site. The institution's ALO and the WASC liaison will jointly develop a schedule for the visit, which will be reviewed and approved by the CPR visiting team itself prior to the visit. If the review team believes that

additional information or documentation is required prior to the visit or needs to be made available for inspection during the visit, this will be communicated to the ALO by the WASC liaison as soon as possible but no later than one month prior to the visit.

D. CPR Site Team Report (Step 12):

In the Candidacy process, the visiting team for the Capacity and Preparatory Review prepares a report following the site visit and review. The report following the Capacity and Preparatory Review is submitted to the WASC office. The WASC staff liaison reviews the visiting team's report and then communicates the report along with the liaison's findings to the institution through a Letter of Transmittal, which will include comments and recommendations intended to assist the institution in preparing for the EER report and review. Consistent with WASC procedures with visiting team reports, the institution will be given a draft copy of the CPR report for correction of errors of fact prior to the report's being finalized.

Timeline: WASC staff will provide the institution with a draft copy of the visiting team's report within a month of the visit, allowing the institution to make any factual corrections that may be required. Within another month, WASC will provide the institution with a final copy of the CPR report. If following the CPR report WASC staff determine that the interval should be modified for the EER report and visit (though not extended more than two years), the WASC liaison will discuss this option with the institution's ALO. Precise scheduling of the EER visit will depend on institutional readiness and availability of WASC staff for placement on the visit calendar. It should be noted that the Commission itself will make a decision on candidacy only after both the CPR and EER reviews have been completed, rather than after each stage of review. Issues raised during the Capacity and Preparatory Review may be carried over to the Educational Effectiveness Review.

NOTE: If the CPR site team's review suggests that the institution is at a high level of readiness and the WASC liaison concurs, the Commission may authorize the next review team to evaluate the institution for initial accreditation during its subsequent EER site visit for candidacy. The EER team may recommend to the Commission that it: (a) grant initial accreditation; (b) deny initial accreditation but grant candidacy; or (c) defer action pending further institutional preparation on a few issues that can readily addressed while the institution remains in eligibility status. This process is described below in the section "Process to Accelerate the Candidacy and Initial Accreditation Reviews." The Commission will act after the completion of the EER visit and report.

Educational Effectiveness Site Review (Step 13)

Within a month of forwarding the final CPR site team's report, the WASC liaison will work with the ALO to schedule the EER site visit and EER report. The institution will need enough time to prepare its EER report and ensure that it has all of the documentation ready for inspection as required by the compliance audit. For this review, it is expected that all policies and procedures required under WASC standards and criteria will not only be in place but will have been operating long enough to have generated some evidence of how well they are working. The team will assess how well they are operating. Once a date for the site visit is selected, the institution must plan to provide the EER report 12 weeks prior to the date of the visit.

The visiting team will ordinarily consist of three to seven members (typically including most of the members of the CPR team) and will spend at least three full days on site. The institution's ALO and the WASC liaison will jointly develop a schedule for the visit, which will be reviewed and approved by the EER visiting team itself prior to the visit. If the review team believes that additional information or documentation is required prior to the visit or needs to be made available for inspection during the visit, this will be communicated to the ALO by the WASC liaison as soon as possible but no later than one month prior to the visit.

EER Visiting Team Report (Step 14)

Following the visit, the team will prepare its report. The report is submitted to the WASC office. Consistent with WASC procedures with visiting team reports, the institution will be given a draft copy of the EER report for correction of errors of fact prior to the report's being finalized. The team report following the Educational Effectiveness Review is submitted to the Commission, which will take formal action regarding the institution after the completion of the review. Commission policy permits an institution to withdraw its request for Candidacy at any time and without prejudice (even after the Capacity and Preparatory and Educational Effectiveness Reviews) prior to final action by the Commission.

NOTE: Following the EER visit, the team and WASC liaison may concur that the institution has progressed to the point that the full review process for initial accreditation—which includes both CPR and EER visits--may not be necessary. They may recommend to the Commission that it grant candidacy and then schedule a single special visit to focus on those issues identified in the Commission's action letter. This process is described below in the section "Process to Accelerate the Candidacy and Initial Accreditation Reviews."

V. Stage Five: Commission Actions on Candidacy (Steps 15)

Once the EER report is finalized, the chief executive officer of the institution is given an opportunity to respond in writing to the final report that is provided to the Commission. This response, along with the report and recommendation of the WASC staff, is forwarded to the Commission for action at its next scheduled meeting. The chief executive officer is invited to appear before the Commission to discuss the team reports before Commission action is taken. This interaction can occur via a teleconference or phone connection at the institution's request.

The Commission assigns the candidacy portfolio for an institution to a panel which reviews the materials, meets with the institution's representative(s), and then makes a recommendation to the full Commission for formal action. If the Commission acts favorably, the institution is awarded Candidacy.

A Commission decision to deny Candidacy is subject to review and to the WASC appeals processes. An institution that is denied Candidacy following the Institutional Review Process may reapply for Candidacy when it can demonstrate that it has substantially addressed or resolved those issues identified in the Commission action of denial. In such cases the Commission typically extends institutional Eligibility for a specified period. Reapplication may be made only during the term of the institution's Eligibility; otherwise, a new application for Eligibility will need to be submitted. The Commission's *Policy on Reapplication after Denial of Candidacy or Initial Accreditation* (available on the WASC website) guides the Commission in determining the steps the institution will need to take as it reapplies for Candidacy under these circumstances.

Candidate for Accreditation status is granted for a maximum period of four years and is not retroactive. Once an institution has attained the status of Candidate for Accreditation, it should provide students with appropriate notice of its status, such as in the course catalog and on the institutional website. The institution must use the following statement whenever it describes that status publicly:

“[Name of institution] has been recognized as a Candidate for Accreditation by the Accrediting Commission for Senior Colleges and Universities of the Western Association of Schools and Colleges, one of the recognized regional institutional accrediting commissions in the United States. This status is a preliminary affiliation with the Commission awarded for a maximum period of four years. Candidacy is an indication that the institution is progressing toward Accreditation. Candidacy is not Accreditation and does not ensure eventual Accreditation.”

Institutions granted Candidacy are required to:

1. Continue to submit an Annual Report in the format required by the Commission (in accord with directions provided by WASC).
2. Keep the Commission informed of any significant changes or developments, especially those required to obtain prior approval by the Commission Substantive Change Policy.
3. Pay annual dues according to the schedule for international institutions posted on the WASC website, prorated from the date of the award of Candidacy.

At this stage, the WASC liaison will implement the pathway for initial accreditation with the expectation that the institution will complete both a CPR report and site visit and an EER report and site visit, unless either of the two options for accelerated review noted above in Candidacy has been approved by the Commission.

VI. Stage Six: Initial Accreditation (Step 16)

An institution is reviewed for Initial Accreditation no later than the end of its four-year term of Candidacy or at an earlier date as determined by Commission action. To be reviewed for Initial Accreditation, an institution must have successfully graduated sufficient numbers of students to support judgments about the effectiveness of its programs prior to the completion of the institutional review process.

In seeking Initial Accreditation, the institution shall submit an Application for Initial Accreditation signed by the chief executive officer and governing board chair. A copy of the application form may be found at the WASC website:

<http://wascsenior.org/resources/eligibility>.

No additional fee is required at this time.

The institution will undertake the review process outlined in Section III of the *Handbook of Accreditation*, with the exception that the institution is not required to submit a Proposal or a Letter of Intent. The institution is expected to respond to any issues identified in the Commission's action letter awarding Candidacy. All Initial Accreditation reviews follow a comprehensive approach for the institution's reports, which addresses all CFRs, rather than utilizing a thematic approach. The Commission shall specify the dates for the Capacity and Preparatory Review and the Educational Effectiveness Review at the time of granting Candidacy. These reviews will normally be conducted three semesters apart, though the Commission may set a shorter or longer interval depending on scheduling availability and institutional readiness. If the CPR team's assessment suggests that the institution has progressed to the point that it has met expectations for initial accreditation, it may recommend a special visit within a shorter time period. The Commission will take action following each of the two reviews.

The Initial Accreditation Reviews

The Initial Accreditation Review moves beyond a mere compliance review, considering evidence of the institution's capacity for deep engagement with significant issues, including issues related to the institution's educational effectiveness. The institution will be required to complete both CPR and EER reviews, filing reports at least three months in advance of scheduled site visits for each of these reviews. Through the reports and the site visits, the institution will demonstrate that it meets all of the Standards of Accreditation and the Core Commitments by:

1. Demonstrating that it has reviewed itself in reference to the Standards of Accreditation and the Core Commitments to Institutional Capacity and Educational Effectiveness.
2. Demonstrating that it meets all of the Standards at a substantial level.
3. Demonstrating its commitment to developing and sustaining Institutional Capacity and Educational Effectiveness.
4. Demonstrating that it has successfully addressed the Criteria for Review and Guidelines identified in the action letter as being of concern at the time of the Candidacy review.
5. Having collected evidence of student learning and being able to demonstrate how it has used such evidence to support inquiry and improvement in support of educational effectiveness.

An institution seeking Initial Accreditation should demonstrate broad engagement with capacity and educational effectiveness issues, avoiding mere assertions of compliance. In acting to grant Initial Accreditation, the Commission may set the effective date of accreditation up to six months prior to the date of the Commission's action in order to accommodate the most recent graduating class, providing that during its visit the team has been able to evaluate evidence of the graduates' culminating achievements.

Representation of Accredited Status in Institutional Publications

Initial Accreditation is granted for a maximum period of seven years. Accreditation status is not granted retroactively, though in some cases the effective date may be set prior to the date of the Commission action. Institutions granted the status of Accreditation must use the following statement if they wish to describe the status publicly:

“[Name of institution] is accredited by the Accrediting Commission for Senior Colleges and Universities of the Western Association of Schools and Colleges, 985 Atlantic Avenue, #100, Alameda, CA 94501, 510-748-9001.”

The phrase “fully accredited” is to be avoided, since no partial accreditation is possible. The accredited status of a program should not be misrepresented. The accreditation granted by WASC has reference to the quality of the institution as a whole. Since institutional accreditation does not imply specific accreditation of any particular

program in the institution, statements such as “this program is accredited” or “this degree is accredited” are incorrect and misleading.

Reapplication

The Commission decision to deny Initial Accreditation is subject to Commission review and the WASC appeals processes. An institution that is not granted Initial Accreditation may reapply only after it is prepared to demonstrate that it has corrected the deficiencies noted in the review process. It must wait at least one year before reapplying. The Commission’s *Policy on Reapplication after Denial of Candidacy or Initial Accreditation* (available at <http://wascsenior.org/>) guides the Commission in determining the steps the institution will need to take as it reapplies for Initial Accreditation under these circumstances.

Degree Level Approval

The Commission has designated three categories of institutional authority to initiate new degree programs, with related institutional responsibilities for applying for new degree approval through the WASC Substantive Change process. In brief, these categories are as follows: **General Approval (G)** is granted to institutions that have offered 10 or more degrees in at least five different disciplines for 10 or more years. These institutions may offer new degree programs without prior approval from the Substantive Change process. **Specified Approval (S)** applies to institutions that have offered five or more degrees in a specified field for at least 10 years. These institutions may offer new programs in these disciplines at the same degree level(s) without obtaining prior approval through the Substantive Change process. All other institutions are considered as having **Individual Approval (I)**, which means that the institution must apply in advance for approval to begin any new degree programs. (See the policy *Categories of Degree-Level Approval and Related Institutional Responsibilities* at <http://wascsenior.org/>.)

Institutions that have been granted Candidacy and are pursuing Initial Accreditation are designated as having “I” approval classification. The Commission’s action letter granting Candidacy will specify the degrees that are being offered at the time. Any additional degree programs anticipated by Candidate institutions must be approved in advance through the Substantive Change process. When an institution is evaluated for Initial Accreditation, the visiting team that makes the recommendation to the Commission to grant Initial Accreditation (following the Educational Effectiveness Review) will also make a recommendation with respect to the institution’s degree-level classification. In making this recommendation, the team will take into account the institution’s degree program history, the Commission’s relevant decision criteria, and the national context, including the authority of entities such as ministries of education or other national quality assurance bodies to regulate degrees. The Commission’s action will be consistent with the Degree-Level Approval policy. The action letter granting Initial Accreditation will specify the institution’s degree authority classification and list the degrees being offered, and their instructional modality, at the time of the decision.

Dues, Fees, and Charges

Institutions granted Candidacy and/or Initial Accreditation will be assessed annual dues, prorated from the effective date of the Commission's action. International members are assessed annual dues at 150% of the dues paid by accredited institutions in the WASC domestic region. A dues and fee schedule for the Commission is prepared each year and is available on the WASC website and from the Commission office. Annual dues are based on institutional enrollment.

In addition, fees and expenses are charged for the following activities, with fees due and payable upon submission of the application. Late payments for any invoices from the WASC office may jeopardize the institution's accreditation.

Initial Application: International institutions must submit a fee of \$5,000 along with their application for consideration.

Diagnostic Visit: Once approved to proceed with seeking WASC accreditation, an international institution must complete a mandatory diagnostic visit and submit a fee of \$20,000. All visit costs will be billed to the institution in addition to the fee.

Eligibility Applications: Fees are charged for the initial eligibility application, reapplications, and for appeal of eligibility determinations. The eligibility fee is \$15,000 and is due before or with the letter of intent. If a special visit is required, there will be an additional fee of \$4,500. If there is a request for reconsideration of a denial, there will be a \$7,500 fee.

Candidacy and Initial Accreditation Applications: After an institution has been determined to be eligible, it is required to file a fee of \$18,000 at the time of its application for Candidacy. As the institution is not invoiced for membership dues until Candidacy is granted, this fee covers some on-site consultation, staff conferences by phone or email, and other forms of staff support in preparation for institutional self-studies, reports, and team visits. Each CPR or EER visit as is required will have a \$5,000 fee plus all visit costs.

Special Visits: Special visits have a fee of \$4,500. Expenses related to special visits made by the Commission because of special inquiries are paid by the institution.

Visit Costs: The institution is billed for the expenses of visiting teams for all types of visits, including team conference calls and team and staff travel, hotels, meals, in-country travel, internet access, and other expenses directly related to the visit. Travel lasting more than eight hours will be in business class and for travel of less than eight

hours travel will be in economy class airfare at a rate level to permit team members or staff to upgrade to business class at their own expense.

Special Charges: Additional charges will be assessed for unusually complex evaluations which require staff time beyond that normally expended. These include visits to programs with multiple sites and to institutions requiring unusually large teams in relation to the size of the institution. If there are legal, auditing, or other fees involved as a result of WASC inquiries or reviews, the institution will also be responsible for these expenses.

Commission Review of a Negative Action: When an institution requests a Commission Review, there will be a special processing fee of \$5,000 and a deposit against anticipated costs, both due at the time of a written request for a review. If the actual costs are less than paid, the excess will be refunded. If actual costs are greater, the institution will be billed for the difference.

Substantive Changes: Once an institution has been granted candidacy, it must seek approval for substantive changes as defined by the Substantive Change Handbook. A fee of \$4,500 will be charged for substantive changes when committee or Commission review is required. The fee for basic and routine substantive changes is \$1,500. If special visits or other extensive review by WASC are required, the fee may be higher.

Process to Accelerate the Candidacy and Initial Accreditation Reviews

A typical review that leads to Initial Accreditation calls for an Eligibility Review, followed by four self-studies and four site visits, two for Candidacy, two for Initial Accreditation, as follows: The Commission has established the status of Candidacy as one of preliminary affiliation with the Commission. The Commission's experience is that institutions, especially new ones, typically need the approximately four-year period of Candidacy to meet Commission Standards at a substantial enough level to be granted Initial Accreditation. In unusual circumstances, especially for established institutions, the findings of the first site visit team may lead it to believe that the institution does not need the full four-visit sequence leading to Candidacy and then to Initial Accreditation. Upon the recommendation of the candidacy CPR site team and WASC staff, the Commission may adopt an abbreviated review process. In such cases, the alternative steps may result in fewer than the usual four site visits, potentially resulting in a shortened timeline before initial accreditation is granted.

Two options for acceleration are available and set forth below. In either case, the visiting team and WASC staff considers the following factors when making a recommendation to the Commission for an accelerated process toward initial accreditation:

1. **Maturity:** The institution has a sufficient history to enable a review team to make judgments about its future performance with respect to the Standards.
2. **Resources:** The institution has substantial and stable capacity, with no outstanding issues of concern in terms of finances, personnel, or its physical plant.
3. **Results:** The institution has substantial evidence of academic performance and educational effectiveness, including culminating measures of learning for its graduates.
4. **Substantial Compliance:** During the Capacity and Preparatory Review, the site team identifies no major areas of concern under the Standards.
5. **Institutional Complexity and Stability:** Institutions are generally more likely to be considered for acceleration if they offer an established and well-developed degree program or a small number of such programs and are not in a period of rapid change or growth.

Institutions will not be considered for acceleration if they do not have at least 50 graduates in each of five disciplines by the time of the final site visit.

Option One: Recommendation of the Candidacy *CPR* Team

Upon the recommendation of the initial CPR team and WASC staff, the Commission may authorize that the next review team will evaluate the institution for Initial Accreditation during its subsequent EER site visit. Following the second visit, the team may make one of several recommendations to the Commission: (a) Grant Initial Accreditation; (b) Deny Initial Accreditation and grant Candidacy; (c) Defer action pending further institutional preparation on a few issues that can be readily addressed, with the institution remaining in Eligibility status. Under the conditions of this accelerated process, if the institution is granted Candidacy rather than Initial Accreditation, it may not appeal the Commission's decision.

For institutions that are recommended for acceleration under Option 1, the Educational Effectiveness Review for Initial Accreditation will occur 12 to 18 months following the CPR visit. In addition, the onsite reviews for Initial Accreditation will ordinarily be expanded by one day. The Commission will take action only after the Educational Effectiveness Review.

Option Two: Recommendation of the Candidacy *EER* Team

Following the Candidacy EER visit, the team and WASC liaison may concur that the institution has progressed to the point that the full review process for initial accreditation—which includes both a CPR and an EER visit—may not be necessary. They may recommend to the Commission that it grant candidacy and then schedule a single special visit to focus on those issues identified in the Commission's action letter.

In this case, the institution completes two self-studies and visits and the Commission grants Candidacy. The Commission acknowledges in taking this action that a two-visit cycle for Initial Accreditation may not be necessary to establish *substantial* compliance with all WASC Standards. Following the granting of Candidacy, the Commission schedules a single Special Visit to focus only on those remaining issues identified in its action letter.

Under Option Two for acceleration, the interval between the Candidacy action and the Special Visit would typically be 12 months but no more than 24 months. At the conclusion of the Special Visit, the Commission may grant Initial Accreditation and schedule the next comprehensive review in five to seven years. If the site team finds insufficient progress on the identified issues, it may recommend an additional visit, with the institution remaining in Candidacy. Such a decision by the Commission is not subject to appeal.

Protocols for the Interpretation and Adaptation of WASC Eligibility Criteria or Criteria for Review under the Standards of Accreditation for International Institutions

Introduction

Institutions of higher learning outside the United States can present impressive characteristics of educational effectiveness and quality that cannot be assumed to be identical or even similar to those of their US counterparts. The culture of higher education in their home countries, the role of governments, the funding models, the expectations regarding contributions to the local job market or society, the terminology used and taxonomy of the degrees being offered, and the place of higher education in the continuum of learning are but a few of the variables that an Eligibility Review Committee panel, site team, and Commission need to consider.

The decision to extend WASC accreditation to the international arena is based on the premise that WASC will appraise the individual institution's quality processes and outcomes in the context of the institution's history, culture, and mission and intended outcomes in terms of the student population, career market, and societal expectations of its service area. WASC does not assume that it will impose a strictly US model of education on the institutions the Commission evaluates.

This position is based on a series of diagnostic visits WASC undertook in 2011 to universities in five nations for the purpose of assessing how well its criteria and standards might apply in other national and cultural contexts. The substantive review by Commissioners identified several important areas where adaptations of criteria or standards that are justified and necessary in the US context may be warranted. Initially, the Commission has identified eight areas where adaptations may be necessary and has approved protocols for each criterion or issue to enable the responsible WASC officials to establish functional equivalencies to the stipulated criterion. Specifically, within the framework provided below, the Eligibility Review Committee may recommend to the Commission institutions for candidacy that present evidence of having demonstrated that they have met the intent of the respective criteria. Protocols for other areas may be developed and approved by the Commission as necessary.

The potential adaptations or interpretations of Standards and Criteria for Review detailed below, therefore, are applicable only to institutions outside WASC's domestic region. Current WASC members in the United States will continue to be evaluated in the context of American higher education norms and practice as will institutions seeking eligibility that are based within the WASC region. Eligibility Criteria and the Standards of Accreditation and Criteria for Review (CFRs) will continue to be applied within the straightforward traditional WASC review for institutions based in the United States.

WASC policies require that the baccalaureate degree must comprise 120 semester credit hours or the equivalent (as credit hours are defined by the US Department of Education), thus effectively requiring a "four year" baccalaureate. WASC will review degrees that do not meet

the current norm for domestic institutions through its protocol for assessing nonconforming degrees described below, to determine if such degrees meet WASC criteria irrespective of the time ordinarily taken to complete the degree.¹

The issues discussed below are approached from the perspective of a *functional equivalency*. This implies understanding the underlying principle or core value of the WASC Criterion or CFR and envisioning how it might apply within the context of the international institution. To this end, guiding principles are provided where appropriate to assist the Eligibility Review Committee, site teams, and Commission staff in their respective deliberations for each individual institution. The Eligibility Review Committee is authorized to consider whether or not international institutions have documented the equivalent standard of performance intended by WASC criteria for eligibility or review under its Standards and to make recommendations to the Commission based on its assessment of the institution's having established the functional equivalent required by WASC standards and criteria.

Some equivalencies will be relatively straightforward requiring explanation of how the institution's practices and policies comply with the intent of the WASC criterion. In these instances, the institution is expected to comply with the criterion although the approach or the form of compliance may vary from situations typically encountered in US domestic institutions. Accordingly, the protocols are divided into those that are largely interpretations of WASC criteria and those that are adaptations.

Interpretative Protocols

1. Issue: Institutional Governance

- a. Context for the issue: Government policies may dictate membership on governance boards or panels, prescribe their scope of authority or term of service, set admissions standards in the national interest, require that private institutions be either for-profit or non-profit, and in other ways influence the mission and character of an institution. Some institutions are part of a larger, multi-national system which may require a degree of participation in the governance process. In some countries, the education ministries are themselves subject to political appointment or even interference, suggesting the possibility of unstable support for policies or funding for their institutions. WASC has established a "Policy on Independent Governing Boards" that international institutions will be required to meet in substantial, even if in equivalent, ways.

¹ Institutions interested in Title IV eligibility should also consult the WASC "Policy on Title IV Compliance" and the WASC "Credit Hour Policy."

Applicant institutions will wish to review this policy and to consider the specific applicable criteria: CFRs 1.3, 1.6, 3.9 and Eligibility Criterion 4.

b. Guiding Questions for Teams and Commission:

- i. Is the governing body able to act consistently in the interests of the institution and its academic mission for its students? Can the governing body ensure that the institution is committed to the WASC criteria for international accreditation and Standards? Does the governing body provide for and review its own policies that ensure compliance?
- ii. Is there a record of actions by the governing body that demonstrates its autonomy and integrity?
- iii. Does the board offer evidence of meeting WASC expectations for its independence and for addressing conflicts of interest, qualifications, frequency of board meetings, board size, board structure and role of committees, terms of board service, procedures for removing and appointing board members, providing for the appointment, review, removal, and role of the chief executive officer on the board, and disclosure of the powers of any other related board or authority.

2. Issue: Academic Governance

- a. Context for the issue: The American tradition of an academic senate or council in which a faculty committee has designated authority over areas such as curriculum, academic policies, admissions standards, and promotion and tenure protocols may not be present in all countries. In some settings, these matters may be prescribed at a national or system level. Faculty, through whatever means or structure is most appropriate for the institution and in conformity with the nation's laws, must have oversight over academic programs and quality. (Consideration of CFRs 3.11, 4.7; Eligibility Criterion 14 may be most helpful in considering this issue.)
- b. Guiding Questions for Teams and Commission:
 - i. Regardless of the name of the committee or its exact location in the organization charts, is the faculty able to exercise an effective form of collective authority over the design, delivery, assessment, review, and revision of the academic programs?

- ii. Is there a record of support for the role of the faculty in designing, evaluating, and delivering the curriculum?

3. Issue: Academic Freedom

- a. Context for the issue: The traditions of freedom of inquiry and expression that characterize American higher education may not have been as formally expressed and protected in other cultures. This may be a sensitive issue in cultures with a strong religious or ideological overlay. (CFR 1.4; Eligibility Criterion 3)
- b. Guiding Questions for Teams and Commission:
 - i. Are there formal policy statements consistent with the WASC position on the protection of academic freedom?
 - ii. Is there a record of actions, either formal or informal, showing that faculty have been free to pursue academic inquiry or to express themselves freely with regard to their academic duties?
 - iii. In confidential conversations, do faculty members express an ability to disseminate their scholarly findings through publication or through classroom interactions?

4. Issue: Faculty Qualifications and Assignments

- a. Context for the issue: American norms for the percentage of faculty who hold a terminal degree may not be achievable in some settings. Review teams may not be familiar with the institutions that have awarded the degrees to the faculty of an institution being reviewed. With a stronger emphasis on career preparation in some countries, there is a higher reliance on adjuncts who are practitioners in the disciplines. Few institutions in some countries embrace the American model of faculty assignments that go beyond teaching to include research and service. (CFRs 3.2-3.4; Eligibility Criterion 14)
- b. Guiding Questions for Teams and Commission:
 - i. Is the faculty as a whole well qualified and in instances when faculty do not have the highest degree is there documented experience that would provide comparable expertise? Are the students receiving the education that is promised to them by faculty who are adequately prepared to offer instruction at the defined level?

- ii. What are the processes by which all faculty members, including adjuncts, are drawn into the academic life of the institution to become skilled in pedagogy, assessment, mentoring, and program review? Is there a sustained and effective program of faculty development?
- iii. Is the institution supportive of strategies to enhance the academic and pedagogical preparation of its faculty? Are these effective?

Adaptive Protocols

The Eligibility Review Committee and WASC staff will use these protocols to recognize cultural or national differences that may warrant some adaptation of the criteria normally applied to institutions in the WASC domestic region while still requiring the international institution to meet the intent of the criterion.

5. Issue: Meaning of the Baccalaureate Degree

Context for the issue: Many countries have both formally and informally been influenced by the Bologna process (or its equivalent in other regions of the world) that seeks to create a recognizable framework for the scope and rigor of the degrees awarded by their institutions across national boundaries and institutional types. Arising from the European context, this process tends to privilege an emphasis on career readiness over an emphasis on liberal studies. In other countries, even absent the influence of the Bologna process, their university traditions have not embraced the American model. As a result, in some countries a formal segment of the baccalaureate, known as General Education in the American context, is either absent or poorly defined. The age at which a typical student enrolls in the baccalaureate also varies by country, affecting competencies assumed to be mastered in high school. Several types of non-conforming baccalaureate degrees – some requiring three years (or 90 semester credits), others from five to seven years, to complete – may be presented to WASC for consideration. *The documented ability of graduates to pursue life-long learning (which for WASC means that institutions must provide and document “an integrated course of study of sufficient breadth and depth to prepare [graduates] for work, citizenship, and a fulfilling life”) may provide the common ground between general education in the US and comparable goals in other nations.* (CFRs 2.1-2.3 and Eligibility Criterion 13 are most relevant to consider in this regard.) Although some countries include outcomes such as critical thinking and oral and written communication within their baccalaureate programs, the nomenclature and specificity of these learning outcomes may vary widely from American models. As competency-based degrees become more prevalent in countries around the world, WASC is willing to find the common expectations for the

ability of graduates to engage in life-long learning, to exercise the responsibilities of citizenship, and to adapt in careers and vocations with the discovery of new knowledge.

a. Guiding Questions for Teams and Commission:

- i. Does the institution identify program-level (i.e., major or discipline-level) outcomes associated with each of its baccalaureate degrees? Does the institution identify degree-level (i.e., general education) outcomes for each of its baccalaureate in some form that can be demonstrated or documented upon graduation? To what extent are the equivalents of the WASC-defined competencies (CFR 2.2a) identified and assessed?
- ii. If the institution is required or expected to meet national objectives for degree-level learning outcomes, are these clearly identified and do they serve as a functional equivalent to the general education outcomes identified in CFR 2.2a?
- iii. If the national context or the specific practices of the institution consider prior academic work in high school as fulfilling the expectations of general education (and CFR 2.2a), does the institution have a means of assessing and documenting student attainment at matriculation?
- iv. If the core competencies for general education or its functional equivalent are addressed across the curriculum rather than in designated courses, can the institution generate a cross-walk that identifies where in the curriculum the competencies are addressed and assessed?
- v. Is there a record of the institution's baccalaureate degrees being accepted by graduate schools, especially those that are regionally accredited in the US?
- vi. Are institution-wide policies, practices, and means of assessing learning outcomes in place and are the results used to improve the curriculum?

6. Issue: Accreditation

- a. Context for the issue: Many institutions operate in the context of multiple approval agencies, both governmental and private or professional, that provide or require accreditation or licensure. It must be clear that the pursuit of WASC accreditation is complementary, not antithetical, to holding other forms of accreditation. (Eligibility Criteria 1 and 23)
- b. Guiding Questions for Teams and Commission:

- i. Has the institution disclosed its standing with other national or international accrediting or licensing entities, including specialized or discipline-specific accrediting bodies? If so, are there any conflicting requirements among their standards and those of WASC?
- ii. Does the institution enunciate clear reasons for seeking WASC accreditation in addition to any other accreditations it may hold?

7. Issue: Public Information

- a. Context for the issue: Not all countries are supportive of institutions' disclosing to the public key performance data, such as retention and graduation rates. The desire for institutions to be publicly accountable has yet to be formalized into policy in many countries. However, institutions accredited by WASC must be able to disclose key information about student performance, including retention and graduation rates (CFR 1.2 and Eligibility Criterion 22 need to be considered by the institution.)
- b. Guiding Questions for Teams and Commission:
 - i. Is the institution obtaining and using such data internally?
 - ii. By what means does the institution respond to public inquiry about its performance?
 - iii. In terms of current WASC requirements for disclosure, would the institution have any difficulty in complying?

8. Issue: Language of Instruction

- a. Context for the issue: WASC does not require that all accredited institutions deliver instruction only in English. In the international context, WASC accreditation should not interfere with the ability of the institution to deliver instruction in the languages that best serve its students. While English is the main language of instruction in many of the institutions expressing interest in WASC accreditation, some departments within these institutions deliver instruction only in the applicable language. The issue then becomes one of what language should be the basis for conducting an effective review? (The "Policy on Instruction in Languages Other than English" may be useful.)

b. Guiding Questions for teams and Commission:

- i. Is the institution capable of, and committed to, providing translations (certified, if requested) of key documents essential for an accreditation review?
- ii. In key interviews with non-English-proficient persons at the institution, can real-time translations be made available to the visiting teams?

These protocols are intended to enable WASC committees, staff, and the Commission itself to address substantive issues where there may not be an exact compliance with Eligibility Criteria or Criteria for Review. It is expected that WASC can accommodate differences where there is substantive and substantial compliance with the WASC criteria. These protocols are interim and will be continuously assessed and revised based on the Commission's experience in using them and on the advice received from international academic institutions and quality assurance bodies.

Current Version of the *Guide* and Protocols

As WASC increases its international engagement, this *Guide* will be updated and revised continuously. Changes will be made in the *Guide*, including revision to the protocols as well as the addition of new protocols, and these changes will be reflected on the WASC website. Institutions interested in WASC's international accreditation are responsible for consulting the website to ensure that they are referring to the current, and thus applicable, *Guide*. Institutional representatives are encouraged to consult with the Senior Advisor for International Affairs at WASC for assistance in using the *Guide* and discussing how it might apply to the institutions' goals for accreditation and quality assurance in the global context.

Approved by the Commission February 24, 2012

Current Revision: June 19, 2012

Appendix One

Western Association of Schools and Colleges
Accrediting Commission for Senior Colleges and Universities
Initial Application for Institutions Incorporated or Operating
Primarily Outside the United States
Seeking Eligibility Under WASC Standards

Note: Institutions are required to submit the Initial Application via LiveText (www.livetext.com). Once the institution's Initial Application fee has been deposited, WASC will provide the ALO with a username and password to access LiveText, as well as detailed instructions on how to submit the document. If your institution for some reason cannot access LiveText, the ALO should contact the Senior Advisor for International Affairs at WASC to determine how best to submit the application.

Name of institution:

Nation, province, and city of primary location:

Does the institution operate in other locations? If yes, list all sites (nation, city), the name of programs for which a degree or other formal credential is awarded, and the number of enrolled students for each of the following:

Regional center or campus(es):

Other-off-campus sites:

Distance education via electronic means:

Distance education via correspondence:

Total enrollment for all sites: Headcount: % Enrolled full-time:

 How many are undergraduate: Headcount: % Enrolled full-time:

 How many are post-baccalaureate: Headcount: % Enrolled full-time:

Date established (first admitted students):

Institution Type (Choose one):

Government (i.e., public or publicly supported):

For-Profit:

Non-Profit:

Other(please explain):

Sponsorship (if owned or controlled by some other entity such as a company, religious organization or individual):

Approval to operate authorized by:

Date of initial approval:

Date of most recent approval:

Describe the academic calendar:

If the institution's transcript shows credits or credit hours, explain how credits (i.e., hours of time in class per credit) are defined:

Name and title of chief executive officer:

Name and title of chief academic officer:

Name and title of chair or head of governing board:

Name and title of supervisor of CEO at sponsoring entity (if any):

Threshold Criteria

As explained in *A Guide toward WASC Accreditation for Institutions Incorporated or Operating Primarily Outside the United States*, the initial application asks an institution interested in WASC accreditation to reflect on whether its own mission, values, and national contexts are consistent with those espoused by WASC and, thus, whether WASC is a viable option for meeting the institution's own needs. Responses to the following criteria will help the institution self-assess its own interests and readiness as well as provide WASC staff with the information they need to work effectively with institutional representatives toward attaining accreditation. Because accreditation is voluntary, WASC does not impose the standards, values, or qualities that define its community. Instead, institutions seek to join the WASC community because they share these values.

Please address each of the following criteria succinctly and candidly, appending whatever documentation or supplemental information may be useful. Please note that if an applicant institution does not meet each of the threshold criteria at the time of filing this application but intends to do so and is prepared to address the criteria requiring adjustments during the diagnostic visit, it may proceed with an application by identifying areas where adjustments may be required. *Please limit responses to each criterion to less than 200 words.* The purpose of this application is to provide the basis for further dialogue and discussion. It is not expected to address all concerns or issues in detail but let the institution know that it can (eventually) meet the principles reflected in the following questions and permit WASC staff to understand enough about the institution's current practices as to engage in a useful dialog about whether to proceed to the next stage. Replies need be neither lengthy not exhaustive.

1. Please describe the **process** the institution has used to assess whether its own mission and objectives are a good fit with WASC? **Who was involved** in the process? What areas of concern were identified?
2. What **information or evidence** can the institution offer that it accepts and can follow WASC principles for:
 - a. Operational integrity (if this term is not familiar, please review WASC policies and specifically its Standards and Criteria for Review)
 - b. Sound business practices (such as financial audits, explicit procedures to ensure data integrity, and adequate professional staff)
 - c. Honesty in communicating with governmental or voluntary accrediting bodies
 - d. Ethical conduct of institutional officers

Information or evidence might include public or published policy statements, reports issued by authorizing or accrediting bodies, or declarations from the CEO and head of the governing board that WASC principles are observed. These statements need not be provided at this stage, but the institution should indicate whether or not the necessary documentation can be provided at a later time.

3. Can the institution commit to providing all **necessary documentation in English** for the initial diagnostic visit and the subsequent, more focused and detailed, visits required for Eligibility and Candidacy? Has the institution reviewed the WASC Compliance Audit and determined that it can provide required documentation in English? Can the institution commit to providing **translation as needed for on-site interviews**?
4. Can the institution provide all documentation to WASC in **electronic form**? Will it be able to complete on-line forms in the current WASC format (please review the WASC website to ensure that it can comply with this requirement)? Can institutional officials **communicate via email**? Via telephone? Via Skype or similar video conferencing? Are there any technical limitations of which WASC should be aware? Are there any governmental or sponsoring agency requirements that might restrict or limit communication via electronic means?

5. Provide copies of the institution's statements regarding each of the following:
 - a. **Mission statement** (along with vision and values statements, if any)
 - b. **List of degrees offered by name** of degree (including major or field) and **by level** (associate, baccalaureate, master's, post-baccalaureate doctorate, or PhD)
 - c. A summary statement (i.e., self-assessment) of the extent to which **learning objectives** are defined for each degree (for both the major or field of study and institution-wide objectives)
 - d. For baccalaureate degrees, a statement of the institution's requirement for an "integrated course of study of sufficient breadth and depth to prepare graduates for work, citizenship, and a fulfilling life" (WASC Criterion 2.2a under its Standards for Review). Most often referred to as the "**general education requirement**," this statement should provide the underlying expectation for what all graduates at the baccalaureate level are expected to be able to know and do regardless of their specific field of study or major. If the institution does not have the equivalent of a general education requirement, please explain how it would expect to meet Criterion 2.2a by the time the institution is evaluated for Eligibility.
6. Provide data on **how many students—by gender—have graduated** in each major or field of study at each degree level in each of the past five years.
7. For any degree for which half or more of the course work (credit hours) may be completed via **distance learning** technologies (electronic as well as print correspondence), list the degree, the delivery mechanism, and the process by which students are evaluated and operational integrity is ensured.
8. For any degree for which half or more of the course work (credit hours) may be earned at a site away from the main campus, describe how operational integrity is ensured.
9. Provide summary evidence of **financial sustainability**, such as an audited financial statement, a published annual report containing detailed financial information, or a report from a governmental agency or accrediting body that has assessed financial sustainability. Eventually, the institution will have to provide evidence that it observes financial and auditing practices that conform to or are the equivalent of generally accepted accounting practices of the United States. While documentation is not required for this initial application, the institution should report on its ability to eventually meet this requirement by the time of submitting the Compliance Audit and consideration for Eligibility.
10. Provide a statement that the institution is not under **any current sanction** from any agency that has jurisdiction over the institution or its programs, including any other

domestic or international accrediting agency. If the institution is under sanction or has a negative finding, provide a copy of the sanction and indicate how the institution is responding to address the finding.

11. Provide a copy of the institution's policy on **academic freedom**. If such a statement does not exist, provide a statement and self-assessment of the ability of faculty, staff, and students to pursue freedom of inquiry and freedom of expression *within* the institution. If issues regarding academic freedom and freedom of expression may exist outside the institution due to government or cultural restrictions, explain what these issues are and how the institution can minimally ensure these necessary freedoms within its own academic environment.
12. Provide a statement of the institution's policy on plagiarism and **academic integrity** for students, faculty, staff and administrators. If such a statement does not currently exist, will the institution commit to creating, publishing, and honoring such a statement?
13. Provide a statement of the institution's policy on **freedom from discrimination** within the institution based on gender, age, ethnicity, nationality, religion, or physical ability. If there are issues with regard to nondiscrimination in these specific areas of concern, please explain how the institution can ensure an environment free from discrimination *within* the institution even if such guarantees cannot be provided in the culture and country at large. If such a statement does not currently exist, will the institution commit to creating, publishing, and honoring such a statement?
14. Provide a copy of the institution's **public statement** with regard to each of the following (or provide a copy of an overall institutional policy that ensures public **accountability and transparency** with regard to each):
 - a. Admission requirements
 - b. Graduation requirements
 - c. Tuition and any other charges to students
 - d. Grievance procedures for students, faculty and staff respectively
 - e. Retention and graduation rates for all degrees offered at all levels

If public statements do not exist for one or more of these areas, explain how the institution can provide public accountability by the time the institution would be considered for Eligibility. If there are governmental or other restrictions that might limit transparency, please explain.

15. Provide a statement that the institution, once it is approved for Candidacy, will **participate in WASC activities**, including workshops that may be required for institutional representatives in order to prepare for or remain current with regard to accreditation. Given the costs of international travel, it may not be feasible financially to involve large numbers of faculty or administrators in meetings at WASC offices or conferences, but the institution should commit to engaging in a sufficient level of

activity as to make membership mutually beneficial. To the greatest extent possible, WASC will work with institutions located outside the United States to participate in committees and other on-going WASC work via electronic means. However, the institution must commit to a minimal, necessary level of participation to ensure continued viability as an accredited member.

16. Provide a statement that the institution will follow WASC policies and directives on how the institution's status with regard to each stage of **accreditation may be stated publicly**.

As noted, if an institution cannot provide the documentation or evidence for having met each of these threshold criteria but has discussed all of the criteria and determines that it will make adjustments necessary to comply with the WASC principle by the time of filing for Eligibility, this self-assessment should be stated. It is not expected that all criteria will have been met by the time of institutional application, only that the institution understands fully what is required and will begin to prepare for meeting all of the expectations. Each of these criteria will be reviewed by the Senior Advisor for International Affairs who, in turn, will discuss them with the institution's designated representative before determining whether or not the institution is ready for a diagnostic visit. As appropriate and necessary, specific issues may be addressed in detail during the diagnostic visit.

At the time this Initial Application is submitted, the institution must also file a statement signed by both the Chief Executive Officer and the chair of the governing board indicating that the board has discussed the application and is fully aware of the implications of seeking accreditation through WASC. The institution may provide this information in a form of its choosing. A sample or draft statement is provided in the *Guide* as Appendix Two.

See the ***User Guide to Submitting the Initial Application for International Institutions*** for more information on how to submit the completed application. When the final version of the application is submitted via LiveText, the Senior Advisor for International Affairs will be notified and begin review of the application. Institutions that are unable to use LiveText should send the materials electronically as attachments to William Plater at wplater@wascsenior.org. If an institution cannot submit materials electronically in any form, then the ALO should contact William Plater for instructions on how to proceed.

Concurrent with submission of this application, the institution must provide a non-refundable initial application fee of \$5,000 payable in United States currency. Please contact Chris Castagnola, Finance and Operations Manager, ccastagnola@wascsenior.org or +01-510-995-3165 to arrange for payment. Instructions on how to submit the Initial Application and the password will be provided to the ALO only after receipt of the payment. The application cannot be processed until the application fee has been received.

Appendix Two

Stipulations by Chief Executive Officer and Chair of the Governing Board

Sample Statement

Upon submitting the initial application for accreditation, the institution must also provide evidence that the institution is seeking consideration for accreditation with the knowledge and support of the governing board. In a separate letter or by adapting this sample form, the institution's chief executive officer and the person who is the chair or leader of the governing body with final fiduciary responsibility for the operation of the institution must both stipulate that at least the four identified acknowledgements stated below have been considered by the full board. This sample is provided for the convenience of the institution.

TO: WASC Accrediting Commission for Senior Colleges and Universities

As the Chief Executive Officer and as the Chair of the Governing Board for (Name of Institution), we each stipulate the following:

1. The full Governing Board has discussed the institution's seeking accreditation through WASC and acted as a board on (Date) to approve proceeding with an initial application.
2. The Governing Board has reviewed the expectations for WASC accreditation and for the conduct of members of the WASC association and is prepared to accept responsibility to operate (Name of Institution) in conformity with WASC policies and standards.
3. The Governing Board is committed to following WASC policies with regard to such matters as addressing complaints, submitting proposals for substantial changes in programs or operations of (Name of Institution) to WASC for review prior to implementation, seeking prior approval for new degrees before implementation, and all other such matters as outlined in WASC policies and it will also hold its Chief Executive Officer responsible for observing this commitment.
4. The Governing Board and the Chief Executive Officer acknowledge that favorable action at one stage of WASC consideration does not predict or obligate any subsequent Commission action, that only the Commission itself may take final

action, and that all Commission actions are independent of any developmental work or capacity building recommended by WASC staff.

In certification that (Name of Institution) will honor these stipulations we are duly authorized by the Governing Board to record the institution's commitment as indicated by our respective signatures:

(Signature)
Printed Name
Title

Date

(Signature)
Printed Name
Title

Date

Appendix Three

Preparation for Diagnostic Visit by WASC Site Review Team

Materials Submitted Prior to the Visit

In consultation with the institution's designated representative, the Senior Advisor for international Affairs will develop a specific set of materials that will be expected prior to the diagnostic visit on site. Ordinarily, the requested materials should be provided in electronic form (provided either as links to websites or documents stored on a flash drive) not later than one month prior to the date of the visit. The Senior Advisor will also provide information to the institution's representative about how to provide the information to each member of the team.

Visit Schedule

The Senior Advisor will also work with the institutional liaison to develop a schedule for the team's visit. Materials required prior to the visit will in part be determined based on the schedule and the persons with whom the team will meet. The specific dates for the diagnostic visit must be set not less than two months prior to the visit; the actual schedule of meetings must be determined at least two weeks prior to the meeting and will be altered or revised by mutual agreement.

Institution's Preparation

The diagnostic visiting team will focus on assessing how the institution meets WASC Eligibility Criteria. This visit is not an eligibility visit. Instead, it is intended to assist the institution in determining how well prepared it may be for Eligibility and to provide WASC with a preliminary assessment of whether or not the institution may eventually meet WASC's expectations, whether in the near term or following additional institutional development. In requesting material to be provided in advance of the visit, the Senior Advisor will draw on two WASC resources, *International Application of the WASC Eligibility Criteria* and the *Compliance Audit Checklist*. The institution is not expected to—and, indeed, should not—provide all of the materials that will eventually be required. Consequently, the diagnostic visit will help establish what type and extent of documentation will be required. Accordingly, certain basic documents referenced by these two resources—both of which are provided below—will be required for review by the diagnostic team prior to their visit so as to orient them to the institution and to give them enough background so as to make the site visit effective and beneficial to the institution. However, to re-iterate: institutions are not expected to have completed the actual compliance audit as a part of the diagnostic visit; instead, certain documents that will eventually be required for the compliance audit will be helpful to members of the visiting diagnostic team and are thus requested for this purpose.

Team Report

The visiting team will prepare a report to the institution within one month of the visit. The report will be organized, in general, to address the Eligibility Criteria. By the time the team prepares the report it will need to have examined enough documentation or met with the proper institutional officials so as to be able to comment on the criteria.

Identifying Materials for the Diagnostic Visit

Information required for Eligibility and for the Compliance Audit overlap to a significant degree. Although much of the same information required for the diagnostic visit may also be required later in the process, the fact that the institution has assembled some of these materials for the diagnostic visit should facilitate later stages of documentation. Information highlighted in yellow in the two following statements is what the Senior Advisor for International Affairs will ordinarily request in advance of the diagnostic visit.

International Application of the WASC Eligibility Criteria

Context: This guide for exploring the implications of WASC Eligibility Criteria in an international context is not intended to support a decision as to whether a particular institution is in fact eligible. Its purpose is to create a sharper awareness of the issues that WASC would need to take into account as it applies its Criteria, Standards, and visit processes in cultural and socio-political environments that may differ from those of its current members. The goal is for the evaluation team to understand the underlying principle or value behind each Criterion, look for its “functional equivalency” in the international context, and identify any issues that would rise to the level of a policy, guideline, or special training requirement to be addressed by the Commission. The right-hand column suggests possible areas for discussion; it is not exhaustive.

Please also bear in mind that the Eligibility review is not a review under the Standards; it is verification that it is an institution WASC *could* accredit in terms of its structures, purposes, and strengths.

Items highlighted in **yellow** reflect matters the diagnostic team would expect to review in advance of the site visit and hence materials or documents related to these items should be provided by the institution at least one month prior to the visit, ordinarily in electronic form or with electronic access.

Current Eligibility Criterion Statement	Issues for International Applicants
<p>Criterion 1. Authority The institution is authorized to operate as an educational institution and to award degrees by the appropriate governmental organization or agency as required by each of the jurisdictions or regions in which it operates.</p>	<p>What is the agency or ministry that authorizes an institution of higher learning to offer degrees within this jurisdiction? Are its requirements known? Do these pose potential conflicts with WASC accreditation?</p> <p>Is the institution currently accredited by a local or regional agency? Is seeking WASC accreditation contrary to any policies of the authorizing or accrediting agency?</p> <p>What is the nature of governmental control, both official and unspoken?</p> <p>What is the nature of the institution's organizational structure: For-profit, non-profit, public, faith-based, government-sponsored? How does that structure align with US organizational taxonomies?</p>

<p>Criterion 2. Institutional Integrity: Purposes The institution's purposes are clearly defined and appropriate for higher education. They are formally adopted by the governing board and published in key institutional documents. Published statements reflect the institution's commitment to achieving student learning</p>	<p>What is the Mission Statement (in view of primacy of institutional mission in the WASC process)? What is the governing board's involvement in setting and sustaining the mission? How is transparency demonstrated? How is accountability maintained in terms of adherence to mission?</p>
<p>Criterion 3. Institutional Integrity: Alignment The institution offers academic programs and administrative support consistent with its purposes, and ensures a climate of openness and academic freedom. Institutions should prepare to demonstrate compliance with CFR 1.4 and Guideline: "The institution has published or has readily available policies on academic freedom. For those institutions that strive to instill specific beliefs and world views, policies clearly state how these views are implemented and ensure that these conditions are consistent with academic freedom. Due process procedures are disseminated, demonstrating that faculty and students are protected in their quest for truth."</p>	<p>Statements of academic freedom: What do they mean in their context? Are there potential restrictions on freedom of inquiry and expression arising from the local culture, government influence, religious traditions, political environment, or institutional mission? Does the institution practice discrimination against a protected class [using US categories] in terms of employment or admission? If so, what are the implications?</p>

<p>Criterion 4. Organizational Structure and Governance</p> <p>Institutional Type: Private institutions, whether organized as non-profit or for-profit corporations or as partnerships, will present policies and planning documents making it clear that decisions about the distribution of surpluses or profits give priority to sustaining and enhancing the educational mission and academic infrastructure of the institution, and to ensuring effective student learning and student success.</p> <p>Sustainability: The Commission does not accredit individuals or sole proprietorships. The ownership structure of an organization demonstrates that it is sustainable beyond the life or competency of any one member or investor and will remain in compliance with all applicable laws and WASC requirements during transitions of any members, owners, or investors.</p> <p>Accountability: The institution has a functioning governing board (or the equivalent) responsible for the quality, integrity, and financial sustainability of the institution and for ensuring that the institution's mission is being achieved. The governing board is an independent policy-making body capable of reflecting constituent and public interest through its membership, activities, and decisions. The board must demonstrate its responsibility for, and involvement with, strategic planning for the development of the institution through and beyond the period necessary for accreditation. As evidenced by both its bylaws and its practice, the board must demonstrate that it has the authority to evaluate the chief executive officer's performance, including setting the terms of the CEO's contract and renewing or terminating the contract as may be necessary. A majority of the board members must not be employed by the institution; be family members related to the chief operating officers, shareholders, or trustees of the institution; or have a personal financial interest in the institution. Its membership must be sufficient in size and composition to fulfill board responsibilities. The board must demonstrate that it has functioning committees, including at a minimum audit, academic affairs, finance, and membership or nominating or the equivalent. If a separate institutional governing board is not possible or appropriate, the Commission may approve alternative means by which this criterion may be met. Neither the chief executive officer nor another institutional executive officer may serve as the chair of the institution's governing board. If the applicant is a proprietary institution and the chief executive officer is also an owner or investor, the bylaws must clearly designate that the board has the authority to appoint, evaluate and, if necessary, terminate this officer.</p>	<p><i>[Issues of "location" would not apply in this context.]</i></p> <p>What are the procedures by which the governing board is constituted and sustained? If by political appointment, is independence compromised?</p> <p>Are the interests of the institution's governing body and of its educational mission protected from undue contrary or external influences?</p> <p>Are there indications of unethical practices within the culture, such as pervasive nepotism, bribery, political favoritism, etc.?</p> <p>To what extent is the concept of a governing board understood and practiced within the HE culture?</p> <p>Is board development defined and operational?</p> <p>Does the board show evidence of understanding both its responsibilities and its limitations as typically understood and practiced in American higher education?</p> <p>Is there an operative legal infrastructure within which an institution can be held accountable for legal and ethical practice?</p> <p>Does any government agency have the authority to close an institution without notice or due process? If so, what would happen to students and the credits they have earned?</p> <p>Does the institution have an historic or a current formal relationship with any WASC-accredited institution? If so, what is the nature of this relationship?</p>
<p>Criterion 5. Chief Executive Officer</p> <p>The institution has a chief executive officer who is appointed by the governing board and whose full-time or primary responsibility is to the institution</p>	<p>What are the CEO's qualifications?</p> <p>How is the CEO appointed, evaluated, developed?</p> <p>To what extent is the CEO aware of, and interested in, the WASC accreditation process?</p>

<p>Criterion 6. Administrative Capacity The institution has a chief financial officer whose full-time or primary responsibility is to the institution, and sufficient staff with appropriate preparation and experience to provide the administrative services necessary to conduct and support its affairs and the achievement of its purposes</p>	<p>What are the CFO's qualifications? Are the appropriate to the task? CFO is not the CEO: Accountability "checks and balances" – is this clear and practiced? How does the institution understand and define it support staff?</p>
<p>Criterion 7. Operational Status It must be clear that institutional planning and resources are sufficiently mature to ensure that, by the time of the Candidacy review, the institution will be operational with students actively pursuing its degree program(s).</p>	<p>This is not typically an issue, since WASC will consider only international institutions that are operational, with a record of graduates, for accreditation. Look for evidences of maturity in terms of policies and procedures.</p>
<p>Criterion 8. Degree Programs: Extent Substantial portions of the institution's educational offerings are programs that lead to degrees, and significant proportions of its students are enrolled in the degree programs</p>	<p>Ensure that the institution is degree-granting, not offering only certificates or is a generic NGO, etc.</p>
<p>Criterion 9. Degree Programs: Quality The institution's degree programs are congruent with its purposes, are based on recognized higher education fields of study, are of sufficient content and length, and are conducted at levels of quality and rigor appropriate to the degrees offered. At least one degree program must lead to the baccalaureate degree or higher. Institutions seeking to offer graduate degrees must be able to demonstrate that they have an appropriate graduate-level academic culture or have plans to develop a graduate culture. Relevant factors include faculty qualifications and workload, research support, access to library and other research facilities, and explicitly stated thesis or dissertation requirements.</p>	<p>Does the institution's higher education context recognize an American-style degree taxonomy? For example, does a BA or MA approximate the level, scope, and rigor of their US counterparts?</p> <p>What evidence is available that the institution's degrees have been internationally recognized by US institutions or by equivalency-rating agencies?</p> <p>Are the degree programs capable of being peer-reviewed? Are there established procedures for program review? Do they include peer participation?</p>
<p>Criterion 10. Educational Objectives and Student Learning The institution clearly defines and publishes educational objectives for each program, including expected student learning outcomes, and identifies how these objectives and outcomes will be addressed within the curriculum. Strategies for assessing students' achievement of these educational objectives, including direct review of student work products, are also established.</p>	<p>To what extent are student learning outcomes understood and incorporated into the curriculum, pedagogy, and assessment practices of the institution?</p> <p>What is the level of understanding regarding assessment of student work – beyond assigning letter grades?</p>
<p>Criterion 11. Academic Credit The institution awards academic credits based on generally accepted practices in degree-granting institutions of higher education.</p>	<p>Does the institution use academic credits/units as the metric for learning? If so, are they comparable to the Carnegie unit? Or is it competency-based? Any evidence that other entities recognize the credits at par value?</p>
<p>Criterion 12. Transfer Credit If the institution accepts transfer students, it has established policies for the review and acceptance of transfer credits consistent with WASC policies.</p>	<p>Are there developed and uniformly applied policies? Do any of the policies restrict incoming transfers by institution or type?</p>

<p>Criterion 13. General Education The institution defines and incorporates into all of its undergraduate degree programs a substantial component of general education, including both lower- and upper-division offerings, designed to ensure basic collegiate skills, breadth of knowledge, and the structures of intellectual inquiry. Educational objectives for the general education program, which include student learning outcomes, are periodically reviewed and revised with faculty involvement, and include demonstrated competence in writing, critical thinking, scientific literacy, computational skills, and an introduction to the broad domains of knowledge. Degree credit for general education programs should be consistent with levels of quality and rigor appropriate to higher education. Institutions implementing a baccalaureate degree-completion model, inverted curriculum (in which career-related courses are completed first, with general education courses being taken in the final years), or other curricular format that relies on students transferring significant portions of general education from other institutions, must describe the criteria or overall philosophy of general education by which it determines which general education credits it will accept from other institutions toward its baccalaureate degrees.</p>	<p>Many countries do not follow the American tradition of defining the baccalaureate to include the liberal arts focus of “General Education.” In such settings:</p> <ul style="list-style-type: none"> • Are similar competencies required? • Are the SLOs defined within a set of courses or are they integrated and mapped across the curriculum? • Is there a “GE Equivalent” for the BA? Is it congruent with the mission? How is its functional equivalent determined and assessed? • Are there institution-wide learning objectives expected of all students? If so, how are they determined and assessed? <p>Some countries offering the 3-year baccalaureate require a 13th year of high school for admission, rather than the typical 12-year curriculum. Is this practice followed? What are the implications?</p>
<p>Criterion 14. Faculty The institution has a substantial core of qualified faculty, sufficient in size, background, and experience to support all of the institution’s educational program offerings, including a core of faculty whose primary responsibility is to the institution. A clear statement of faculty responsibilities must exist, which include the development and review of the curriculum, and assessment of student learning at multiple levels.</p>	<p>What are the policies related to faculty recruitment, credential review, workload, definition (FT, PT, adjunct), etc.? What levels of understanding about assessment are in evidence among the faculty? Is there a culture of faculty “ownership of the curriculum” at the institution? What is the understanding of “faculty governance” at the institution?</p>
<p>Criterion 15. Student Services The institution provides for all of its students appropriate student services that support student learning, persistence, and development consistent with their characteristics and its institutional purposes.</p>	<p>Does the Student Services staff embrace responsibilities for student success? Do they track data on retention and graduation rates? What are the typical staffing and job description characteristics?</p>
<p>Criterion 16. Admissions The institution has adopted and adheres to admission policies consistent with its purposes that specify the qualifications of students that are appropriate to the degree levels offered.</p>	<p>Are admissions criteria intended to predict success in the program? What are the bases for selection? Would WASC accreditation have any potential impact here?</p>

<p>Criterion 17. Information and Learning Resources The institution holds or otherwise provides long-term access to sufficient information and learning resources to support its purposes and all of its educational programs. To supplement resources beyond the core library of the institution, there may be specific long-term written arrangements for student access to off-campus or electronic resources. Programs are in place to train students in the use of library and other information resources, and to develop information literacy skills. The institution must demonstrate that library and learning resource use is a fundamental part of all its curricula, and that the faculty is involved in ensuring such use.</p>	<p>Are online learning resources used? To what extent? What is the perception of “information literacy?” Does the faculty understand its role in designing assignments that require library-related competencies and in determining library collections relative to learning outcomes?</p>
<p>Criterion 18. Financial Resources The institution documents a viable funding base, financial resources, and plans for financial development adequate to support its purposes and educational programs and to ensure financial stability. It is expected that an operating institution not show a cumulative operating deficit for the current and preceding two years, or since its inception if less than two years. If the institution shows a deficit, the institution must explain the reasons for the deficit, demonstrate that it has the resources to ensure its financial viability, and present a plan to restore a fiscally healthy state.</p>	<p>What is the funding base? How might it differ from traditional WASC financial configurations? Are there political implications, threats of instability, hidden sources of revenues, or other unusual financial factors? Any records of recent financial distress? Does the government tax or otherwise exercise some form of financial control?</p>
<p>Criterion 19. Financial Accountability The institution annually undergoes and makes available an external financial audit by a certified public accountant or an audit by an appropriate public agency. The institution shall submit a copy of each of the two most recent audited financial statements and management letters (if any). The audit must (1) be prepared by an outside certified public accountant that has no other relationship to the institution; (2) be certified and any exceptions explained; and (3) specify whether any capital or operational funds have been provided by employees or Board members of the organization and describe any conditions related to such provisions.</p>	<p>What are the accounting practices in the region? Is an external audit a common and meaningful practice? Is the entity that WASC would accredit a defined stand-alone entity, or is it part of a larger system in which it may be difficult to parse out the financial strength and integrity of the entity WASC would accredit? What are the implications?</p>
<p>Criterion 20. Institutional Planning The institution provides evidence of basic planning for the development of the institution, which identifies and integrates plans for academic personnel, learning resources, facilities, and financial development. The institution also has established procedures for program and/or unit review, including methods for assessing student learning and the attainment of educational goals, and for using the data obtained from institutional research to support planning for institutional improvement.</p>	<p>Is “planning” understood in terms that are familiar to American educators? If not, what are the implications? What are the enrollment projections for the next 5 years? How does the institution plan for and respond to enrollment shifts?</p>
<p>Criterion 21. Institutional Evaluation and Assessment of Student Learning The institution actively engages in, or has a plan in place to systematically engage in, the evaluation of how well and in what ways it is accomplishing its purposes related to student learning and educational effectiveness.</p>	<p>Program Review is a core WASC expectation; what does it mean and what forms does it take in other academic cultures? What are the characteristics of a defined Institutional Research function?</p>

<p>Criterion 22. Public Information The institution publishes in its catalog, or in other appropriate places, accurate and current information that describes its purposes and objectives, admission requirements and procedures, financial aid policies and procedures, rules and regulations directly affecting students, programs and courses, degrees offered and the degree requirements, costs and refund policies, formal and informal grievance procedures, financial aid policies, academic credentials of faculty and administrators, and other items relative to students' attending the institution or withdrawing from it.</p>	<p>Many US policies are linked to federal financial aid; are there comparable policies in this environment?</p> <p>Are students' interests and rights-to-know protected through recognized policies?</p>
<p>Criterion 23. Relations with the Accrediting Commission The governing board provides a formal statement as part of its Eligibility Application that the institution agrees to adhere to these Eligibility Criteria, describe itself in identical terms to all of its accrediting agencies, promptly communicate any changes in its status, and disclose any and all information required by the Commission to carry out its accrediting responsibilities. Such information includes actions taken by governmental bodies and other accrediting agencies, including investigations, reports, and legal actions taken by or against the institution. Further, the institution agrees that in pursuing Candidacy and Initial Accreditation, it is committed to abiding by the Standards, Policies, and Procedures established by WASC.</p>	<p>How is the governing board involved in this exploration?</p> <p>How can WASC be confident that these commitments of candid disclosure can be sustained across distances of geography and culture?</p>
<p>Additional Considerations for International Applicants (These were discussed but not formally adopted by the Commission)</p>	
<p>1. Compelling Benefit: The institution's mission and strategic purposes should align clearly with compelling reasons to support the institution's seeking WASC accreditation. It must be clear to a review panel that the institution understands and desires the extensive institutional impact of the review process and can persuasively articulate to its stakeholders its reasons for seeking WASC accreditation sufficient to justify its expenditure of resources.</p>	<p>In what way does the institution articulate and verify its interest in pursuing WASC accreditation? Is the interest in accreditation demonstrated broadly within the institution? What are the dominant reasons being expressed in support of seeking WASC accreditation? Are they informed?</p>
<p>2. Language of Instruction: Institutions outside the United States that seek WASC accreditation are expected to offer their curriculum in languages that best serve their primary student populations. Institutions should be able to provide a review panel with sufficient required materials in English to support evaluation by a WASC eligibility panel, by subsequent site teams, and by the WASC Commission. This can be through certified document translations or use of qualified translators during interviews.</p>	<p>Some regional agencies will not accredit institutions unless the curriculum is entirely in English. What are the implications of extending WASC accreditation into a partially or entirely non-English venue?</p>

<p>3. Financial Commitments: Over and above the typical costs associated with WASC accreditation, including some surcharges on dues and fees, and costs for report preparation and site visits, an institution must demonstrate both the commitment and the capacity to sustain additional costs related to international accreditation. These costs may include international travel – for teams traveling to the institution and institutional representatives traveling to participate in Commission meetings and educational events – and costs related to staff and/or consultants’ expenses to ensure institutional readiness for each review. Such commitments must anticipate the multi-year, multi-visit process associated with obtaining and reaffirming WASC accreditation.</p>	<p>Could the institution create something like a pro forma budget that takes these costs into account for the full span of time for their WASC engagement?</p>
<p>4. Operational Status: In order for site teams to be able to evaluate the largest possible range of its operational dimensions, an applicant institution must be fully operational and have graduates from at least one of its degree programs to be considered.</p>	<p>See Criteria 7, 8, above</p>

Compliance Audit Checklist

NOTE: Only certain items from the audit checklist are requested for the diagnostic visit and these are highlighted in **yellow**. The full compliance audit documentation will not be required until after the institution moves forward to Candidacy and Initial Accreditation.

Name of Institution: _____

Diagnostic Visit Date: _____

Instructions to Institution:

The items highlighted in **yellow** below are suggested as items the diagnostic visit team would find useful to review in advance of the site visit—if possible. The visiting team does not expect all documents to be available; the diagnostic visit is merely a preliminary review. Please provide a link to each document designated below whenever possible; if there is not an internet link but the document is available as an electronic attachment, please forward the attachments. Be sure that the reviewer will be able to see where this document is published. If you do not have the exact document that is specified but have some comparable document, please provide a link to that document.

WASC will conduct the required formal compliance audit for all accredited institutions at each stage of Candidacy and Initial Accreditation, when an institution has been placed on sanction, and at other times as deemed appropriate by the Commission. In subsequent reaccreditation reviews, you will be asked to update the documents that have been revised.

Instructions to the Diagnostic Team:

These items—whenever available—will be provided to assist you in assessing how ready the institution is to move forward toward applying for eligibility. Only selected items are requested at this preliminary stage of review. Please do not request any more materials than necessary to conduct this readiness review.

CFR	Documents Required	Link to Website or Document Portfolio	WASC Check
1.1	Mission statement		
1.2	Educational objectives at the institutional and program levels		
1.2.1	Public statement on student achievement (retention/graduation, student learning)		
1.3	Organization chart (Also see 3.8, 3.9, 3.10)		
1.4	Academic freedom policy		
1.5	Diversity policies and procedures; procedures for accommodations re disabilities		
1.6	Documents setting forth the authority of a corporate, governmental, religious organization or system that is affiliated with the accredited institution	-	-

CFR	Documents Required	Link to Website or Document Portfolio	WASC Check
1.7	Catalog (online ____, hard copy ____) with complete program descriptions, graduation requirements, grading policies (X 2.10.1)		
1.7.2	Student complaint and grievance policies		
1.7.2.1	Grade appeals policy		
1.7.2.2	Records of student grievances		
1.7.3	Faculty grievance policies		
1.7.3.1	Record of faculty grievances		
1.7.4	Staff grievance policy		
1.7.4.1	Record of staff grievances		
1.7.5	Employee handbook, if available		
1.7.6.1	Up-to-date student transcripts with key that explains credit hours, grades, levels, etc.		
1.7.6.2	Admissions records that match stated requirements; complete files		
1.7.6.3	Policies and procedures to protect the integrity of grades		
1.7.6.4	Tuition and fee schedule		
1.7.6.5	Tuition refund policy		
1.7.6.6	Policy on credit hour/award of credit; processes for review of assignment of credit; review of syllabi/equivalent for all kinds of courses		
1.7.6.7	Policy on human subjects in research, if applicable		
1.8	Independent annual audits of finances (also see CFR 3.5)		
1.9	Policies to ensure that WASC substantive change policies are followed		
1.9.1	Documents relating to investigations of the institution by any governmental entity and an update on the status of such investigation		
1.9.2	List of pending legal actions by or against the institution, including a full explanation of the nature of the actions, parties involved, and status of the litigation		
2.1	List of degree programs, showing curriculum and units for each (also see CFR 1.7)		
2.2	Syllabi for all courses offered		
2.2.1	For associate and bachelor's degrees: General education requirements (Also see CFR 1.7)		
2.3	Student learning outcomes for every program		
2.4	Grading standards	-	-
2.5	Class participation policies if available	-	-
2.6	Placement data if available	-	-
2.7	Program review process/guidelines		
2.7.1	Schedule of program review (including reviews of non-academic units)		

CFR	Documents Required	Link to Website or Document Portfolio	WASC Check
2.8	Policies re faculty scholarship and creative activity		
2.9	-	-	-
2.10	-		
2.10.1	Data on retention and graduation, overall and disaggregated (link to the standard templates for retention/graduation reports)		
2.10.2	Collection and analysis of grades at the course or program level, as appropriate		
2.10.3	Policy on student evaluation of faculty		
2.10.4	Forms for evaluation of faculty by students		
2.11	List of student services and co-curricular activities		
2.11.1	Financial aid policy and procedures		
2.12	Academic calendar (also see CFR 1.7 catalog)		
2.13	Recruitment and advertising material for the last year, including scripts for recruitment		
2.13.1	Procedures for students to register		
2.14	Policy on transfer of credit		
3.1	Staff development policies		
3.2	List of faculty with classifications, e.g., core, full-time, part-time, adjunct, tenure track, by program (link to relevant data exhibit)		
3.3	Faculty hiring policies if available		
3.3.1	Faculty evaluation policy and procedures (Also see CFR 2.10)		
3.3.2	Faculty handbook or equivalent		
3.4	Faculty development policies		
3.4.1	Faculty orientation policies and procedures		
3.4.2	Policies on rights and responsibilities of non-full-time faculty		
3.4.3	Statements concerning faculty role in assessment of student learning		
3.5	Last two years audited financial statements (Also see CFR 1.8)		
3.5.1	List of financial records maintained		
3.5.2	Last two years' financial aid audits		
3.5.3	Last federal composite score if applicable		
3.5.4	Last report of two- and three-year cohort default rates		
3.5.5	Campus maps		
3.6	Inventory of technology resources for students and faculty		
3.6.1	If online or hybrid courses, information on delivery method		
3.6.2	Library data/holdings, size		
3.7	Inventory of technology resources and services for staff		
3.8	Organization chart (Also see CFRs 1.3 and 3.1)		
3.9	List of governing board members		

CFR	Documents Required	Link to Website or Document Portfolio	WASC Check
3.9.1	Governing board member biographical information		
3.9.2	List of governing board committees with members		
3.9.2.1	Minutes of board meetings for last two years		
3.9.2.2	Governing board bylaws and operations manual		
3.10	CEO biographical information		
3.10.1	CFO biographical information		
3.10.2	Other senior administrators' biographical information (e.g., cabinet, VPs, Provost)		
3.10.3	Policy and procedure for the evaluation of president/CEO		
3.11	Faculty governing body charges, bylaws and authority if applicable		
3.11.1	Faculty governance organization chart if applicable		
3.11.2	Minutes of the last year's faculty meetings		
4.1	Strategic plan		
4.1.1	Operations plan		
4.1.2	Academic plan		
4.1.3	Technology plan		
4.1.4	Facilities plan		
4.2	Description of planning process		
4.2.1	Process for review and monitoring of strategic plan/metrics		
4.3	-	-	-
4.4	New program approval process		
4.4.1	Program review process (Also see CFR 2.7)		
4.5	Description of institutional research function and staffing		
4.6	Process for review and analysis of key data, such as retention, graduation (Also see CFR1.2)		
4.7	-	-	-
4.8	List of major industry or other advisory committees		

Appendix Four

Timeline for WASC Accreditation

The time involved in moving through the various stages of accreditation can vary greatly contingent on a number of factors, including the institution’s own readiness and ability to move forward. WASC makes every effort to respond in a prompt and timely manner at each stage of review. Some actions depend on scheduled meetings of the Commission (which ordinarily occur only twice a year) as well as peer review committees. Due to special arrangements for preparation and travel, longer time intervals for international accreditation may be necessary. WASC staff will work with the institutional representatives to arrange for reviews and other interactions at times that can meet the institution’s needs while ensuring adequate time for effective reviews. The following outline of the steps involved in accreditation may help institutions plan their engagement with the WASC process. Each stage and step matches those described in detail in a prior section of the *Guide*.

Stages and Steps	Estimated Time Required
Stage I: Initial Inquiry and Application	
Step 1: Initial Inquiry to WASC	Open—institution’s discretion
Step 2: Initial Application a. Address threshold criteria b. Provide stipulations a. Remit fee	Open—institution’s discretion
Step 3: Review by WASC	Typically 1 month, but within 2 months
Stage II: Diagnostic Visit	
Step 4: Institutional Report a. Institution prepares report b. Remit fee	Open—institution’s discretion (due 1 month prior to site visit)
Step 5: Diagnostic Visit	Open—date set at least 2 months prior to visit
Step 6: Report from Visiting Team	One month following visit
Stage III: Eligibility	
Step 7: Eligibility Application a. Application filed b. Remit fee	Typically 3 or more months following the Diagnostic Visit
Step 8: Eligibility Review Committee (ERC)	
a. ERC panel meets by conference call, takes action; institution joins call	Typically 1-2 months after receipt of application
b. Committee action letter	Typically 1 – 3 weeks following ERC panel acts
c. Planning session with WASC liaison	Typically 1 – 4 weeks following positive action

Stage IV: Candidacy	
Step 9: File application for candidacy	1-6 months following action letter
Step 10: Candidacy Review	
a. File Letter of Intent (LOI)	Typically within 6 months of action letter
b. WASC staff liaison review; gives feedback	1 month or less
c. Submission of CPR self-study	Typically 9 months following LOI review but no later than 3 months prior to the visit
Step 11: CPR Site Visit	As arranged; typically 12 months after Step 10a above
Step 12: CPR Team Report	
a. Draft prepared	2-4 weeks
b. Institution reviews team draft	1-2 weeks
c. Final report issued to staff	In timely manner
d. Staff approves moving to EER visit	30 days following receipt of report
Step 13 EER Site Visit	Typically 12 – 18 months following Candidacy
a. Submission of Self study	3 months prior to visit
Step 14: EER Team Report	
a. Draft prepared	2-4 weeks
b. Institution reviews team draft	1-2 weeks
c. Final report issued to Commission	In time for next Commission session
d. Commission grants Candidacy, sends official letter	Within 30 days following Commission’s action
Stage V: Initial Accreditation (similar pattern to Candidacy unless accelerated)	
Step 15: Submission of CPR self-study for Initial Accreditation	Typically 2 -3 semesters following Candidacy but no later than 3 months prior to the visit
Step 16: CPR Site Visit	As arranged
Step 17: CPR Team Report	
a. Draft of team report prepared	2-4 weeks
b. Institution reviews team draft	1-2 weeks
c. Final report issued to Commission	In time for next session
d. Commission approves moving to EER visit	Letter sent 30 days following action
Step 13 EER Site Visit	Typically 12 – 18 months following CPR visit
b. Submission of Self study	3 months prior to visit
Step 14: EER Team Report	
a. Draft of team report prepared	2-4 weeks
b. Institution reviews team draft	1-2 weeks
c. Final report issued to Commission	In time for next Commission session
Step 15: Commission acts to grant Initial Accreditation for period of 5 – 7 years	At its next session (often 2 – 5 months)

Total time from initial inquiry until initial accreditation can vary from as little as four years to a maximum of eight years all contingent on the institution's readiness and the steps it takes to prepare reports and ensure that necessary steps have been taken to address the Standards and the Criteria for Review. WASC staff work to adjust the timeline to meet the institution's own preferred pace of engagement and development while ensuring both quality and integrity in the review processes.

Appendix Five

Accelerated Timeline for Accreditation

Well established international institutions may be eligible for an accelerated review process. In all cases, Stages I, II, and III are required as outlined in the standard timeline for accreditation (see Appendix Four). At Stage IV (Candidacy), there are two possible options for acceleration, and the conditions necessary for WASC's considering acceleration are described in the Guide. In summary, the two options are:

Option One

Upon the recommendation of the initial CPR team and WASC staff, the Commission may authorize that the next review team will evaluate the institution for Initial Accreditation during its subsequent EER site visit. Following the second visit, the team may make one of several recommendations to the Commission: (a) Grant Initial Accreditation; (b) Deny Initial Accreditation and grant Candidacy; (c) Defer action pending further institutional preparation on a few issues that can be readily addressed, with the institution remaining in Eligibility status. Under the conditions of this accelerated process, if the institution is granted Candidacy rather than Initial Accreditation, it may not appeal the Commission's decision.

For institutions that are recommended for acceleration under Option 1, the Educational Effectiveness Review for Initial Accreditation will occur 12 to 18 months following the CPR visit. In addition, the onsite reviews for Initial Accreditation will ordinarily be expanded by one day. The Commission will take action only after the Educational Effectiveness Review. The following summary assumes that the visiting team recommends initial accreditation.

Stages and Steps	Estimated Time Required
Stage I: Initial Inquiry and Application	
Step 1: Initial Inquiry to WASC	Open—institution's discretion
Step 2: Initial Application	Open—institution's discretion
a. Address threshold criteria	
b. Provide stipulations	
c. Remit fee	
Step 3: Review by WASC	Within 2 months, typically 1 month
Stage II: Diagnostic Visit	
Step 4: Institutional Report	
a. Institution prepares report	Open—institution's discretion (due 1

	b. Remit fee	month prior to site visit
Step 5:	Diagnostic Visit	Open—date set at least 2 months prior To visit
Step 6:	Report from Visiting Team	One month following visit
Stage III: Eligibility		
Step 7:	Eligibility Application	
	a. Application filed	Typically 3 or more months following Diagnostic Visit
	b. Remit fee	
Step 8:	Eligibility Review Committee	
	a. Committee meets	Typically 1-2 months after receipt of application
	b. Planning session with WASC liaison	Within 1 month of favorable committee review
	c. Commission action letter	1 month following next scheduled meeting; may vary from 2-6 months
Stage IV: Candidacy		
Step 9:	File application for candidacy	1-6 months following action letter
Step 10:	Candidacy Review Report	
	a. File Letter of Intent (LOI)	Typically within 6 months of action letter
	b. WASC staff review	1 month
	c. Submission of CPR report	Typically 12 months following LOI review and 3 months prior to the visit
Step 11:	CPR Site Visit	Typically 12 months after filing LOI
Step 12:	CPR Team Report	
	a. Draft prepared recommending initial accreditation after EER	2-4 weeks
	b. Institution reviews draft	1 month
	c. Final report issued	1 month
Stage VI: Commission Action		
Step 16:	Institution responds to report	1 month
	Commission acts on recommendation and institution's response: Consider Initial Accreditation After EER Visit	1 month following next scheduled Commission meeting; may vary from 2-6 months

Stage VII: EER Review for Initial Accreditation

Step 17: EER Report

- | | |
|------------------------------------|--|
| a. EER report submitted | 12-18 months following CPR visit |
| b. EER site visit | Typically 3 months after receipt of report |
| c. Team prepares draft report | 2-4 weeks |
| d. Institution reviews team report | 1 month |
| e. Final report issued | 1 month |

Stage VIII: Commission Action

Step 18: Institution responds to final report

1 month

Commission acts

1 month following next scheduled
Commission meeting—may vary
from 2-6 months

Initial Accreditation

(or candidacy or defer action pending
further institutional response)

Initial accreditation is for 5-7 years

Option Two

Following the Candidacy EER visit, the team and WASC liaison may concur that the institution has progressed to the point that the full review process for initial accreditation—which includes both a CPR and an EER visit—may not be necessary. They may recommend to the Commission that it grant candidacy and then schedule a single special visit to focus on those issues identified in the Commission’s action letter.

In this case, the institution completes two self-studies and visits and the Commission grants Candidacy. The Commission acknowledges in taking this action that a two-visit cycle for Initial Accreditation may not be necessary to establish *substantial* compliance with all WASC Standards. Following the granting of Candidacy, the Commission schedules a single Special Visit to focus only on those remaining issues identified in its action letter.

Under Option Two for acceleration, the interval between the Candidacy action and the Special Visit would typically be 12 months but no more than 24 months. At the conclusion of the Special Visit, the Commission may grant Initial Accreditation and schedule the next comprehensive review in five to seven years. If the site team finds insufficient progress on the identified issues, it may recommend an additional visit, with the institution remaining in Candidacy. Such a decision by the Commission is not subject to appeal.

Stages and Steps

Estimated Time Required

Stage I: Initial Inquiry and Application

Step 1: Initial Inquiry to WASC

Open—institution’s discretion

Step 2: Initial Application

Open—institution’s discretion

a. Address threshold criteria

b. Provide stipulations

c. Remit fee

Step 3: Review by WASC

Within 2 months, typically 1 month

Stage II: Diagnostic Visit

Step 4: Institutional Report

a. Institution prepares report

b. Remit fee

Open—institution’s discretion (due 1 month prior to site visit)

Step 5: Diagnostic Visit

Open—date set at least 2 months prior
To visit

Step 6: Report from Visiting Team

One month following visit

Stage III: Eligibility

Step 7: Eligibility Application

a. Application filed

Typically 3 or more months following
Diagnostic Visit

b. Remit fee

Step 8: Eligibility Review Committee

a. Committee meets

Typically 1-2 months after receipt of
application

b. Planning session with WASC liaison

Within 1 month of favorable committee
review

c. Commission action letter

1 month following next scheduled meeting;
may vary from 2-6 months

Stage IV: Candidacy

Step 9: File application for candidacy

1-6 months following action letter

Step 10: Candidacy Review Report

a. File Letter of Intent (LOI)

Typically within 6 months of action letter
1 month

b. WASC staff review

c. Submission of CPR report

Typically 12 months following LOI review
and 3 months prior to the visit

Step 11: CPR Site Visit

Typically 12 months after filing LOI

Step 12: CPR Team Report

- a. Draft prepared recommending initial accreditation after EER 2-4 weeks
- b. Institution reviews draft 1 month
- c. Final report issued 1 month

Stage VII: EER Review for Candidacy

- Step 13: EER Report
- a. EER report submitted 12-18 months following CPR visit
 - b. EER site visit Typically 3 months after receipt of report
 - c. Team prepares draft report 2-4 weeks
 - d. Institution reviews team report 1 month
 - e. Final report issued: Recommends Initial Accreditation following a Special focused visit 1 month

Stage VIII: Commission Action

- Step 14: Institution responds to final team report 1 month
- Step 15: Commission acts on recommendation 1 month following next scheduled Commission meeting—may vary from 2-6 months

Commission Approves Candidacy

Stage VIII: Special Visit

- Step 16: Institution prepares report on issues Identified in Commission action letter 3-6 months
- Step 17: Special visit Typically 3 months following receipt of report
- Step 18: Team prepares draft report 2-4 weeks following visit
- Step 19: Institution reviews team draft report 1 month
- Step 20: Final report issued 1 month

Stage IX: Commission Action

- Step 21: Institution responds to final special visit Report 1 month
- Step 22: Commission acts on report 1 month following next scheduled Commission meeting—may vary from 2-6 months

Commission Approves Initial Accreditation
(or continues with regular initial accreditation reviews)

Initial accreditation is 5-7 years