

Southern Association of Colleges and Schools Commission on Colleges

INSTITUTIONAL SUMMARY FORM PREPARED FOR COMMISSION REVIEWS

GENE	ERAL INFORMATION					
Name	of Institution					
Name,	Title, Phone number, and email address of Accreditation Liaison					
,	Name, Title, Phone number, and email address of Technical Support person for the Compliance Certification					
<u>IMPO</u>	RTANT:					
Accred	ditation Activity (check one):					
	Submitted at the time of Reaffirmation Orientation Submitted with Compliance Certification for Reaffirmation Submitted with Materials for an On-Site Reaffirmation Review Submitted with Compliance Certification for Fifth-Year Interim Report Submitted with Compliance Certification for Initial Candidacy/Accreditation Review Submitted with Merger/Consolidations/Acquisitions					

Submission date of this completed document:

EDUCATIONAL PROGRAMS

1.	. Level of offerings (Check all that apply)						
Diploma or certificate program(s) requiring less than one year beyond Grade 12 Diploma or certificate program(s) of at least two but fewer than four years of work bey Grade 12 Associate degree program(s) requiring a minimum of 60 semester hours or the equivalence designed for transfer to a baccalaureate institution Associate degree program(s) requiring a minimum of 60 semester hours or the equivalence hours or the equivalence four or five-year baccalaureate degree program(s) requiring a minimum of 120 semest hours or the equivalent Professional degree program(s) Master's degree program(s) Work beyond the master's level but not at the doctoral level (such as Specialist in Education) Doctoral degree program(s)							
2.			specify) dergraduate Programs (Check all that apply)				
G(Occupat Two-yea Liberal A Teacher Professio Other (S	ional certificate or diploma program(s) ional degree program(s) ar programs designed for transfer to a baccalaureate institution Arts and General Preparatory onal Specify)				
C1	1.1						
Cn	eck tn	e approp	oriate governance control for the institution:				
	Private (check one)						
			Independent, not-for-profit				
			Name of corporation OR Name of religious affiliation and control:				
			Independent, for-profit *				
			If publicly traded, name of parent company:				

Ш	Public s	ate * (check one)				
		Not part of a state system, institution has own independent board				
		Part of a state system, system board serves as governing board				
		Part of a state system, system board is super governing board, local governing board has delegated authority				
		Part of a state system, institution has own independent board				

INSTITUTIONAL INFORMATION FOR REVIEWERS

Directions:

Please address the following and attach the information to this form.

1. History and Characteristics

Provide a <u>brief</u> history of the institution, a description of its current mission, an indication of its geographic service area, and a description of the composition of the student population. Include a description of any unusual or distinctive features of the institution and a description of the admissions policies (open, selective, etc.). If appropriate, indicate those institutions that are considered peers. Please limit this section to one-half page.

2. List of Degrees

List all degrees currently offered (A. S., B.A., B.S., M.A., Ph.D., for examples) and the majors or concentrations within those degrees, as well as all certificates and diplomas. For each credential offered, indicate the number of graduates in the academic year previous to submitting this report. Indicate term dates.

Does the institution offer any credit, non-credit, or pathways English as a Second Language (ESL) programs? If yes, list the programs.

3. Off-Campus Instructional Locations and Branch Campuses

List *all approved off-campus instructional locations* where 25% or more credit hours toward a degree, diploma, or certificate can be obtained primarily through traditional classroom instruction. Report those locations in accord with the Commission's definitions and the directions as specified below.

^{*} If an institution is part of a state system or a corporate structure, a description of the system operation must be submitted as part of the Compliance Certification for the decennial review. See Commission policy "Reaffirmation of Accreditation and Subsequent Reports" for additional direction.

Table 1: Off-campus instructional sites—a site located geographically apart from the main campus at which the institution offers 50 % or more of its credit hours for a diploma, certificate, or degree. This includes high schools where courses are offered as part of dual enrollment. For each site, provide the information below. The list should include only those sites reported to and approved by SACSCOC. Listing unapproved sites below does not constitute reporting them to SACSCOC. In such cases when an institution has initiated an off-campus instructional site as described above without prior approval by SACSCOC, a prospectus for approval should be submitted immediately to SACSCOC.

Name of Site	Physical Address (street, city, state, country) Do not include PO Boxes.	Date of SACSCOC approval letter	Date Implemented by the institution	Educational programs offered (specific degrees, certificates, diplomas) with 50% or more credits hours offered at each site	Is the site currently active? (At any time during the past 5 years, have students been enrolled and courses offered? If not, indicate the date of most recent activity.)

Table 2: Off-campus instructional sites at which the institution offers <u>25-49%</u> of its credit hours for a diploma, certificate, or degree—including high schools where courses are offered as dual enrollment. Note: institutions are required to notify SACSCOC in advance of initiating coursework at the site. For each site, provide the information below.

Name of Site (Indicate if site is currently active or inactive. If inactive, date of last course offerings and date of projected reopening	Physical Address (street, city, state, country) Do not include PO Boxes.	Date of SACSCOC letter accepting notification	Date Implemented by the institution	Educational programs offered (specific degrees, certificates, diplomas) with 25-49% credit hours offered at each site	Is the site currently active? (At any time during the past 5 years, have students been enrolled and courses offered? If not, indicate the date of most recent activity.)

Table 3: Branch campus—an instructional site located geographically apart and independent of the main campus of the institution. A location is independent of the main campus if the location is (1) permanent in nature, (2) offers courses in educational programs leading to a degree, certificate, or other recognized educational credential, (3) has its own faculty and administrative or supervisory organization, and (4) has its own budgetary and hiring authority. The list should include only those branch campuses reported to and approved by SACSCOC. Listing unapproved branch campuses below does not constitute reporting them to SACSCOC. A prospectus for an unapproved branch campuses should be submitted immediately to SACSCOC.

Name of Branch Campus	Physical Address (street, city, state, country) Do not	Date of SACSCOC approval letter	Date Implemented by the institution	Educational programs (specific degrees, certificates,	Is the campus currently active? (At any time during the past 5 years, have students been enrolled
	include PO Boxes.			diplomas) with 50% or more credits hours offered at the branch	and courses offered? If not, indicate the date of most recent activity.)
				campus	

4. Distance and Correspondence Education

Provide an initial date of approval for your institution to offer distance education. Provide a list of credit-bearing educational programs (degrees, certificates, and diplomas) where 50% or more of the credit hours are delivered through distance education modes. For each educational program, indicate whether the program is delivered using synchronous or asynchronous technology, or both. For each educational program that uses distance education technology to deliver the program at a specific site (e.g., a synchronous program using interactive videoconferencing), indicate the program offered at each location where students receive the transmitted program. Please limit this description to one page, if possible.

5. Accreditation

- (1) List all agencies that currently accredit the institution and any of its programs and indicate the date of the last review by each.
- (2) If SACS Commission on Colleges is not your primary accreditor for access to USDOE Title IV funding, identify which accrediting agency serves that purpose.
- (3) List any USDOE recognized agency (national and programmatic) that has terminated the institution's accreditation (include the date, reason, and copy of the letter of termination) or list any agency from which the institution has voluntarily withdrawn (include copy of letter to agency from institution).
- (4) Describe any sanctions applied or negative actions taken by any USDOE-recognized accrediting agency (national, programmatic, SACSCOC) during the two years previous to the submission of this report. Include a copy of the letter from the USDOE to the institution.

6. Relationship to the U.S. Department of Education

Indicate any limitations, suspensions, or termination by the U.S. Department of Education in regard to student financial aid or other financial aid programs during the previous three years. Report if on reimbursement or any other exceptional status in regard to federal or state financial aid.

Document History

Adopted: September 2004 Revised: March 2011 Revised: January 2014 Revised: January 2018