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OFFICE OF THE PRESIDENT

Mr. Robert L. Caslen, Jr.
President
University of South Carolina - Columbia
Osborne Administration Building, Suite 206
Columbia, SC 29208

Dear President Caslen:

The following action regarding your institution was taken by the Board of Trustees of the Southern Association of Colleges and Schools Commission on Colleges (SACSCOC) during its meeting held on December 8, 2019:

The SACSCOC Board of Trustees reviewed the institution's Special Report following receipt of unsolicited information from media sources that addressed ongoing compliance with standards related to the governing board, CEO evaluation and selection, and external influence. A Special Committee was authorized.

The institution is requested to submit a Monitoring Report four weeks prior to the Special Committee Visit, but no later than **September 8, 2020**, addressing the following referenced standards of the *Principles of Accreditation*:

Standard 4.2.c (CEO evaluation/selection)

This standard expects the institution's governing board to select and regularly evaluate the institution's chief executive officer.

The institution's report identified a number of irregularities that took place during the recent presidential search. The institution should demonstrate that its Board has made the necessary changes in policy and/or procedure to ensure that its selection and evaluation of the chief executive officer conforms to its governing documents.

Standard 4.2.f (External influence)

This standard expects the institution's governing board to protect the institution from undue influence by external persons or bodies.

There appears to be adequate evidence of undue influence from the Governor during the presidential selection process. The current report is only partially responsive to steps that will be taken regarding Board education and related processes to prevent/respond appropriately to undue influence. The institution has not yet demonstrated that its governing board protects the institution from undue influence by external persons or bodies.



Mr. Robert L. Caslen, Jr.
January 14, 2020
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Guidelines for the Monitoring Report are enclosed. Since it is essential that institutions follow these guidelines, **please make certain that those responsible for preparing the report receive the document. If there are any questions about the format, contact the Commission staff member assigned to your institution.** When submitting your report, please send **six (6) copies** to your SACSCOC staff member.

Please note that Federal regulations and SACSCOC's policy stipulate that an institution must demonstrate compliance with all requirements and standards of the *Principles of Accreditation (Principles)* within two years following the SACSCOC Board of Trustees' initial action on the institution. At the end of that two-year period, if the institution does not comply with all standards and requirements of the *Principles*, representatives from the institution may be required to appear before the Board, or one of its standing committees, to answer questions as to why the institution should not be removed from membership. If the Board of Trustees determines Good Cause at that time and the institution has not been on Probation for both years during the two-year monitoring period, the Board may extend the period for coming into compliance for a minimum of six months and a maximum of two years and must place the institution on Probation. An institution may be on Probation for a maximum of two years. If the Board does not determine Good Cause or if the institution does not come into compliance within the specified period of time while on Probation, the institution must be removed from membership. (See enclosed SACSCOC policy, *Sanctions, Denial of Reaffirmation, and Removal from Membership*, which includes the provision for a determination of Good Cause.)

We appreciate your continued support of SACSCOC's work and activities. If you have questions, please contact the SACSCOC staff member assigned to your institution.

Sincerely,

A handwritten signature in cursive script that reads "Belle S. Wheelan".

Belle S. Wheelan, Ph.D.
President

BSW:sf

Enclosures

cc: Dr. Linda Thomas-Glover, Vice President, SACSCOC



*Southern Association of Colleges and Schools
Commission on Colleges
1866 Southern Lane
Decatur, Georgia 30033-4097*

REPORTS SUBMITTED FOR SACSCOC REVIEW

Policy Statement

Institutions accredited by SACSCOC are requested to submit various reports for review by an evaluation committee or the SACSCOC Board of Trustees. Those reports include:

- Compliance Certification
- Focused Report
- Quality Enhancement Plan
- Documentation for an Interim Off-Campus Instructional Sites Committee Review
- Documentation for a Substantive Change Committee Review
- Fifth-Year Interim Report
- Institutional Special Report
- Substantive Change Prospectus
- Response Report to the Visiting Committee
- Referral Report
- Follow-Up Report
- Monitoring Report

When submitting a report, an institution should follow the directions below, keeping in mind that the report will be reviewed by a number of readers, most of whom will be unfamiliar with the institution. The institution should also comply with the appropriate deadline for submitting the report. These deadlines may be found either published on the SACSCOC website or in formal correspondence from SACSCOC staff. Documentation for review by an Accreditation Committee, an On-Site Reaffirmation Committee, an Interim Off-Campus Instructional Sites Committee, or a Substantive Change Committee authorized to visit the institution is due to the members of the Committee and to SACSCOC staff six weeks before the start of the visit.

Procedures

Presentation of Reports

SACSCOC prefers that requested reports be submitted in electronic format. Should an institution determine that it has insufficient financial or human resources to produce and submit its reports in electronic format, that institution may request an exception from the President of SACSCOC to allow the report to be submitted in print format. Such a request must be made in writing to the SACSCOC President at least ninety (90) days prior to the deadline for submitting the report.

For electronic submissions, please comply with all steps outlined below:

1. Copy the report and all attachments onto the appropriate number of flash drives, in accordance with the number of requested copies of the report. **Each** flash drive should be labeled with the name of the institution and the title of the report. All hyperlinks in the narrative document should open documents stored on the flash drive itself. Documents should be bookmarked, indexed, and searchable. *Printed documents should not be scanned to create a pdf, since this process will result in a large file that is not searchable.*
2. **Each** flash drive should be submitted in a separate paper or plastic envelope not smaller than 4 x 4 inches, and **each** envelope should be labeled with the name of the institution, the title of the report, and the list of document contents.
3. Provide the name, title, email address, and phone number of the institutional representative who can provide assistance if the readers have problems accessing the information.
4. Provide **one pdf copy** of the document narrative **without** supporting documentation.

Other Useful Information

1. Provide a clear, complete, and concise report. If documentation is required, ensure that it is appropriate to demonstrating fulfillment of the requirement. Specify actions that have been taken and document their completion. Avoid vague responses indicating that the institution *plans to address* a problem in the future. If any actions remain to be accomplished, the institution should present an action plan, a schedule for accomplishing the plan, and evidence of commitment of resources for accomplishing the plan.
2. When possible, excerpt passages from text and incorporate the narrative into the report. Provide definitive evidence, not documents that only address the process (e.g., do not include copies of letters or memos with directives).
3. When possible and appropriate, provide samples of evidence of compliance rather than all documents pertaining to all activities associated with compliance.
4. Reread the report before submission and eliminate all narrative that is not relevant to the focus of the report. Ensure that all devices are virus free and have been reviewed for easy access by reviewers external to your institution.

Reports submitted for Committee Review

Compliance Certification

Accreditation Committee. Institutions seeking initial Accreditation will submit a Compliance Certification Report – including narrative and supporting documentation – addressing their compliance with all of the standards in the *Principles of Accreditation* except Standard 7.2 (*Quality Enhancement Plan*). The Compliance Certification Report should be submitted to every member of the Accreditation Committee (including SACSCOC staff) six (6) weeks before the start of the Committee’s visit. For further information, see the SACSCOC “[Handbook for Institutions Seeking Initial Accreditation.](#)”

Off-Site Reaffirmation Committee. Institutions seeking Reaffirmation of Accreditation will submit a Compliance Certification Report – including narrative and supporting documentation – addressing their compliance with the standards in the *Principles of Accreditation*. The deadlines for submission of the Compliance Certification Report may be found in the “[Timelines for Reaffirmation Tracks...](#)” on the SACSCOC website.

Template for the Compliance Certification Report

Institutions should use the template for the Compliance Certification Report found on the Institutional Resources page of the SACSCOC website. Institutions will receive specific instructions for submitting their report to the members of the Off-Site Reaffirmation Committee before the deadline for submission.

Presentation of the Compliance Certification Report

Institutions should submit their Compliance Certification narrative and supporting documentation on a self-contained USB flash drive. The preferred format is a pdf, and all hyperlinks in the narrative document should open documents stored on the flash drive itself rather than linking to external resources. Documents should be bookmarked, indexed, and searchable. Printed documents should not be scanned to create a pdf, as this process will result in a large file that is not searchable. Some third-party vendors offer the option of an html or pdf format; either format is acceptable, provided the documents are easy for peer reviewers to access and navigate.

Institutions should also include:

- An instruction document which contains (a) clear directions on how to access the electronic documents, (b) the name and contact information of a technical support person at the institution who can assist an evaluator experiencing difficulty accessing electronic information, and (c) the name and contact information of the person at the institution who will provide print materials if an evaluator requests such.
- A **current** “Institutional Summary Form Prepared for Commission Reviews”
- An organizational chart
- Current Catalog(s)

One copy of the institution’s submission should be sent to each member of the Off-Site Reaffirmation Committee, and two copies should be submitted to the institution’s SACSCOC Vice President’s office.

Additional Submission Requirements. All institutions should send the following information to their SACSCOC Vice President’s office to enable the Commission to maintain its historical archive:

- One copy (pdf) of the institution’s Compliance Certification narrative *without supporting documentation*
- Two copies (pdf) of the most recent audit and any accompanying correspondence
- One copy (pdf) of the **current** “Institutional Summary Form Prepared for Commission Reviews”

A copy (pdf) of the institution’s most recent audit and any accompanying correspondence should also be sent to the Chair of the Off-Site Reaffirmation Committee and to the Committee’s Finance Evaluator (designated on the roster with an asterisk).

Focused Report

In preparation for the visit of the On-Site Reaffirmation Committee, institutions have the option of submitting a Focused Report addressing the preliminary findings of the Off-Site Reaffirmation Committee. Institutions should submit their Focused Report narrative and supporting documentation on a self-contained USB flash drive. All hyperlinks in the narrative document should open documents stored on the flash drive itself rather than linking to external resources. Documents should be bookmarked, indexed, and searchable. Printed documents should not be scanned to create a pdf, as this process will result in a large file that is not searchable. Some third-party vendors offer the option of an html or pdf format; either format is acceptable, provided the documents are easy for peer reviewers to access and navigate.

Institutions should also include:

- An instruction document which contains (a) clear directions on how to access the electronic documents, (b) the name and contact information of a technical support person at the institution who can assist an evaluator experiencing difficulty accessing electronic information, and (c) the name and contact information of the person at the institution who will provide print materials if an evaluator requests such.
- A **current** “Institutional Summary Form Prepared for Commission Reviews”
- The Compliance Certification narrative and supporting documentation (may be on a separate flash drive)

One copy of the institution's submission should be sent to each member of the On-Site Reaffirmation Committee six (6) weeks before the start of the visit, including the institution's SACSCOC Vice President.

Quality Enhancement Plan

All institutions must submit a Quality Enhancement Plan document for review by the On-Site Reaffirmation Committee. Institutions should submit their QEP narrative and supporting documentation on a self-contained USB flash drive. All hyperlinks in the narrative document should open documents stored on the flash drive itself rather than linking to external resources. Documents should be bookmarked, indexed, and searchable. *Printed documents should not be scanned to create a pdf, as this process will result in a large file that is not searchable.* Some third-party vendors offer the option of an html or pdf format; either format is acceptable, provided the documents are easy for peer reviewers to access and navigate. One copy of the institution's QEP should be sent to each member of the On-Site Reaffirmation Committee, including the institution's SACSCOC Vice President.

The QEP should be clear, succinct, and presented in a reader-friendly font. It may not exceed one hundred pages of size 11 Times New Roman font, including a narrative of no more than seventy-five pages and appendices of no more than twenty-five pages. A page header, right aligned, should identify the institution; the footer, centered, should indicate the page number. The title of the QEP, the name of the institution, and the dates of the On-Site Review should be prominently displayed on the title page. Institutions may organize QEPs in whatever format best conveys the ideas of the project and addresses all of the components of the standard.

Note: Some evaluators may prefer to review a print copy of the institution's QEP. Institutions may wish to offer the option of a print copy to members of their On-Site Reaffirmation Committee.

Documentation for an Interim Off-Campus Instructional Sites Committee Review

In preparation for notifying institutions regarding their upcoming Fifth-Year Interim Review, SACSCOC staff will determine the number of new Off-Campus Instructional Sites (sites offering 50% or more of an educational program) that have been approved since the institution's most recent comprehensive visit. If that number is five (5) or more, the institution will be required to host an Interim Off-Campus Instructional Sites Committee. That committee will conduct visits to a sampling of the institution's new sites. Institutions will work with their SACSCOC Vice President to schedule the visit, usually in the fall for Track A institutions or in the spring for Track B institutions. Six (6) weeks before the visit of the Interim Off-Campus Instructional Sites Committee, institutions should submit the appropriate Documentation for an Interim Off-Campus Instructional Sites Committee Review.

Institutions should submit their Documentation narrative and supporting documentation on a self-contained USB flash drive. The preferred format is a pdf, and all hyperlinks in the narrative document should open documents stored on the flash drive itself rather than linking to external resources. Documents should be bookmarked, indexed, and searchable. Printed documents should not be scanned to create a pdf, as this process will result in a large file that is not searchable. Some third-party vendors offer the option of an html or pdf format; either format is acceptable, provided the documents are easy for peer reviewers to access and navigate. One copy of the institution's submission should be sent to each member of the Interim OCIS Committee, including the institution's SACSCOC Vice President.

Documentation for a Substantive Change Committee Review

Some types of substantive changes (e.g., Branch Campus, Merger/Consolidation, or Level Change) will require a Substantive Change Committee's visit to review the institution's ongoing compliance with the *Principles of Accreditation* within six months following the implementation of the change. Other types of substantive change may result in a Substantive Change Committee's review being authorized, depending on the type of change and the nature of the institution. Six (6) weeks before the visit of the Substantive Change Committee, institutions should

submit the appropriate Documentation for a Substantive Change Committee Review. The institution should choose the appropriate template from those available at <http://www.sacscoc.org/SubstantiveChangeCommitteeVisit.asp>.

Institutions should submit their Documentation narrative and supporting documentation on a self-contained USB flash drive. All hyperlinks in the narrative document should open documents stored on the flash drive itself rather than linking to external resources. Documents should be bookmarked, indexed, and searchable. Printed documents should not be scanned to create a pdf, as this process will result in a large file that is not searchable. Some third-party vendors offer the option of an html or pdf format; either format is acceptable, provided the documents are easy for peer reviewers to access and navigate. One copy of the institution's submission should be sent to each member of the Substantive Change Committee, including the institution's SACSCOC Vice President.

Fifth-Year Interim Report

Member institutions are required to submit a Fifth-Year Interim Report for review by the Fifth-Year Interim Committee. This Report is submitted a little more than four years prior to an institution's next scheduled reaffirmation. Institutions are notified by letter regarding the timing and requirements of their Fifth-Year Interim Report; general information (including a timeline by reaffirmation class) may be found on the Commission's website (<http://www.sacscoc.org/FifthYear.asp>). Institutions may choose to submit their Report in electronic or print format. Institutional representatives responsible for preparing and submitting the Fifth-Year Interim Report should follow carefully the instructions contained in the letter from SACSCOC and those found in the Template for the Fifth-Year Interim Report.

Institutions should submit their Fifth-Year Interim Report narrative and supporting documentation on a self-contained USB flash drive. All hyperlinks in the narrative document should open documents stored on the flash drive itself rather than linking to external resources. Documents should be bookmarked, indexed, and searchable. Printed documents should not be scanned to create a pdf, as this process will result in a large file that is not searchable. Some third-party vendors offer the option of an html or pdf format; either format is acceptable, provided the documents are easy for peer reviewers to access and navigate.

Institutions should also include an instruction document which contains (a) clear directions on how to access the electronic documents, (b) the name and contact information of a technical support person at the institution who can assist an evaluator experiencing difficulty accessing electronic information, and (c) the name and contact information of the person at the institution who will provide print materials if an evaluator requests such.

Reports submitted for SACSOC staff and/or Board of Trustees Review

Substantive Change Prospectus/Application

Member institutions may be required to submit an application or prospectus to seek approval of a substantive change (see SACSCOC Policy "Substantive Change for SACSCOC Accredited Institutions"). Depending on the nature of the substantive change submission, these documents will be reviewed by SACSCOC staff members or the SACSCOC Board of Trustees.

Preparation of an Application or Prospectus

The institution should follow the instructions found in the SACSCOC Policy "Substantive Change for SACSCOC Accredited Institutions." Some substantive change applications will also require reference to other relevant SACSCOC policies.

Presentation of Reports

An institution's prospectus or application should comply with all steps outlined below:

1. Copy the report and all attachments onto a flash drive labeled with the name of the institution and the title of the report. All hyperlinks in the narrative document should open documents stored on the flash drive itself rather than linking to external resources. Documents should be bookmarked, indexed, and searchable. Printed documents should not be scanned to create a pdf, as this process will result in a large file that is not searchable. Some third-party vendors offer the option of an html or pdf format; either format is acceptable, provided the documents are easy for peer reviewers to access and navigate.
2. Provide the name, title, email address, and phone number of the institutional representative who can provide assistance if the readers have problems accessing the information.

As SACSCOC implements its data-management system, institutions will be offered the option of submitting a Substantive Change prospectus electronically. Instructions for those submissions will be developed and published concurrently with the implementation of that aspect of the data-management system.

Institutional Special Reports

Definition. This type of Report addresses the institution's ongoing compliance with one or more standards of the *Principles of Accreditation* identified during a review of a formal written complaint or unsolicited information (See SACSCOC Policies "Complaint Procedures Against SACSCOC or Its Accredited Institutions" and "Unsolicited Information").

Audience. The Institutional Special Report is initially reviewed by the SACSCOC staff member assigned to the institution. That review may determine that there is sufficient evidence of the institution's compliance with the standards in question and close the case. If, however, the review cannot find sufficient evidence to determine compliance, the SACSCOC President may authorize a Special Committee to visit the institution and review ongoing compliance with the relevant standards. The Special Committee's Report and the Institutional Special Report would subsequently be reviewed by the SACSCOC Board of Trustees. Finally, the SACSCOC President may choose to forward the Institutional Special Report directly to the Board of Trustees. In either of these two last eventualities, the report is subject to the review procedures of the Commission's standing committees, including the initiation of a monitoring period, the imposition of a sanction, or a change of accreditation status.

Report Presentation. Structure the response so that it addresses the concerns described in the letter from SACSCOC in the order that they appeared. For each standard cited, (1) restate the number of the Core Requirement or Standard exactly as it appeared in the letter; (2) cite verbatim the current request of the Commission that is related to the standard cited (reference notification letter from SACSCOC); and (3) prepare a response to the finding.

Due Date. The Report is due on the date specified in the letter sent by SACSCOC. If a Special Committee has been authorized to visit the institution, the Report will be due to every member of the Committee and the SACSCOC staff member no later than four (4) weeks before the start of the visit. Requests for extensions to the date must be made to the SACSCOC President at least two weeks in advance of the original due date. (*See SACSCOC policy "Deadlines for Submitting Reports."*)

Number of Copies. See the letter from SACSCOC requesting the Report.

Reports submitted for SACSCOC Board of Trustees Review

Response Report to the Visiting Committee

Any On-Site Reaffirmation Committee, Interim Off-Campus Instructional Sites Review Committee, Substantive Change Committee, or Special Committee may propagate recommendations, if it determines that the institution under review has not demonstrated compliance with one or more of the *Principles of Accreditation*. In preparation

for review by the SACSCOC Board of Trustees, the institution should submit its Response Report addressing recommendation(s) included in the Committee's Report. A formal Transmittal Letter will be included with the Committee's Report transmitted from the SACSCOC Vice President's office to the institution's Chief Executive Officer. This Transmittal Letter provides vital information regarding the institution's Response Report, including the due date and number of copies required.

Definition. A Response Report addresses the findings of a visiting committee. It provides updated or additional documentation regarding the institution's compliance with the *Principles of Accreditation*.

Audience. The Response Report, along with the Committee Report and other documents, is reviewed by SACSCOC Board of Trustees and is subject to the review procedures of the Commission's standing committees, including the initiation of a monitoring period, the imposition of a sanction, or a change of accreditation status.

Report Presentation. Structure the response so that it addresses committee recommendations in the order that they appear in the report. For each recommendation, provide the number of the Core Requirement or Standard and state the recommendation exactly as it appears in the visiting committee report. Describe the committee's concerns that led to the recommendation by either summarizing the concerns or inserting verbatim the complete narrative in the report pertaining to the recommendation. Provide a response with documentation.

Due Date and Number of Copies. The Response Report is due on the day indicated in the transmittal letter from SACSCOC staff accompanying the visiting committee report. The transmittal letter will also indicate the number of copies that should be submitted.

Referral Report

Definition. This report addresses continued concerns of compliance identified by the Committee on Fifth-Year Interim Reports and referred to the SACSCOC Board of Trustees.

Audience. The Referral Report is reviewed by SACSCOC Board of Trustees and is subject to the review procedures of the Commission's standing committees, including the initiation of a monitoring period, the imposition of a sanction, or a change of accreditation status.

Report Presentation. Structure the response so that it addresses the concerns described in the letter from the SACSCOC President in the order that they appeared. For each standard cited, (1) restate the number of the Core Requirement or Standard exactly as it appeared in the letter; (2) cite verbatim the current request of the Commission that is related to the standard cited (reference notification letter from the President of SACSCOC); and (3) prepare a response to the finding.

Due Date. The Referral Report is due on the date specified in the notification letter sent by the SACSCOC President. Requests for extensions to the date must be made to the President at least two weeks in advance of the original due date. (*See SACSCOC policy "Deadlines for Submitting Reports."*)

Number of Copies. See the letter from the President of SACSCOC requesting the Report.

Follow-Up Report

Definition. Some member institutions are asked to submit a Follow-Up Report at during the same period as their Fifth-Year Interim Report will be reviewed. This report addresses ongoing compliance with one or more standards of the *Principles of Accreditation*, and institutions are usually asked to submit such a report when they encountered significant difficulties documenting compliance during their previous review.

Audience. The Follow-Up Report is reviewed by SACSCOC Board of Trustees and is subject to the review procedures of the Commission's standing committees, including the initiation of a monitoring period, the imposition of a sanction, or a change of accreditation status.

Report Presentation. Structure the response so that it addresses the concerns described in the letter from the SACSCOC President in the order that they appeared. For each standard cited, (1) restate the number of the Core Requirement or Standard exactly as it appeared in the letter; (2) cite verbatim the current request of the Commission that is related to the standard cited (reference notification letter from the President of SACSCOC); and (3) prepare a response to the finding.

Due Date. The Fifth-Year Follow-Up Report is due on the date specified in the letter from the SACSCOC President requesting the Report (usually on the date Monitoring Reports are due for that meeting of the SACSCOC Board of Trustees). Requests for extensions to the date must be made to the President at least two weeks in advance of the original due date. (*See SACSCOC policy "Deadlines for Submitting Reports."*)

Number of Copies. See the letter from the President of SACSCOC requesting the Report.

Monitoring Report

Definition. This Report address recommendations and continued concerns of compliance usually identified by the Committee on Compliance and Reports (C&R) or by the Executive Council and referred to the SACSCOC Board of Trustees. It follows the C&R Committee's review of an institution's response to a visiting committee report.

Audience. The Monitoring Report is reviewed by SACSCOC Board of Trustees and is subject to the review procedures of the Commission's standing committees, including the continuation of a monitoring period, the imposition of a sanction, or a change of accreditation status.

Report Presentation. Structure the response so that it addresses committee recommendations in the order that they appeared in the report. For each recommendation, (1) restate the number of the Core Requirement or Standard, the number of the recommendation, and the recommendation exactly as it appeared in the visiting committee report; (2) provide a brief history of responses to the recommendation if more than a first response (to include an accurate summary of the original concerns of the visiting committee, a summary of each previous institutional response and an explanation of what had been requested by the Commission); (3) cite verbatim the current request of the Commission that is related to the recommendation (reference notification letter from the President of SACSCOC); and (4) prepare a response to the recommendation.

Due Date. The Monitoring Report is due on the date specified in the notification letter sent by the SACSCOC President. Requests for extensions to the date must be made to the President at least two weeks in advance of the original due date. (*See SACSCOC policy "Deadlines for Submitting Reports."*)

Number of Copies. See the letter from the President of SACSCOC requesting the Report.

Preparation of a Title Page

For any report requested for review by the SACSCOC Board of Trustees, an institution should prepare a title page that includes the following:

1. Name of the institution
2. Mailing address of the institution
3. Dates of the committee visit (*not applicable for the Referral Report or Fifth-Year Follow-Up Report*)
4. The type of report submitted
5. Name, title, and contact information for person(s) preparing the report

Document History

Edited and Revised for the Principles of Accreditation: December 2003

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Revised: December 2018; June 2019

Procedures Revised: December 2019



*Southern Association of Colleges and Schools
Commission on Colleges
1866 Southern Lane
Decatur, Georgia 30033-4097*

SANCTIONS, DENIAL OF REAFFIRMATION, AND REMOVAL FROM MEMBERSHIP

Policy Statement

The Southern Association of Colleges and Schools Commission on Colleges (SACSCOC) requires that a member institution be in compliance with the *Principles of Accreditation: Foundations for Quality Enhancement* and its Core Requirements, comply with Commission policies and procedures, and provide information requested by the Commission's Board of Trustees in order to maintain membership and accreditation. When an institution fails to comply with these requirements within a maximum two-year monitoring period, the Commission may impose sanctions. Monitoring reports submitted during this period are not sanctions.

If the Commission determines that an institution's progress is insufficient during the two-year monitoring period but not significant enough to impose a sanction, the Commission will advise the institution that if progress or compliance is insufficient at the time of its next formal review by the SACSCOC Board of Trustees, the institution could be placed on sanction or removed from membership. (Institutions applying for membership with SACSCOC should refer to the Commission policy "Accreditation Procedures for Applicant Institutions" for procedures concerning the denial or removal of candidacy, or the denial of initial membership.) Failure to make adequate progress toward compliance at any time during the two-year period or failure to comply with the *Principles* at the conclusion of two years may result in Commission action to remove accreditation.

The Commission's requirements, policies, processes, procedures and decisions are predicated on integrity. SACSCOC expects integrity to govern the operation of institutions. Therefore, evidence of withholding information, providing inaccurate information to the public, or failing to provide timely information to the Commission may be construed as an indication of the lack of a full commitment to integrity and may result in the imposition of sanctions or removal of accreditation.

Sanctions

An institution found to be out of compliance with the *Principles of Accreditation* must correct the deficiencies or face the possibility of being placed on one of two sanctions: Warning or Probation, in order of degree of seriousness. These sanctions are not necessarily sequential, and the Commission may place an institution on either sanction with or without reviewing a visiting committee's report and with or without having previously requested a monitoring report, depending on the seriousness and extent of noncompliance. In certain circumstances, an institution may be removed from membership without having previously been placed on sanction.

During the two-year monitoring period, institutions may be placed on a sanction for six or twelve months, with a monitoring report required at the end of the period of the sanction. Institutional accreditation cannot be reaffirmed while the institution is on sanction. Denial of reaffirmation of accreditation and invocation of sanctions are not appealable actions. Actions invoking sanctions are publicly announced at the annual meeting of the College Delegate Assembly, posted on the SACSCOC website, and published in the *Annual Reports of SACSCOC*.

The characteristics of these sanctions include the following:

Warning – The less serious of the two sanctions, Warning is usually, but not necessarily, levied in the earlier stages of institutional review and often, but not necessarily, precedes Probation. It cannot, however, succeed Probation. An institution may be placed on Warning or Probation for noncompliance with any of the Core Requirements or significant noncompliance with the other Standards. Additionally, an institution may be placed on Warning for failure to make timely

and significant progress toward correcting the deficiencies that led to the finding of noncompliance with any of the *Principles of Accreditation*. An institution may also be placed on Warning for failure to comply with Commission policies and procedures, including failure to provide requested information in a timely manner. The maximum total time during one monitoring period that an institution may be on Warning is two years.

Probation – Failure to correct deficiencies or failure to make satisfactory progress toward compliance with the *Principles of Accreditation*, whether or not the institution is already on Warning, may result in the institution being placed on Probation. An institution may be placed on Probation for the same reasons as discussed above regarding Warning if the Commission’s Board of Trustees deems noncompliance with the Principles to be serious enough to merit invoking Probation whether or not the institution is or has been on Warning. Probation is a more serious sanction than Warning and is usually, but not necessarily, invoked as the last step before an institution is removed from membership. Probation may be imposed upon initial institutional review, depending on the judgment of the Board regarding the seriousness of noncompliance or in the case of repeated violations recognized by the Board over a period of time. An institution must be placed on Probation when it is continued in membership for Good Cause beyond the maximum two-year monitoring period (see section on “Good Cause” below). The maximum consecutive time that an institution may be on Probation is two years.

Denial of Reaffirmation of Accreditation with the Imposition of a Sanction

If an institution is judged by the SACSCOC Board of Trustees to be out of compliance with a Core Requirement, it will be placed on a sanction. For an institution seeking reaffirmation of accreditation, its reaffirmation will be denied, and it will be placed on a sanction. If an institution is judged to be significantly out of compliance with one or more of the Standards, its reaffirmation of accreditation may be denied. The action of denying reaffirmation of accreditation will be accompanied by the imposition of a sanction. The institution’s accreditation will not be reaffirmed while it is on Warning or Probation, but its accreditation will be continued. Denial of reaffirmation does not affect the decennial review schedule.

Removal from Membership

An institution may be removed from SACSCOC membership at any time, depending on the Board of Trustee’s judgment of the seriousness of noncompliance with the *Principles of Accreditation* or with the Commission’s policies and procedures. Removal from membership, however, usually occurs after persistent or significant noncompliance during a monitoring period or any time an institution is being followed for Good Cause. A serious instance of noncompliance or repeated instances of noncompliance may result in removal of membership without a monitoring period. If an institution has filed bankruptcy, the SACSCOC Board of Trustees may revoke the institution’s accreditation for failure to comply with the *Principles of Accreditation* during the pendency of the bankruptcy.

An institution must be removed from membership if it has not demonstrated compliance with all the Principles of Accreditation within the two-year monitoring period and has not demonstrated Good Cause as to why it should not be dropped from membership. If an institution is continued in membership for Good Cause beyond the two-year monitoring period (and then only on Probation), it may be removed from membership at any time but must be removed from membership if it does not demonstrate compliance within the two years beyond the end of the two-year monitoring period (see “Good Cause” below).

When an institution fails to pay its dues by the designated deadline, the Commission will assume from this action that the institution no longer wants to maintain its membership or candidacy with SACSCOC. By that action, the institution withdraws from membership or candidacy. The SACSCOC Board of Trustees will take official action on the termination of accreditation. However, if an institution has filed bankruptcy, the Board may not act to revoke accreditation for failure to pay membership fees and dues during the pendency of bankruptcy.

In accord with 34 CFR Section 602.24 of the Federal Code, notification of SACSCOC Board of Trustees action to withdraw or terminate membership will be accompanied by a request that the institution submit a teach-out plan to the Commission for approval. (See Commission policy “Substantive Change for SACSCOC Accredited Institutions” for the specific procedures.) This is applicable if (1) the institution fails to appeal the decision of the Commission’s Board of Trustees or (2) the institution appeals the Board’s decision and the Appeals Committee rules in favor of the Board.

Procedures for Applying Sanctions and for Terminating Membership

Recommendations for Warning, Probation, and removal of membership are made by one of the Committees on Compliance and Reports to the Executive Council of the Commission. The Council forwards recommendations on Warning, Probation, and removal from membership to the SACSCOC Board of Trustees, which takes final action subject to any rights of appeal

which the institution might have as described in Commission policies. Action placing an institution on Warning or Probation is not appealable.

In the cases of Warning, Probation, or loss of membership, both the chief executive officer and the chair of the institution's governing board will be informed in writing. (For public institutions that are part of a state system, the chief executive officer of the system will also receive a copy of the notification sent to the institution.) The Commission will include in its notification to the institution reasons for the imposition of sanction or for loss of membership.

An action to place an institution on Warning or Probation, to deny reaffirmation, or to remove an institution from membership, along with the reasons for the action, will be read during the annual meeting of the College Delegate Assembly, posted on the SACSCOC website, and recorded in the *Annual Reports of SACSCOC*. Actions which are appealable will be accompanied by a statement that Commission action will not take effect until the time period for filing an appeal has expired or until final action has been taken on the appeal. The Commission policy on disclosure is also applicable to these actions.

Delay of Review Dates

If an institution is on Probation during the time of its scheduled reaffirmation of accreditation, the President of SACSCOC may act to defer action on reaffirmation pending resolution of the institution's probationary status. Likewise, if an institution is on Sanction at the time of its scheduled Fifth-year Interim review, the President of SACSCOC may act to defer the submission of the institution's Fifth-Year Interim Report pending resolution of the institution's status.

Definition and Conditions for Good Cause

If an institution has not remedied deficiencies at the conclusion of its two-year maximum monitoring period, the SACSCOC Board of Trustees must (1) remove the institution from membership, or (2) continue accreditation for "good cause". If accreditation is extended for "good cause," the institution must also be placed on or continued on Probation.

An institution's accreditation can be extended for "good cause" if

1. the institution has demonstrated significant recent accomplishments in addressing non-compliance (e.g., the institution's cumulative operating deficit has been reduced significantly and its enrollment has increased significantly), and
2. the institution has documented that it has the "potential" to remedy all deficiencies within the extended period as defined by the Committee on Compliance and Reports; that is, that the institution provides evidence which makes it reasonable for the Commission to assume it will remedy all deficiencies within the extended time defined by the Committee on Compliance and Reports, and
3. the institution provides assurance to the Commission that it is not aware of any other reasons, other than those identified by the SACSCOC Board of Trustees, why the institution could not be continued for "good cause."

The SACSCOC Board of Trustees may extend accreditation for "good cause" for a maximum of one year. At the conclusion of the period, the institution must appear before the Board of Trustees at a meeting on the record to provide evidence of good cause as to why its period for remedying deficiencies should be extended again for good cause. If an institution was on Probation both years of its two-year monitoring period following initial action on deficiencies, the institution is not eligible for good cause consideration because an institution cannot be on Probation for more than two consecutive years. Since continued accreditation for good cause imposes the sanction of Probation and a third year on Probation is against Commission policy, the institution is ineligible for consideration of good cause. (See above under "Probation.") In all cases, the institution bears the burden of proof to provide evidence why the Commission should not remove it from membership.

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