



CHEA International Quality Group

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# CHEA Standards and Procedures for Recognition

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*Approval supersedes prior Standards, Policies and Procedures*

# **CHEA MISSION STATEMENT**

The Council for Higher Education Accreditation (CHEA) serves its members, students, and society through advocacy for the value and independence of accreditation, recognition of accrediting organizations, and commitment to quality in higher education.

# **CHEA DIVERSITY, EQUITY, AND INCLUSION**

The Council for Higher Education Accreditation (CHEA), a nonprofit service organization, cultivates and supports an environment that demonstrates appreciation for and values the diversity of its institutions of higher education, accreditors, board and staff, and all who are served by these groups. We believe that life experiences and heritages of these groups contribute to the richness of CHEA's policies, procedures, and daily operations.

CHEA's commitment to diversity, equity, and inclusiveness guides its mission and its support for equitable treatment for institutions of higher education, families, and students.

Diversity, Equity, and Inclusion (DEI) are rooted in the cultural identity and lexicon of a civil society. However, in 2020, these words became aggressively polarizing among groups in America. Along with polarization, Americans either became fearful of their neighbors, separated from those who were different, or moved to a new awakening that there is much work to be done to reaffirm that America is indeed one nation, with liberty and justice for all.

CHEA believes in justice for all and supports the rights of every person to pursue their course of happiness in a just society. Colleges and universities are the bedrocks of change and foster free thinking, individualism, and freedom of just the simple right to "be."

CHEA's commitment to higher education, families, students, and other communities is grounded in the assurance of academic quality. We believe that the rich values of diversity, equity, and inclusion are inextricably linked to quality assurance in higher education. Additionally, CHEA affirms that diversity, equity, and inclusion contribute to student success and that student success contributes to a better, healthier, and more enlightened, progressive society.

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The references to the *CHEA Standards and Procedures for Recognition* and the *Recognition Standards* or *Standards* are used interchangeably and refer to the same document.

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# PREFACE

This Council for Higher Education Accreditation (CHEA) document, *CHEA Standards and Procedures for Recognition (Standards)*, provides guidance to accrediting organizations interested in pursuing CHEA recognition. The Standards, Procedures, and Key Terms specific to the CHEA recognition process are included in this document.

The CHEA recognition process is a rigorous examination of the aspiring accrediting organization or reexamination of an accrediting organization seeking continued recognition.

## ABOUT CHEA

CHEA was formed in 1996 as an organization committed to enhancing higher education through strengthened accreditation. Accreditation is a process of external quality review that is created and used by higher education that includes rigorous evaluation of institutions and programs for quality assurance and improvement. Recognition by CHEA conveys that the accrediting organization meets the CHEA Recognition Standards.

Accrediting organizations are entities structured to review and evaluate institutions or programs for the purpose of rendering accreditation judgments. CHEA recognizes non-governmental institutional and programmatic accrediting organizations. Recognition by CHEA affirms that the standards, structures, and practices of accrediting organizations promote ethical practices and integrity in decision-making, academic quality, improvement, accountability, and needed flexibility and innovation in the institutions or programs that are accredited.

CHEA serves members, students, and society through advocacy for the value and independence of accreditation, recognition of accrediting organizations, and commitment to quality in higher education. CHEA affirms that diversity, equity, and inclusion are inextricably connected to quality assurance.

CHEA recognition is separate and independent from that of the U.S. Department of Education.

# **RECOGNITION OVERVIEW**

## **PURPOSES**

Recognition signifies to the higher education community and the public that the accrediting organization:

- A. serves institutions and programs with the highest regard for integrity of practice and ethical behavior and demonstrates a commitment to diversity, equity, and inclusion;
- B. promotes academic quality and continuous improvement;
- C. serves higher education, students, and the public by communicating its accreditation decisions;
- D. makes determinations about academic quality in higher education;
- E. implements and enforces its standards and policies; and
- F. acknowledges and affirms the institution and program mission and purposes.

## **SCOPE OF RECOGNITION**

The accrediting organization's scope of recognition statement is used to inform the higher education community and the public of its CHEA-recognized accreditation activities. The scope statement must include the following information:

- A. types of institutions or programs;
- B. degree levels—CHEA recognition is available to accrediting organizations that accredit institutions or programs which grant degrees at the associate degree level or higher; and,
- C. geographic boundaries of accreditation activity.

## **TERM OF RECOGNITION**

The maximum term of CHEA recognition is seven years.

A CHEA-recognized accrediting organization undergoes a recognition review every seven years or such other period as designated by the CHEA Board of Directors (Board).

## **REQUIREMENTS FOR RECOGNITION**

The accrediting organization, regardless of whether it is seeking initial or continued recognition, must meet all current CHEA standards and requirements and prescribed timelines throughout the period of recognition. Noncompliance or misrepresentation of any information in the application can result in the withdrawal of recognition in accordance with these procedures.

## **REQUIREMENTS FOR CONTINUED RECOGNITION**

A CHEA-recognized accrediting organization is required to submit an Interim Report at the midpoint of its recognition term.

Additionally, a CHEA-recognized accrediting organization is required to submit a Substantive Change notification as detailed in the *CHEA Standards and Procedures for Recognition*.

# COMMITTEE ON RECOGNITION

**RESPONSIBILITIES.** The Committee reviews accrediting organizations' applications for initial and/or continued recognition and makes recognition recommendations to the Board. The Committee also has the responsibility to take Independent Actions, as listed below or otherwise approved by the Board.

**MEMBERSHIP.** Members of the Committee are appointed by the Board upon recommendation of the CHEA staff. The Committee is composed of individuals who represent higher education leadership, faculty, accrediting organizations, and others with expertise and experience in accreditation and academe. The Committee consists of nine members, each serving a three-year term. Members may be re-appointed for a maximum of two additional terms. Current Board members are ineligible for service on the Committee.

**MEETINGS.** The Committee, in consultation with CHEA staff, establishes the time, place, and procedures for its meetings including with respect to public comment and in accordance with the Recognition Procedures. The Committee considers all materials submitted by the accrediting organization and other materials relevant to the review. The Committee meets in open session to clarify the accrediting organization's application for recognition and/or for public comment and in closed session as needed.

**RECOMMENDATIONS TO THE BOARD.** The Committee shall recommend one of the following actions:

- A. recognition of the accrediting organization: The applicant demonstrates substantial compliance with the CHEA standards;
- B. denial of recognition: The applicant for initial recognition does not demonstrate substantial compliance with the CHEA standards; or
- C. withdrawal of recognition: The recognized accrediting organization no longer demonstrates that it meets the CHEA standards for recognition.

**INDEPENDENT ACTIONS.** The Committee has the authority to:

- A. approve submitted materials (e.g., Request for Change in Scope, Interim Reports, Follow-up Reports);
- B. request additional information;
- C. defer decision-making specific to recognition;
- D. modify the review cycle (e.g., review out of sequence); and
- E. take action as approved by the Board.

# **RECOGNITION STANDARDS**

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# **RECOGNITION STANDARDS**

CHEA requires that an accrediting organization comply with and provide evidence that it meets Standards 1-3 and Standard 4 if the accrediting organization engages in international accreditation activities:

**STANDARD 1** - Academic Quality and Student Achievement

**STANDARD 2** - Accountability and Transparency

**STANDARD 3** - Accreditation Structure and Organization

**STANDARD 4** - Capacity and Compliance for International Accreditation

## **STANDARD 1. ACADEMIC QUALITY AND STUDENT ACHIEVEMENT**

Advancement of academic quality and continuous improvement are at the core of accreditation. To be recognized, the accrediting organization provides evidence that it implements and enforces standards, policies, and procedures which:

- 1.A. advance academic quality using quantitative and/or qualitative measures;
- 1.B. detail how it supports the autonomy of an institution or program in determining academic quality as it relates to the mission of the institution or program;
- 1.C. require resources specific to ensuring adequate student preparation and health and safety; and
- 1.D. support implementation of innovative practices.

## **STANDARD 2. ACCOUNTABILITY AND TRANSPARENCY**

The accrediting organization implements and upholds standards, policies, or procedures that require:

- 2.A. the accrediting organization to inform the public of the institution's or program's accreditation status and the reason(s) for the accreditation action(s) within 30 calendar days of the organization's decision-making meeting in a readily accessible manner;
- 2.B. accredited institutions and programs to provide current, readily accessible, accurate data to the public regarding student learning outcomes and/or achievement data;
- 2.C. a timely response to all public concerns and complaints regarding an institution, a program, or the accrediting organization; and
- 2.D. the accrediting organization to take timely action to prevent substantially underperforming institutions or programs from maintaining accreditation.

## **STANDARD 3. ACCREDITATION STRUCTURE AND ORGANIZATION**

An accrediting organization demonstrates that it:

- 3.A. manifests a commitment to diversity, equity, and inclusion;
- 3.B. ensures ethical practices in its operations;
- 3.C. bases its accreditation decisions on how well an institution or program meets its

- accreditation standards;
- 3.D. requires an institution or program to meet all standards within a specified period of time not to exceed four years;
  - 3.E. makes clear distinctions between required actions and suggested actions for institution or program improvement;
  - 3.F. has a process to ensure consistency in accreditation reviews and accreditation actions while allowing for varying institutional or programmatic mission, purpose, and operation;
  - 3.G. engages in regular self-evaluation of its performance, standards, procedures, and policies and, where warranted, uses that information for improvement;
  - 3.H. maintains independence from any sponsoring and/or parent organization with respect to all accreditation activities, reviews, actions, and decisions;
  - 3.I. has sufficient financial, staff, and operational resources to perform and sustain its accreditation functions efficiently and effectively;
  - 3.J. ensures procedural due process in accreditation activities;
  - 3.K. publishes an appeals policy that informs the institution or program of the process to be used and actions that may be taken;
  - 3.L. has a conflict-of-interest policy that covers all accrediting organization staff, site visitors, and members of accreditation-recommending and decision-making bodies; and
  - 3.M. requires opportunities for participation by higher education professionals, the public, and practitioners in accreditation activities, such as accreditation reviews, decision making, policy setting, and review and revision of accreditation standards.

## **STANDARD 4. CAPACITY AND COMPLIANCE FOR INTERNATIONAL ACCREDITATION**

In addition to demonstrating compliance with Standards 1-3, the accrediting organization that accredits outside of the United States is required to demonstrate that it:

- 4.A. has the capacity and competence to engage in international accreditation activities;
- 4.B. notifies the appropriate international authorities or governmental agencies from which it receives legal authorization to operate of its intent and seeks guidance regarding the accrediting organization's current and proposed activities; and
- 4.C. applies standards that are substantially comparable to U.S. institutions and programs and if modifications are necessary, that information will be made public.

# ADDITIONAL PROVISIONS

**CONFLICTS OF INTEREST.** CHEA upholds the principle that members of the Committee and the Board and consultants, such as readers and experts (collectively, for purposes of this paragraph, “CHEA representatives”), will be impartial and objective in considering the recognition of accrediting organizations.

- A. When there is an actual or apparent conflict of interest, CHEA expects its representatives to recuse themselves from consideration of an accrediting organization as a matter of personal and professional integrity. The CHEA representative will have primary responsibility for compliance with this policy.
- B. CHEA representatives will recuse themselves from consideration of an accrediting organization where the CHEA representative receives monetary compensation from the accrediting organization as an employee or consultant or otherwise holds a position of authority or a governance role within the accrediting organization, such as commission member, director, or officer, whether paid or unpaid.
- C. In deciding whether to recuse themselves from consideration of an accrediting organization, CHEA representatives will take into account whether they:
  1. had in the recent past, or expect to have, a financial relationship or governance role with the accrediting organization applying for recognition;
  2. are participating in an accreditation review by the accrediting organization applying for recognition;
  3. have a financial relationship or governance role with an accrediting organization that is a direct competitor of an accrediting organization applying for recognition;
  4. have or have expressed a predisposition concerning an accrediting organization applying for recognition that would impair objectivity in the recognition process;
  5. have a close relative with a pertinent relationship, role, or predisposition concerning an accrediting organization applying for recognition; or
  6. other considerations they deem pertinent.
- D. In the event a CHEA representative, with respect to an apparent or actual conflict of interest, does not voluntarily recuse himself or herself, the Board may take such action as the Board considers appropriate.

**PERSONAL GAIN.** In the course of their CHEA service, CHEA representatives will observe high standards of personal integrity. For example, CHEA representatives will not solicit or accept, for themselves or any other person, gifts, gratuities, entertainment, loans, or other consideration from persons who are associated with an accrediting organization applying for recognition, an institution or program accredited by the accrediting organization, a direct competitor of the accrediting organization, or any other third party that the CHEA representative knows intends to comment on the accrediting organization in the recognition review; provided that this paragraph does not bar acceptance of items of insubstantial value, consistent with personal integrity, in the ordinary course of service as a CHEA representative.

**COMMUNICATIONS AND CONFIDENTIALITY.** CHEA representatives will maintain the confidentiality of information pertaining to the recognition process. During the recognition process, a CHEA representative will not discuss any confidential aspect of an application for recognition with the accrediting organization applying for recognition, an institution or program accredited by the accrediting organization, a direct competitor of the accrediting organization, or any other third party that intends to comment on the accrediting organization, except as required in order to discharge the responsibilities of the CHEA representative in the recognition review. CHEA representatives will refer inquiries concerning the recognition process to CHEA staff. CHEA will communicate the results of the recognition review to the accrediting organization and the public.

## AMENDMENT AND IMPLEMENTATION

**AMENDMENT AND IMPLEMENTATION.** CHEA reserves the right to amend the Standards, in whole or part, as it deems appropriate. Revisions to the Standards are approved by the Board and implemented at a specific date, as established by CHEA.

# **RECOGNITION PROCEDURES**

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# RECOGNITION PROCEDURES

## SECTION A: ELIGIBILITY REQUIREMENTS FOR RECOGNITION

To be eligible for CHEA recognition an accrediting organization must:

- A. be a non-governmental, U.S.-based organization;\*
- B. have current legal authority (e.g., articles of incorporation) to operate and have a governing board;
- C. accredit institutions or programs that have legal authority to:
  1. operate as higher education institutions or programs; and
  2. confer degrees at the associate degree level or higher.\*\*
- D. have a written mission statement, bylaws, policies, procedures, and standards that are appropriate for accrediting higher education institutions and/or programs:
  1. approved by its governing board; and
  2. readily accessible to the public.
- E. have accredited at least two institutions or programs at the time of application.

\* The Board may, at its discretion, consider request(s) for recognition application(s) from non-governmental, international accrediting organizations.

\*\* CHEA recognition extends only to accreditation activities that are at the associate degree level or higher. CHEA reserves the right to decline consideration of any application.

In accordance with the process outlined in the Application Narrative and Reports, the CHEA recognition process requires that the accrediting organization submit:

- A. a scope of recognition (refer to Recognition Overview); and
- B. an Application Narrative with accompanying documentation that demonstrates compliance with the CHEA Recognition Standards.

The Committee on Recognition is responsible for reviewing the Application Narrative and making a recommendation to the Board. In addition to recommending recognition, denial, or withdrawal of recognition, the Committee has the option to defer recognition.

The Committee may defer a decision to forward a recommendation regarding recognition to the Board when it finds an application for recognition to be incomplete or insufficient to make a recommendation.

The following policies govern deferral:

- A. An applicant for recognition can only be deferred once. The applicant has a maximum of one year to respond to the deferral.
- B. If an initial applicant is unable to respond to the Committee's request within one year, the accrediting organization may withdraw its application and re-apply in 12 months. If the accrediting organization chooses not to withdraw its application, the Committee may recommend a denial of recognition to the Board.
- C. A deferral of recognition for an accrediting organization seeking continued recognition results in the extension of the term of recognition by one year. If an applicant for continued recognition is unable to respond to the Committee's request within one year, the accrediting organization may voluntarily withdraw

from CHEA recognition and re-apply in 12 months. If the accrediting organization chooses not to withdraw its application, the Committee may recommend a withdrawal of recognition to the Board.

The CHEA recognition process, from application to a decision on recognition by the CHEA Board of Directors may take 12-18 months. CHEA staff are available to provide technical assistance and guidance throughout the process.

The accrediting organization must be responsive and compliant with all requirements and prescribed timelines. Non-compliance can result in deferral, denial or withdrawal of recognition.

CHEA reserves the right to attend a decision-making meeting of the governing board, without notice.

## **SECTION B: THE APPLICATION AND RECOGNITION PROCESS**

To be eligible for CHEA recognition an accrediting organization must:

- 1. INITIATE RECOGNITION.** For initial recognition, the accrediting organization seeks consultation with CHEA staff regarding the application, recognition process, and adherence to the eligibility requirements.

For continuing recognition, CHEA initiates the process approximately 18 months prior to the first of the calendar year in which the current term of recognition expires. (All terms of an accrediting organization's recognition expire on December 31 regardless of the date of Board action.)

- 2. APPLICATION FORM AND FEE.** After the staff consultation, the accrediting organization begins the formal recognition process by submitting the CHEA application form and the recognition fee.
- 3. APPLICATION NARRATIVE FOR RECOGNITION.** The accrediting organization submits the Application Narrative using the provided template, which requires the provision of written evidence that the accrediting organization meets the eligibility requirements and complies with each of the CHEA Recognition Standards.
- 4. CALL FOR THIRD-PARTY COMMENT (CHEA RESPONSIBILITIES).** No fewer than 90 calendar days prior to the Committee meeting at which the accrediting organization will be under consideration for recognition, CHEA publishes a call for third-party comments. All comments must be received by CHEA no later than 45 calendar days prior to the Committee's meeting.

Third-party comments must:

- A. be submitted in writing;
- B. include the name and affiliation of the individual(s) making the comment;
- C. be received by the announced deadline;
- D. be limited to items related to the accrediting organization's adherence to the CHEA Recognition Standards; and
- E. indicate desire to provide an in-person comment(s) at the regular Committee meeting.

Accrediting organizations are provided with the opportunity to review and respond to all third-party comments. All third-party comments and the accrediting organization's responses are submitted to the Committee in advance of its meeting to render a recommendation.

When in-person comments are made, the accrediting organization is afforded the opportunity to respond to those comments during the meeting.

- 5. PUBLIC ANNOUNCEMENT AND CALL FOR THIRD-PARTY COMMENT (ACCREDITING ORGANIZATION RESPONSIBILITIES).** The accrediting organization is required to:

- A. publish on its website no fewer than 90 calendar days prior to the Committee meeting at which it will be under consideration for recognition

- (using the CHEA third-party comment statement) that the organization is engaged in the CHEA recognition process;\* and
- B. provide CHEA evidence of compliance with this requirement.

*\*If an accrediting organization does not have a website, it must present evidence of how its engagement in the CHEA recognition process has been publicly shared with its communities of interest.*

- 6. ACCREDITING ORGANIZATION PUBLIC PRESENTATION TO THE COMMITTEE.** The Committee holds a public session as part of its regular meeting for those accrediting organizations engaged in the CHEA recognition process. The accrediting organization is expected to participate in the public session. The accrediting organization will have the opportunity to make opening and closing comments, offer information in support of its application, and respond to the Committee's questions. The public session is the final opportunity for the accrediting organization to provide information supporting its application for recognition to the Committee.

CHEA is to be notified of the names and titles of the individuals representing the accrediting organization no later than 30 calendar days prior to the meeting. The accrediting organization is usually represented by the executive officer of the accrediting unit and the chair of the decision-making body.

Following the public session, the Committee meets in closed session to discuss the accrediting organization's written materials and responses provided in public session.

A transcript/recording of the public session is available upon request.

- 7. WRITTEN NOTICE BY THE COMMITTEE.** After the Committee meeting to review an application, the Committee submits its findings and recommendations to the Board with notification to the accrediting organization. The accrediting organization is afforded 30 calendar days to respond to the recommendation of the Committee. The timing of receipt of the response by the accrediting organization may affect the accrediting organization's schedule of review by the Board.

- 8. WITHDRAWAL OF RECOGNITION APPLICATION.** An application may be withdrawn by the accrediting organization up to 48 hours prior to the meeting where the Board is scheduled to take action. If an accrediting organization withdraws an application for recognition, a new application cannot be submitted for at least one full year from the formal date of withdrawal of the application.

- 9. ACTION BY BOARD OF DIRECTORS.** The Board considers the Committee's findings and recommendations at its next regular meeting. Board actions include the following:

- A. grant initial or continuing recognition;
- B. deny initial recognition;
- C. withdraw recognition; or
- D. other actions as deemed appropriate.

The Board's decision may or may not be congruent with the Committee's recommendation.

The Board also has the discretion to take independent action at any time as warranted. In such cases, the Board will inform the accrediting organization of the alleged non-compliance and will provide the organization with an opportunity to respond in accordance with the Standards and Procedures.

**10. WRITTEN NOTICE BY THE BOARD OF DIRECTORS.** The accrediting organization is notified of the Board's decision within 30 calendar days of the Board's meeting. If the Board recognizes an accrediting organization, the notice will specify the accrediting organization's CHEA-recognized scope of accreditation, the period of recognition, and any reporting requirements. All Board decisions will be final and effective as of the date of the Board decision, except for decisions to deny or withdraw recognition. If the Board's action is to deny or withdraw recognition, the written notice will provide the procedures for an accrediting organization to request reconsideration of the Board's decision. A Board decision to deny or withdraw recognition will not become final until the time period to request reconsideration has lapsed or a request for reconsideration has been resolved by the Board, whichever occurs later.

**11. PUBLIC NOTICE.** Board actions are made public and include a summary of the reason(s) for the decision. However, if the Board decision is to deny or withdraw recognition, the decision is not final or made public until the period for reconsideration has lapsed or a request for reconsideration has been resolved by the Board, whichever occurs later.

**12. RECONSIDERATION OF BOARD ACTION.** An accrediting organization may request reconsideration of the Board's action based on any of the following:

- A. any asserted procedural errors in the recognition process; and/or
- B. any asserted factual errors.

A request for reconsideration must be submitted to CHEA, in writing, within 14 calendar days of receiving notification of the Board's action and must detail the basis of the reconsideration, which must, at the Board's discretion, reasonably satisfy the requirements of subsections (A.) or (B.) referenced above.

If the reconsideration request is granted, the accrediting organization has the option to appear at a special non-public meeting before the Board. A time for appearance before the Board will be scheduled by CHEA; this may be accomplished virtually or in-person, at the Board's discretion. The accrediting organization may have counsel present to advise during its appearance before the Board, but counsel may not speak unless requested to do so by the Board. A decision by the Board on reconsideration is final and will become effective following the decision of the Board. The Board will issue its written decision to the agency within 7 calendar days of the Board meeting, absent unforeseen circumstances reasonably warranting additional time. The decision will be made public within 14 calendar days following the Board meeting.

*Only decisions to deny or withdraw recognition may be reconsidered.*

**13. APPLICATION AFTER DENIAL OR WITHDRAWAL OF RECOGNITION.** An accrediting organization may not reapply for at least one full year from the date of denial or withdrawal of recognition.

## SECTION C: REPORTS FOR CONTINUED RECOGNITION

**14. INTERIM REPORT.** A recognized accrediting organization submits the Interim Report at the midpoint of the term of recognition. The due date of the Interim Report is provided in the Board letter granting CHEA recognition. A reminder of the Interim Report deadline is provided six months prior to the due date of the report.

The Interim Report provides information:

- A. regarding its capacity to fulfill the accrediting organization's CHEA-recognized scope;
- B. that it continues to make public the reasons for its accreditation decisions; and
- C. that student learning outcomes and/or achievement data are readily accessible to the public.

**15. FOLLOW-UP REPORT.** A recognized accrediting organization may be required to submit a Follow-up Report if its Interim Report or Application Narrative is insufficient.

*Note: An accrediting organization is subject to withdrawal of recognition if it fails to submit the Interim or Follow-up Report by the required deadline. The recommendation of the Committee to withdraw recognition is submitted to the Board for action. The accrediting organization will be notified in writing of the pending recommendation prior to it being submitted to the Board.*

## **SECTION D: SUBSTANTIVE CHANGES**

**16. CHANGES REQUIRING NOTIFICATION.** The accrediting organization is required to notify CHEA of substantive change(s) to the following:

- A. governance;
- B. financial condition;
- C. mission;
- D. operations;
- E. relationship with parent or sponsoring organization;
- F. standards, policies, or procedures; and
- G. editorial changes to the CHEA-recognized scope.

Accrediting organizations must timely notify CHEA of all substantive changes (A.-G.) within 60 calendar days of implementation of the change(s). Substantive changes are reviewed by the Committee to determine if such changes affect compliance with CHEA standards, including the accrediting organization's capacity to successfully administer the substantive change(s). The Committee reserves the right to request additional information regarding the substantive change(s) notification(s).

**17. CHANGES REQUIRING COMMITTEE APPROVAL.** Change in scope requires approval by the Committee. Proposed changes can be submitted at any time. Substantive changes to the CHEA-recognized scope include:

- A. change in the type(s)of institutions and programs;
- B. addition or removal of a degree level;
- C. change of geographical boundaries of accreditation activity (i.e., United States and international locations); and
- D. addition or removal of a professional field of study.

A change in the CHEA-recognized scope of accreditation requires that the accrediting organization submit the following:

- A. current CHEA-recognized scope statement;
- B. proposed CHEA-scope statement;
- C. reasons for the proposed change(s);
- D. evidence that the proposed change(s) were made public;
- E. evidence that the decision-making body has approved the change;
- F. evidence that the new proposed scope has been effectively implemented at a minimum of two institutions or programs; and
- G. evidence that the accrediting organization's capacity is adequate to accommodate the proposed change in scope.

The Committee reviews the request at its next scheduled meeting providing that the request is received at least 45 calendar days prior to the scheduled meeting. CHEA notifies the accrediting organization of the Committee's decision to approve, deny, or seek additional information.

## SECTION E: GRIEVANCE POLICY

**18. GRIEVANCE POLICY.** CHEA reviews grievances that are submitted in writing, signed and dated by the complainant, and which allege non-compliance with a specific CHEA Standard and/or Procedure by a recognized accrediting organization. Such grievance is forwarded to the respective accrediting organization for review and response in accordance with this Policy. However, if a grievance does not allege non-compliance with the CHEA Standards and Procedures or does not provide adequate specificity as to the alleged non-compliance, the complainant will be notified that the grievance does not meet the review criteria.

Grievance(s) that meet the requirements above are forwarded to the accrediting organization within 21 calendar days of receipt by CHEA.

The accrediting organization must respond to CHEA within 30 calendar days of receipt of the grievance with a written narrative addressing each issue raised in the grievance. Upon receipt of the accrediting organization's response, the Committee reviews the grievance and response at its next meeting. The Committee's review may include a request for additional information from either the complainant, the accrediting organization, or both. In accordance with the *CHEA Standards and Procedures for Recognition*, the Committee makes a determination regarding the resolution of the grievance in accordance with its established policies and procedures as appropriate. Recognized accrediting organizations are expected, as a condition of continued recognition, to timely participate in the grievance process, cooperate with any requests for information from the Committee, and follow any corrective actions determined by the Committee.

After the Committee has completed its review, notice that a final disposition of the grievance has been reached will be provided to all parties. Notice may or may not include specific details of any further action, at the discretion of the Committee.

# KEY TERMS

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# KEY TERMS

This section describes key terms within the Standards. The terms apply only to the Standards and are not intended for use with any other statement or policy.

**Academic Quality:** The evidence of performance associated with teaching, learning, research, and service, including the integrated way in which learning, practice, and discovery are fostered by institutions and programs. Academic quality includes the expectations that institutions or programs have of students and the effort those institutions and programs accord to the promotion of student success.

**Accrediting Organization:** An entity whose purpose is to monitor the academic and administrative quality of its members, which are either institutions or academic programs.

**Accreditation Action:** The decision made by the accrediting organization resulting from an institutional or program review.

**Accreditation Status:** The classification granted to an institution or program by the accrediting organization as a result of a review. Such status may include, but is not limited to, accredited or reaffirmation of accreditation, candidacy or pre-accreditation, provisional accreditation, probationary accreditation, or other classification defined in the accrediting organization's policy.

**Committee on Recognition:** Appointed by the CHEA Board of Directors for the purpose of reviewing applications for recognition and other required reports.

**Conflict of Interest:** Circumstances, whether real or perceived, that may compromise the professional judgment or actions of any individual who could influence decision making.

**Deferral (for initial consideration of recognition):** Granting of additional time to a new applicant accrediting organization to demonstrate compliance with the CHEA Standards.

**Extension of Recognition (for continuing recognition):** An extension of time (one calendar year) given to an accrediting organization that is currently recognized by CHEA to demonstrate compliance with the CHEA Standards.

**Follow-up Report:** A report required, subsequent to the Interim Report or Recognition Review process.

**Innovation:** Designing, implementing, and/or supporting new initiatives that advance academic quality.

**Interim Report:** The report to be submitted at the midpoint of the CHEA recognition term. The Interim Report addresses specific criteria defined by CHEA to demonstrate continued compliance with the CHEA Standards.

**Practitioner:** A member of an accrediting decision-making body who is actively engaged in a specific discipline or profession represented by the accrediting organization.

**Public:** Any individual who is not associated with the profession that is represented by the accrediting organization.

**Readily Accessible:** The ease with which information provided by institutions, programs, or accrediting organizations can be identified, located, and obtained by the intended public.

**Recognition or Recognized:** The status granted by the CHEA Board of Directors after an accrediting organization successfully completes the CHEA review process.

**Recognition Standards:** The requirements that an accrediting organization must meet to achieve CHEA recognition.

**Sponsoring and/or Parent Organization:** An organization with a direct or indirect affiliation or agreement with the accrediting organization. The affiliation may include any management, financial, or other oversight capacity but does not limit, influence, or control accreditation activities.

**Substantive Change:** Any significant modifications to governance, financial condition, mission, operations, relationship with parent or sponsoring organization, standards, policies, or procedures.

**Transparency:** Public accessibility to information regarding the accreditation process, results of accreditation reviews, and student achievement.

# **SUGGESTED EVIDENCE**

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# SUGGESTED EVIDENCE FOR DEMONSTRATING COMPLIANCE WITH THE CHEA RECOGNITION STANDARDS

## APPLICATION NARRATIVE AND REPORTS

To assist accrediting organizations submitting an application for recognition or required reports to CHEA's Committee on Recognition, CHEA has developed a list of suggested documents and evidence that could be provided to demonstrate compliance with each of CHEA's Recognition Standards. Note, that in some instances, the same governing documents and examples may be used to demonstrate compliance with multiple Standards and Standards subparts.

CHEA appreciates the diversity of the accrediting organizations that it recognizes, and as a result, these examples are suggestions; they are neither prescriptive nor exhaustive. Other types of evidence may be provided presuming the evidence clearly demonstrates the organization's compliance with CHEA's Recognition Standards.

**REQUIREMENTS:** As part of the recognition (initial or continuing) process, the accrediting organization is required to submit an Application Narrative (in pdf format) that addresses CHEA Standards 1.-3., and Standard 4. (as appropriate), including each Standard's subparts.

1. The submission of the Application Narrative must include the provision of core documents including but not limited to:
  - A. Standards for Accreditation
  - B. Policies and Procedures
  - C. Accreditation Handbook
  - D. Operating Manual
  - E. By-Laws and Articles of Incorporation
  - F. Additional governing documents as appropriate

*Please Note:*

*Other governing documents can be substituted.*

*Links (when applicable) to an electronic version of the aforementioned documents must be provided within the CHEA Application Narrative.*

2. The Application Narrative must include either a proposed CHEA scope statement (if seeking initial CHEA recognition) or the current CHEA scope of recognition (as previously approved). The CHEA scope statement must include:
  - A. types of institutions or programs;
  - B. degree levels included in accreditation activity; and
  - C. geographic boundaries of accreditation activity

For example:

*The [accrediting commission] accredits baccalaureate and graduate degree programs in [insert profession] in the United States and its territories.*

Or

*The [accrediting commission] accredits institutions that award associate and baccalaureate degrees. All accredited institutions are located in the United States, its territories, Canada and/or Mexico.*

3. Responses provided in the Application Narrative should be brief and specifically address the Standard and its subpart(s). Specifically:

- A. Cite the accrediting organization document (e.g., Policies and Procedures) that addresses the CHEA Standard (e.g., Standard 1.A.) and provide the appropriate reference within that document as well as an electronic link. For instance:

*The ABC Commission on Accreditation's definition of academic quality is found in its Standards for Accreditation, in Standard II.C., page 4. The definition of academic quality is [insert definition].*

Note: A link would be provided to Standard II.C., page 4.

- B. Submit and reference examples (linked electronically) that provide evidence all accrediting organization Standards have been implemented and that each of the CHEA Standards (1.-3., and 4. as appropriate) are met. For instance, regarding Standard 2.C.:

*The ABC Commission on Accreditation's policy on Complaints and Concerns can be found in the Accreditation Handbook (page 18). Examples of complaints received and the responses to those complaints demonstrating compliance with the policy are found in Appendix 2.*

Note: Links would be provided to page 18 of the Accreditation Handbook, examples of complaints and the responses to the complaints found in Appendix 2.

# **EXAMPLES FOR COMPLIANCE WITH THE CHEA RECOGNITION STANDARDS:**

## **STANDARD 1. ACADEMIC QUALITY AND STUDENT ACHIEVEMENT**

Advancement of academic quality and continuous improvement are at the core of accreditation. To be recognized, the accrediting organization provides evidence that it implements and enforces standards, policies, and procedures which:

- 1.A. advance academic quality using quantitative and/or qualitative measures;
- 1.B. detail how it supports the autonomy of an institution or program in determining academic quality as it relates to the mission of the institution or program;
- 1.C. require resources specific to ensuring adequate student preparation and health and safety; and
- 1.D. support implementation of innovative practices.

### **1.A. EXAMPLES OF SUGGESTED EVIDENCE:**

- Identify and provide the specific Standards, Policies, and Procedures that advance academic quality and how it is measured at the institutional or program level.
- Provide examples of how the Standards, Policies, and Procedures advance academic quality using quantitative and/or qualitative measures.
- Describe the characteristics/attributes of the accrediting organization's view of academic quality including examples of instances where an institution or program does and does not meet its definition of academic quality. For programmatic accrediting organizations, the characteristics/attributes should include the knowledge, skills, practices, and habits of mind it expects of graduates.

### **1.B. EXAMPLES OF SUGGESTED EVIDENCE:**

- Provide examples of how the Standards, Policies, and Procedures are applied to institutions and programs with different missions.
- Describe how the accrediting organization supports autonomy of the institution's or program's mission as related to the defined characteristics of academic quality.

### **1.C. EXAMPLES OF SUGGESTED EVIDENCE:**

- Describe the rationale for standards that specify resource requirements (e.g., faculty, physical facilities). The rationale should include information and/or data that supports the need for the specified resource requirement(s). If the accrediting organization does not have specific resource requirements, provide examples of how determinations are made that institutions and/or programs demonstrate that their resources are adequate.

### **1.D. EXAMPLES OF SUGGESTED EVIDENCE:**

- Identify and provide the specific Standards, Policies, and Procedures that support innovative practices related to student achievement.
- As appropriate, provide examples of innovative practices that institutions or programs have implemented.

## **STANDARD 2. ACCOUNTABILITY AND TRANSPARENCY**

The accrediting organization implements and upholds standards, policies, or procedures that require:

- 2.A. the accrediting organization to inform the public of the institution's or program's accreditation status and the reason(s) for the accreditation action(s) within 30 calendar days of the organization's decision-making meeting in a readily accessible manner;
- 2.B. accredited institutions and programs to provide current, readily accessible, accurate data to the public regarding student learning outcomes and/or achievement data;
- 2.C. a timely response to all public concerns and complaints regarding an institution, a program, or the accrediting organization; and
- 2.D. the accrediting organization to take timely action to prevent substantially underperforming institutions or programs from maintaining accreditation.

### **2.A. EXAMPLES OF SUGGESTED EVIDENCE:**

- Description of process for informing the public of accreditation actions and decisions and the timeframe for making that information public; an accrediting organization could post:
  - Official accrediting organization board communication to the institution/program regarding the final decision(s) that includes the date of the decision-making meeting; or
  - Official decisions by the accrediting organization on the accrediting organization's website and/or on a platform that is readily accessible to the community of interest and includes the date of the decision-making meeting and the date of posting; and
  - Any response to public inquiry regarding the accreditation decision.
  - Definitions of accreditation statuses used by the accrediting organization inclusive of the meaning of different reporting requirements.
- A list of all accredited institutions or programs that includes accreditation status, the reasons for the accreditation decision, and any reporting requirements. For example:
  - XYZ program - Term of accreditation July 1, 2021-December 31, 2031, (all standards met at time of accreditation decision). An Interim Report is due at the midpoint of the accreditation term (July 1, 2026).
  - ABC institution - Board Action- Accreditation awarded January 1, 2021, for a term of 5 years. A follow-up report is due in 12 months to address transfer of credit policies.

Note: Typically, this information is provided in a direct link from the accreditor's homepage to a directory of accredited institutions or programs. However, this information could also be provided in a published (website or other medium) summary of accreditation actions and decisions.

**2.B. EXAMPLES OF SUGGESTED EVIDENCE:**

- Information on student learning and/or achievement is available on the websites of accredited institutions or programs. The information is one click away from the institution's or program's homepage. The name of the link is easily understood by the public. The information should have context. For example, if retention or graduation is the measure provided it should be the percentage of an entering cohort.
- Posting on institution's website or readily accessible platform of student qualitative and/or quantitative student achievement data.
- Description of data and whether the data reflect the intended expectation of academic quality as described in Standard 1A.
- Description as to how the accrediting organization monitors the published information and provides feedback to institutions and programs.
- Identify and provide the specific Standards, Policies, and Procedures that address the data required on student learning outcomes and/or achievement.

**2.C. EXAMPLES OF SUGGESTED EVIDENCE:**

- If concerns have been raised, provide the timeline for how the complaint(s) was handled.
- Description of process including time delineation for reconciling public concerns and complaints.
- Examples (as appropriate) of complaints that reflect implementation of the accrediting organization's policies and procedures specific to complaints.

**2.D. EXAMPLES OF SUGGESTED EVIDENCE:**

- Describe how the organization communicates with state or federal entities that have oversight for higher education to receive information they have that might affect an institution's or program's accreditation status.
- Provide timelines for processing and responding to monitoring reports such as follow-up reports, progress reports or annual reports or any other actions required of institutions or programs.
- Highlight policies and/or procedures the organization would use if it became aware of poor performance in between formal/comprehensive reviews.
- Describe how the accrediting organization documents warnings and procedures for corrections of low-performing institutions or programs. Include examples (as appropriate).

## **STANDARD 3. ACCREDITATION STRUCTURE AND ORGANIZATION**

An accrediting organization demonstrates that it:

- 3.A. manifests a commitment to diversity, equity, and inclusion;
- 3.B. ensures ethical practices in its operations;
- 3.C. bases its accreditation decisions on how well an institution or program meets its accreditation standards;
- 3.D. requires that all standards be met within a specified period of time not to exceed four years;

- 3.E. makes clear distinctions between required actions and suggested actions for institution or program improvement;
- 3.F. has a process to ensure consistency in accreditation reviews and accreditation actions while allowing for varying institutional or programmatic mission, purpose, and operation;
- 3.G. engages in regular self-evaluation of its performance, standards, procedures, and policies and, where warranted, uses that information for improvement;
- 3.H. maintains independence from any sponsoring and/or parent organization with respect to all accreditation activities, reviews, actions, and decisions;
- 3.I. has sufficient financial, staff, and operational resources to perform and sustain its accreditation functions efficiently and effectively;
- 3.J. ensures procedural due process in accreditation activities;
- 3.K. publishes an appeals policy that informs the institution or program of the process to be used and actions that may be taken;
- 3.L. has a conflict-of-interest policy that covers all accrediting organization staff, site visitors, and members of accreditation-recommending and decision-making bodies; and
- 3.M. requires opportunities for participation by higher education professionals, the public, and practitioners in accreditation activities, such as accreditation reviews, decision making, policy setting, and review and revision of accreditation standards.

**3.A. EXAMPLES OF SUGGESTED EVIDENCE:**

- Make-up of staff, board, committee, and site review team rosters reflecting membership diversity.
- Standards that foster diversity of theories, points of view, and experiences in institutions and academic programs.
- Inclusion of value statement regarding Diversity, Equity, and Inclusion (DEI) in its official mission statement.
- Evidence of integration of DEI in its policies and procedures.

**3.B. EXAMPLES OF SUGGESTED EVIDENCE:**

- Description of training procedures for ethical practices in reviews and or visits.
- Signature documents indicating site evaluators agreement to demonstrate professional and ethical behavior when serving on behalf of the accrediting organization.

**3.C EXAMPLES OF SUGGESTED EVIDENCE:**

- Provide evidence that the accrediting organization has a governing board that meets regularly for the purpose of making accrediting decisions. Evidence may include written meeting minutes, links to recorded proceedings, etc.
- Describe how the board/commission/committee determines whether an institution or program is in compliance with its Standards and Procedures.

**3.D. EXAMPLES OF SUGGESTED EVIDENCE:**

- Provide copies of letters to institutions or programs that identify deficiencies identified in the review process including the requirements for coming into compliance with these deficiencies.
- Provide the Policies and Procedures that describe the actions that may be taken to bring the institution or program into compliance with all standards as well as the timeline for those actions; include actions that may be taken if compliance is not demonstrated in a timely manner.

**3.E. EXAMPLES OF SUGGESTED EVIDENCE:**

- Specific language in policy documents that delineate those items that must be addressed and those that are optional.
- Provide copies of letters that clearly distinguish between issues that need to be addressed and suggestions for improvement.

**3.F. EXAMPLES OF SUGGESTED EVIDENCE:**

- Provide a documented process regarding accreditation reviews and actions with examples of how accreditation actions are consistently implemented among varying institutions or programs.
- Describe the processes that are in place to ensure consistency in decision-making and whether there is sufficient evidence to determine that a standard or a subpart of a standard is met. For example, inter-rater reliability practices, orientation and training.

**3.G. EXAMPLES OF SUGGESTED EVIDENCE:**

- List the information, and/or measures, comparisons and benchmarks used in evaluation and how these affirm/support current standards, policies, and practices or how the collected information has led to changes.
- Provide a sample of internal evaluation process and findings and how those findings are used to modify accreditation processes.

**3.H. EXAMPLES OF SUGGESTED EVIDENCE:**

- Description of how the accrediting organization's accreditation activities are separate and independent from those of its parent.
- Memorandum of Understanding that confirms the separation.
- Formal (legal) documents ascertaining independence from sponsoring and/or parenting organization.
- Documents demonstrating legal authorization to operate as an accrediting organization.

**3.I. EXAMPLES OF SUGGESTED EVIDENCE:**

- Number of payroll staff (e.g., full-time, part-time, contract, consulting).
- Overview of accrediting organization's major expenditures and assets.
- Provide budgeted and actual revenue and expenditures for the prior two years, the current year, and projection for next year. Provide balance sheet. If revenue is provided by the parent organization, this should be included and evident in the balance sheet.
- Provide organizational chart. Describe how the staff is adequate to meet the scope of the agency's operations.

**3.J. EXAMPLES OF SUGGESTED EVIDENCE:**

- Description of due process policies applicable to all aspects of the accreditation process, including but not limited to eligibility, comprehensive review process, award of accreditation, appeals, reconsideration decisions, etc.
- Provide Procedures documents where due process is detailed.

**3.K. EXAMPLES OF SUGGESTED EVIDENCE:**

- Procedures documents specific to the appeals process.
- Website link to appeals policy.
- Source as to where appeals policy is located for public, institution or program.
- Examples of letters where the appeals policy is explained to the institution or program.

**3.L. EXAMPLES OF SUGGESTED EVIDENCE:**

- Provide conflict of interest policy(s) (if there is more than one, e.g., one for staff and another for volunteers, provide all pertinent policies.)
- Examples of form(s) and process used for identifying conflicts of interest for accrediting organization staff and volunteers including board and committee members, site visitors, etc. Forms should include signatures.
- Detail record keeping related to conflict of interest.

**3.M. EXAMPLES OF SUGGESTED EVIDENCE:**

- Three years of rosters for board/commission, committees, site review teams, and other accrediting activities that identify the community they represent (e.g., public, practitioner, faculty).
- Example of a previous solicitation call for participation by the public.
- Example of a solicitation call to practitioners in accreditation activities.

## **STANDARD 4. CAPACITY AND COMPLIANCE FOR INTERNATIONAL ACCREDITATION**

In addition, to demonstrating compliance with Standards 1-3, the accrediting organization that accredits outside of the United States is required to demonstrate that it:

- 4.A. has the capacity and competence to engage in international accreditation activities;
- 4.B. notifies the appropriate international authorities or governmental agencies from which it receives legal authorization to operate of its intent and seeks guidance regarding the accrediting organization's current and proposed activities; and
- 4.C. applies standards that are substantially comparable to U.S. institutions and programs and, if modifications are necessary, that information will be made public.

**4.A. EXAMPLES OF SUGGESTED EVIDENCE:**

- Describe staff availability and expertise related to language and culture of non-U.S. countries in which the organization will accredit institution or programs.

**4.B. EXAMPLES OF SUGGESTED EVIDENCE:**

- Copies of the organization's correspondence with international authorities or governmental agencies from which it receives legal authorization to operate of its current and proposed activities.
- Copies of documented approval letters from international authorities or governmental agencies from which it receives legal authorization to operate of its current and proposed activities.

**4.C. EXAMPLES OF SUGGESTED EVIDENCE:**

- Description of the decision-making process for allowing modifications to application of standards. Any examples of such modifications in the past three years and how those modifications were made public.





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