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Revised: July 2021
V. STUDENT POLICIES

Institutional Policy on Student Records
Policy on Emergency Preparedness in the College of Biomedical Sciences
Policy on Maintenance & Security of Student Records
Policy on Student Complaints & Reporting Procedures
Policy on Student Rights & Responsibilities
Policy on Complaints Related to Accreditation Standards
Policy on Distance and Correspondence Education
SACCOC Policy on Distance and Correspondence Programs
SACSCOC Policy on Maintenance of Student Records
Larkin University  
18301 N. Miami Ave.  
Miami, FL 33169  

Institutional Policy on Confidentiality of Student Records  

Purpose: The purpose of this policy is to confirm that Larkin University will maintain compliance with FERPA at all times. Details of the policy are outlined in the Student Handbook of each respective college.

Policy: Larkin University complies with The Family Educational Rights and Privacy Act (abbreviated FERPA, and formerly known as the Buckley Amendment). Educational institutions are required to annually notify enrolled students of their rights under the Federal Family Educational Rights and Privacy Act of 1974 (FERPA), as amended. The Student Handbook will annually, provide information about the university policy and students’ rights with respect to their education records. Please refer to the Student Handbook of the respective college for complete information on student records. In summary, it is the policy of the university (1) to permit students to inspect their education records, (2) to limit disclosure of personally identifiable information from education records without students’ prior written consent, and (3) to provide students the opportunity to seek correction of their education records where appropriate. A student alleging university noncompliance with the Family Educational Rights and Privacy Act has the right to file a written complaint with the Family Policy Compliance Office:

Family Policy Compliance Office  
U.S. Department of Education  
400 Maryland Avenue, SW  
Washington, D.C. 20202-5920

Implementation: May 1, 2019

Maintenance and Review of the Policy: It is the responsibility of the Dean of each respective college working in collaboration with the Registrar to ensure implementation and monitoring of this mandatory policy. This policy will be reviewed every four years for its effectiveness. All administrative policies of Larkin University can be accessed electronically at ularkin.org or can be obtained from the Human Resources Department.

Document History
Date adopted by Board of Trustees: 4-19
Date reformatted: 4-19
Date reviewed: 7-21
Next scheduled review date:
Policy on Emergency Preparedness in the College of Biomedical Sciences

PURPOSE

It is the expectation that at some point in time, Larkin University COBS located in Miami, Florida will be faced with either a natural disaster or emergency which will impede the full operation of our facility or cause a disruption in our educational programs. We are located in an area which is subject to the potential of hurricanes, but other disasters or emergencies may also occur. The purpose of this policy is to assist students, faculty, staff and administration to better function should a disruption occur and to provide guidance regarding the impact a disaster might have on them personally as well as on their educational program. In the event that the President/CEO declares a campus state of emergency Larkin University has several comprehensive emergency policies in place, which are located at the following website: https://ularkin.policystat.com for your review.

SCOPE

This mandatory policy applies to all faculty, staff, and administration in the College of Biomedical Sciences.

DEFINITIONS

Emergency or Natural Disaster; Any situation which impacts the ability of Larkin University to carry out its normal business or educational activities and programs. This applies to either natural or man made disaster or crises situation which prohibits the natural course of operations.

POLICY

Larkin University has several comprehensive emergency policies in place, which are located at the following website: https://ularkin.policystat.com for your review. The details in the following policy applies to students, staff, faculty and administration of the COBS and will in addition to the University policies provide guidance on handling an emergency situation in the College should it occur. Every effort will be made to be available to address any issue or concern which may arise.

Communication During an Emergency: One of the most important issues during an emergency is the ability
to communicate amongst each other and with all members of Larkin University. Each employee in the COBS, is requested to:

A. Provide the Dean with a cell phone that gives the highest chance you can be reached at.
B. Check and respond to email communication daily, your Larkin email will be the primary means of communication.
C. Office phones of all employees should be forwarded to either the employee’s cell phone or another landline at which the employee can be reached during business hours... The IT department can assist if needed, contact Dr. Jorge Machado.
D. The Biomedadmissions phone line should be forwarded to the COBS admission staff and the Dean.
E. The group email for our students is “BioYEAR”, for example, Bio2020. This is the best way to communicate with students as they are all on the group email list. Using the group email assures, no student is inadvertently left off a communication.

Educational Program:

A. It is the intent of the COBS to continue to provide all educational programs and all courses should an emergency situation arise. If the physical classroom is not a viable option, and the College is requested to transition to virtual instruction, the “Go To Meeting” platform, Microsoft Teams or other reliable electronic platforms will be utilized. The decision which platform to use is made by the Dean after consultation with licensing and accreditation authorities to ensure integrity of the programs. In case of remote delivery, faculty will send an invitation to students using the group email, to invite all of them to join your live session at the date and time indicated in your syllabus. Students will need to click on the link provided in the email or follow other login instructions provided, which will automatically take them into the class session. Students should have the camera working. Everyone will be able to see each other, talk with each other, see the faculty power point and ask questions live or through a “chat button”. All sessions will be recorded during an emergency, in the event they are needed at a later time.

Attendance: In the COBS, attendance is required. Should an emergency occur, attendance will continue to be required, however it may not be physically in the classroom. Students will be expected to join face to face instruction using technology platforms, or join by audio and video in a class or instructional sessions scheduled in the course syllabus.

Research: As an emergency or disaster emerges, research activities on the Larkin University campus may be impacted. This could mean they are delayed, slowed or closed for a period of time. Communication between the PI’s and CEO will be crucial, as university priorities may shift due to the circumstances. Every effort will be made to ensure the operation of equipment, research specimens, etc. It may be necessary for the PI to relocate or postpone research activities. Refer to the protocols and policies to familiarize yourself with available options, including flexibility of submissions, reports, etc. The inability to complete research activities due to an emergency situation will be considered in the submission of faculty appointment, evaluation or promotion.
Clinical Shadowing: In the event of an emergency or natural disaster a COBS student is not expected to attend clinical shadowing experiences. Please notify the physician in advance, that you will not be participating during this time. If you are a healthcare provider, you are not required to assist as a student, however, you may opt to assist at a facility through coordination with your physician supervisor.

Presentations: If a student is scheduled to do a case study or presentation (individual or group) for an assignment in a course, these can be done through the utilized online platform. Please notify the instructor, so they can send an “invitation” to other members of the class, so they are able to join and view your presentation.

A. Examinations over course content will continue in your courses based upon the current syllabus. If essential, faculty may modify the schedule with the consultation of the faculty and Dean so as not to unduly burden the student. Examinations will be administered through the electronic testing platform “ExamSoft” to ensure the integrity and fairness of the exam for all members of the program, college and university. An exam link is sent to students in advance, which must be downloaded prior to the start of the exam. The examination will begin with an access code provided only at the time of the exam. During the specific testing period, all other functions on your computer are frozen. Students and Faculty will have the opportunity to learn and become familiar with this testing platform, if they have not had prior experience using it for exams in the past.

Grading: Faculty members should continue to enter attendance, participation, presentation, exam scores, etc. into their respective courses through Canvas, the education learning management system used by the COBS. As your course continues operation, please be vigilant to enter this data and keep it updated. This will avoid excessive concern by students about their status in your course, as well as eliminate the potential of missing documents which may not be retrievable after the emergency resolves.

Final Grades: The completion of a semester may occur during an emergency or disaster period. Faculty members should calculate the final grade of each student in their specific class and forward a list to the Dean. Circumstances may prevent a student from completion of course requirements. For those students, a grade of "I" should be noted as the final grade. The Dean will compile a comprehensive final grade list for all students in the COBS educational programs, sign it and forward it to the Registrar for entry into the CampusNexus system and ultimately onto the transcript of the student.

Roles

Administration: In an emergency situation, all senior administration of the COBS are to be available for consultation and decision making through whatever means possible. The administration is responsible to maintain communication with students, faculty and staff in all matters pertinent to them. During an emergency, an administrator in consultation with their supervisor may be able to continue to work on site, flex hours or work remotely.
A. Members of the staff are expected to maintain their work responsibility during an emergency situation. Staff should forward their office phone to their personal cell phone. Staff is expected to communicate directly with their immediate supervisor. Staff should be available for consultation with their supervisor and other members of the COBS. Larkin University staff should utilize their assigned Larkin University computer to complete work assignments. During an emergency, a staff member in consultation with their supervisor may be able to continue to work on site, flex their work hours or work remotely. Documentation of completion of work assignments must be submitted regularly to the supervisor. In the event a staff member is unable to complete regular work assignments, the supervisor in consultation with the staff may assign other work or responsibilities for them to maintain employment. If an arrangement cannot be made, it may be necessary to utilize vacation time or take an unpaid leave of absence from their work responsibilities.

A. Members of the faculty are required to maintain their responsibility to leading their assigned courses and university responsibilities. This includes lectures, case studies, exams, reviews, student advising, committee responsibilities, etc. If the facility is not available, the faculty will be expected to transition to virtual learning and assessment. Faculty will be expected to forward their office phone to their personal cell phone. Faculty will utilize their assigned Larkin University computer. If you do not have one, contact Dr. Jorge Machado and one will be issued to you. Faculty must be familiar with Canvas, (the Larkin University learning management system), Go To Meeting, (the COBS virtual learning and meeting software) and ExamSoft (the COBS assessment software). During an emergency, a faculty member in consultation with their supervisor may be able to continue work on site, flex their hours or work remotely. Documentation of their work effort should be provided to their immediate supervisor. If the faculty member is unable to complete their work responsibilities, they may utilize vacation time or take an unpaid leave of absence from their work responsibilities.

A. During an emergency or natural disaster, the safety and well-being of our students will be the first priority. Every effort will be made to accommodate their needs during an emergency period which may impact our facility or disrupt their educational program. Students will be expected to utilize their Larkin email to maintain communication with the university administration, faculty, staff and colleagues. We will be available to maintain services and communicate with you directly via email. The COBS group email will be used for communication regarding all courses, exams etc. pertinent to your scheduled classes and current syllabus.

A. In the event the Larkin facility is not available, the COBS will transition to face to face learning through a virtual platform. We will continue to use Canvas for all assignment, quizzes, and submission of work. The “Go To Meeting” software will be used for all course instruction, group presentations, case discussions, etc. You will receive an invitation to attend the session through the group email. When it is time for class, merely click on the link and you join the class live. You will be able to see and hear your faculty, your classmates and the power point presentation being used. Examinations will be given using the “ExamSoft” assessment platform. Students will receive an exam link in advance of the test, which must be downloaded in advance onto your computer. At the time of the exam start, an exam code will be provided which gives you access to the test. During the exam, all other products on your computer will be frozen. Once the exam is completed and submitted, the operation of your computer will resume as normal. It is the responsibility of the students to have downloaded these computer programs and be familiar with
them. If an emergency occurs, and you are not comfortable using the software, contact a faculty member or administrator to provide you with instruction and practice prior to any activity. We want you to be successful, but you must reach out if there is something you need help with so we can respond. Not only does this include software programs, but tutoring, study groups, etc. Emergencies are challenging for all us, but you are part of the Larkin Family and we take care of each other.

RESPONSIBILITIES

A. is a Larkin University College of Biomedical Sciences mandatory policy to be adhered to by all employees within the COBS. It will be implemented upon declaration of a campus state of emergency by the CEO/President of Larkin University and notification that an emergency or natural disaster has occurred which has caused disruption of the educational program or facility operation. The Dean of the College in collaboration with the CEO will be responsible for notification of the emergency condition and full implementation and monitoring for policy compliance throughout the duration of the emergency and/or until the educational activities are returned back to the prior status.

FORMS

No additional form required

RELATED INFORMATION

Implementation Date: March, 2020

PROCEDURE

All administrative policies of Larkin University can be accessed electronically at ularkin.org or can be obtained from the Human Resources Department. Larkin University also utilizes Policy Stat for review and management of all policies. This can be accessed at: https://ularkin.policystat.com and then entering your user identification code. This policy will be reviewed every year for its effectiveness.

Attachments

No Attachments

Approval Signatures

<table>
<thead>
<tr>
<th>Approver</th>
<th>Date</th>
</tr>
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<tbody>
<tr>
<td>Marti Echols: Dean</td>
<td>03/2020</td>
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</table>
Applicability

Larkin University, My Larkin University
Larkin University
18301 N. Miami Ave.
Miami, FL 33169

Policy on Maintenance and Security of Student Records

**Purpose:** The security and maintenance of student records is critical to the integrity of Larkin University. This mandatory policy reinforces that it is the responsibility of all constituents to ensure student data is both secure, confidential and maintained.

**Policy:** It is the responsibility of Larkin University to oversee the release and use of all student records and institutional data containing identifiable information. This includes the security, confidentiality, integrity, data protection and backup of information. Changes to information cannot occur without following state and federal mandates. Special security to protect this data is handled through the collaboration of the Registrar with Information Technology. IT is responsible for data back up on a routine basis as well as retrieval of data in the event of a disaster.

It is the responsibility of each faculty, staff, and administrative member of Larkin University to ensure the security and confidentiality of all student education records entrusted by students to the University for safeguarding. While the federal regulations provide general guidelines for the protection and use of education record data, it is incumbent on those faculty, staff, and administrators that are granted access to this information to actually protect it. Understand that not everyone will be granted access to student data. The Registrar and respective college Dean should be consulted should an access question arise.

**Implementation:** May 1, 2019

**Maintenance and Review of the Policy:** The Registrar in collaboration with Information Technology are responsible for the implementation and monitoring of this mandatory policy. This policy will be reviewed every three years for its effectiveness. All administrative policies of Larkin University can be accessed electronically at ularkin.org or can be obtained from the Human Resources Department.
Document History
Date adopted by Board of Trustees: 4/19
Date reformatted: 4/19
Date reviewed: 7/21
Next scheduled review date:
Policy on Student Rights & Responsibilities

**Purpose:** Students in healthcare professions are held to the highest standard of ethical conduct and behavior. They must possess exceptional character, integrity, respect and compassion. This policy serves as a reference of student rights & responsibilities as a student at Larkin University.

**Policy:** Student conduct as well as students rights and responsibilities are anchored in the core values of Larkin University. We firmly believe that every student is entitled to a learning environment appropriate to attain their education goals. At Larkin University, students are guaranteed all rights and responsibilities of citizenship under the Constitution of the United States and are guaranteed the right to due process. Upon registration, students assume the responsibility to become familiar with and abide by all policies and procedures. Students have the responsibility to adhere to all College rules and regulations and acceptable standards of conduct.

The Larkin University Code of Conduct is defined as the written document outlining the requirements of student conduct related to academic honesty and professional behavior. The Code of conduct applies to students enrolled in programs offered by Larkin University. Details and procedures of the Code of Conduct and Student Rights and Responsibilities are found in the Student Handbook of each respective college. Everyone should be familiar with the Student Handbook to ensure the implementation and monitoring of the appropriate professional behavior expected at Larkin University.

**Implementation:** May 1, 2019

**Maintenance and Review of the Policy:** The Dean of each respective college, working in collaboration with faculty and staff are responsible for the implementation and monitoring of the LU Code of Conduct and Student Rights and Responsibilities. Every student is entitled to a learning environment conducive for their professional growth and development and reflective of the core values of our university. This policy will be reviewed every four years for its
effectiveness. All administrative policies of Larkin University can be accessed electronically at ularkin.org or can be obtained from the Human Resources Department.
Larkin University
18301 N. Miami Ave.
Miami, FL 33169

Policy on Student Complaints & Reporting Procedures

Purpose: Larkin University will provide a learning environment conducive to the professional growth and development of all students. In the event, a student believes we are not meeting this goal, they may file a complaint. The purpose of this policy is to inform students of this right and provide a reporting process and direction on how to file such a complaint.

Policy: Larkin University will provide a learning environment conducive to the professional growth and development of all students. LU will not tolerate harassment or discrimination by any member of the University community. Specific concerns or complaints regarding harassment, discrimination, or similar behaviors should be brought to the attention of the respective college Dean or as designated in the Student Handbook.

Any student who believes he or she has been or is being harassed or is experiencing discrimination in violation of University policy, or witnesses what he or she believes to be harassment in violation of University policy, has an obligation to report such harassment. Complaints will be processed either informally or through the formal procedure. Detailed process for filing, review and resolution of complaints are found in the Student Handbook of the respective college.

At the informal level, the primary goal will be to resolve the situation to the mutual agreement of all parties. At this stage, students who believe they have been harassed have the option to resolve the matter without the necessity of a full investigation. If the complaint is not or cannot be resolved at the informal stage, the student can request an investigation in writing to the Dean or designee as indicated in the Student Handbook.

All written complaints, investigations, committee meeting minutes, reports, and correspondence relating to the complaints will be retained in a confidential file, in the appropriate College Office as defined in the Student Handbook of each College. No records will be maintained in the official student records. Students will not be subject to retaliation by any member of the LU community for submitting a complaint.

Implementation: May 1, 2019
Maintenance and Review of the Policy: The responsibility for the implementation and monitoring of this mandatory policy is with the Dean of each respective college and the respective leadership team. Consultation with Human Resources and the CEO is recommended to ensure appropriate procedures are followed. This policy will be reviewed every four years for its effectiveness. All administrative policies of Larkin University can be accessed electronically at ularkin.org or can be obtained from the Human Resources Department.

Document History
Date adopted by Board of Trustees: 4/2019
Date reformatted: 4/2019
Date reviewed:
Next scheduled review date:
Policy on Complaints Related to Accreditation Standards

Purpose: Larkin University will maintain compliance with all state and federal regulations as well as accreditation standards related to university accreditation and accreditation related to degree programs. In the event, a student, staff, faculty member or any member of the public believes we are in non-compliance with a standard, they have the right to file a complaint with the appropriate accrediting body. This policy is intended to inform them of that right and provide guidance in the procedures and direction on how to file such a complaint.

Policy: Larkin University will maintain compliance with all state and federal regulations as well as accreditation standards related to university accreditation and accreditation related to degree programs. Should a Larkin community member or member of the public believe we are in non-compliance with any regulation or accrediting standard, we request that you contact the Office of the CEO or respective College Dean with the complaint so it can be investigated. They should attempt to resolve the complaint utilizing both an informal and formal process following the reporting process in the Employee Handbook or Student Handbook of the appropriate college. If the complaint is still unresolved, the person may access the website of the accrediting body for the appropriate procedures and process to file a complaint. The contact information for each accrediting body is identified below.

Pharmacy: Accreditation Council for Pharmacy Education (ACPE) is the national agency for the accreditation of professional degree programs in pharmacy. ACPE is required by the U.S. Department of Education to assure that pharmacy programs have a policy to record and address complaints regarding a school’s adherence to the ACPE Accreditation Standards and Guidelines for the Professional Program in Pharmacy Leading to the Doctor of Pharmacy Degree. You may visit the ACPE website (https://www.acpe-accredit.org/complaints) to access the procedures for filing a complaint.

State of Florida: To file a complaint against a non-public, postsecondary institution in Florida, you contact the Council for Independent Education (CIE) in writing. A letter or email should contain the following information:

1. Name of Student (or Complainant)
2. Complainant Address
3. Phone Number
4. Name of Institution
5. Location of the Institution (City)
6. Dates of Attendance
7. A full description of the problem and any other documentation that will support your claim such as enrollment agreements, correspondence, etc.
8. The complaint process of the Commission involves contacting the institution to obtain their response to your complaint. If you do not want the Commission to contact the institution you are attending, you must state so in your complaint; however, doing so will greatly hinder the Commission’s ability to assist you with your complaint.

Contact Information:
Commission for Independent Education
325 W. Gaines Street, Suite 1414
Tallahassee, FL. 32399-0400

Or E-mail: cieinfo@fldoe.org
Or Fax: 850-245-3238

SACSCOC: Larkin University is currently in the process of submitting an application to the Southern Association of Colleges and Schools Commission on Colleges (SACSCOC) for accreditation. Following our submission and approval of candidacy status, Larkin University will be held to SACSCOC accreditation standards. Larkin University commits to comply with all Complaint Procedures Against SACSCOC or its Accredited Institution identified in the approved document dated August, 2018. A full text version of this standard is attached to this document. In the future, if a SACSCOC complaint would need to be filed the contact information would be utilized.

How to file a complaint against an institution accredited by the Southern Association of Colleges and Schools Commission on Colleges (SOCSCOC)

1. Complete the Commission’s Complaint Form (contained in the following document): Complaint Procedures Against the Commission or Its Accredited Institutions
2. Send two PRINT copies to:

   President
   Southern Association of Colleges and Schools Commission on Colleges
   1866 Southern Lane
   Decatur, GA 30033-4097

Please read the document carefully before submitting a complaint:

- The complaint policy only addresses significant, documented, alleged non-compliance with the SACSCOC accreditation standards, policies or procedures.
• Complainants are expected to have attempted to resolve the issue through the institution’s complaint processes before filing a complaint with SACSCOC.
• The SACSCOC complaint process is not intended to be used to involve the Commission in disputes between individuals and member institutions or to cause the Commission to interpose itself as a reviewing authority in individual matters; nor does the policy allow the Commission to seek redress on an individual’s behalf.
• The primary purpose of the SACSCOC complaint procedure is to acquire valuable information regarding an accredited institution’s possible non-compliance with accreditation standards, policies and procedures rather than to resolve individual disputes.
• Complaints must be tied to specific standard numbers from *The Principles of Accreditation: Foundations for Quality Enhancement*.

All written complaints, investigations, committee meeting minutes, reports, and correspondence relating to any of the above complaints will be retained in a confidential file, in the Office of the Dean. Every effort will be made to resolve complaints in a systematic and efficient manner. No records will be maintained in the official student/employee records. No one will not be subject to retaliation by any member of the LU community for submitting a complaint.

**Implementation:** May 1, 2019

**Maintenance and Review of the Policy:** The Office of the CEO and Dean of each respective college is responsible for implementation and monitoring of this mandatory policy. This policy will be reviewed every four years for its effectiveness. All administrative policies of Larkin University can be accessed electronically at ularkin.org or can be obtained from the Human Resources Department.

**Document History**

Date adopted by Board of Trustees: 4/2019
Date reformatted: 4/2019
Date reviewed: 
Next scheduled review date:
SACSCOC
Southern Association of Colleges and Schools
Commission on Colleges
1866 Southern Lane
Decatur, Georgia 30033-4097

COMPLAINT PROCEDURES
AGAINST SACSCOC OR ITS ACCREDITED INSTITUTIONS

Policy Statement

Statement of Purpose

The Southern Association of Colleges and Schools Commission on Colleges (SACSCOC) recognizes the value of information provided by students, employees, and others in determining whether an institution’s performance is consistent with SACSCOC standards for obtaining or maintaining accreditation. The Commission’s interest also is in ensuring that member institutions maintain appropriate grievance procedures and standards of procedural fairness and that the procedures are applied appropriately and consistently.

The procedures for the review of complaints involving member institutions enable SACSCOC to address possible violations of its Principles of Accreditation, the Core Requirements, and policies or procedures, as well as to address possible violations of an institution’s own policies and procedures, if related to the Principles.

Because SACSCOC’s complaint procedures are for the purpose of addressing any significant non-compliance with SACSCOC’s standards, policies, or procedures, the procedures are not intended to be used to involve SACSCOC in disputes between individuals and member institutions, or cause SACSCOC to interpose itself as a reviewing authority in individual matters of admission, grades, granting or transferability of credits, application of academic policies, fees or other financial matters, disciplinary matters or other contractual rights and obligations. Nor does SACSCOC seek redress on an individual’s behalf. Under no circumstances does SACSCOC respond to, or take action on, any complaint or any allegation that contains defamatory statements. Further, SACSCOC will not serve as a grievance panel when the outcome of institutional grievance or appeal processes is unsatisfactory to the complainant.

SACSCOC expects individuals to attempt to resolve the issue through all means available to the complainant, including following the institution’s own published grievance procedures, before submitting a complaint to SACSCOC. Therefore, SACSCOC is under no obligation to consider additional information submitted by the complainant subsequent to the receipt of the formal complaint. SACSCOC’s usual practice is not to consider a complaint that is currently in administrative proceedings, including institutional proceedings, or in litigation. However, if there is substantial, credible evidence that indicates systemic problems with an accredited institution, SACSCOC may, at its discretion, choose to proceed with the review.

In order to be considered, a formal complaint must be submitted in writing using the SACSCOC “Complaint against Institutions: Information Sheet and Form,” signed, and two copies sent to: President, Southern Association of Colleges and Schools Commission on Colleges, 1866 Southern Lane, Decatur, Georgia, 30033-4097. SACSCOC will entertain neither complaints that are not in writing or which are anonymous, nor
will it consider complaints sent electronically or through facsimile transmission. In addition, SACSCOC will not act on complaints submitted on behalf of another individual or complaints forwarded to SACSCOC.

Responsibilities of Institutions

The *Principles of Accreditation* states:

The institution (a) publishes appropriate and clear procedures for addressing written student complaints, (b) demonstrates that it follows the procedures when resolving them, and (c) maintains a record of student complaints that can be accessed upon request by SACSCOC. (Standard 12.4; *Student complaints*)

Each institution is required to have in place student complaint policies and procedures that are reasonable, fairly administered, and well publicized. SACSCOC also requires, in accord with federal regulations, that each institution maintains a record of complaints received by the institution. This record is made available to SACSCOC upon request. This record will be reviewed and evaluated by SACSCOC as part of the institution’s decennial evaluation.

Procedures for Filing a Complaint against an Institution

An individual may make an inquiry regarding complaint procedures or about issues and concerns that could be considered complaints; however, the Commission’s response and its obligations to meet the specific timetables outlined in these procedures will begin only after the complainant submits a formal written complaint.

A formal complaint is one that is (1) submitted in writing using the SACSCOC “Complaint against Institutions: Information Sheet and Form,” (2) signed, and (3) sent to the attention of the President of SACSCOC by the complainant(s). SACSCOC will neither entertain complaints that are not in writing or which are anonymous, nor will it consider complaints sent electronically or through facsimile transmission. In addition, SACSCOC does not accept voice recordings, such as recordings of meetings and conversations, as evidence in support of a complainant’s allegations. To submit information from the voice recordings, the complainant should have the tape transcribed, provide a signature page for the complainant to attest to the accuracy of the transcription, and have the signature page notarized. If a complainant has a demonstrated disability that prevents submission of a formal complaint in accord with the guidelines above, he or she should contact the SACSCOC Coordinator of Communications and External Affairs for assistance.

The “Information Sheet and Form” includes:

a. A statement describing the complaint in the clearest possible terms.

b. The section(s) of the *Principles of Accreditation* alleged to have been violated and the time frame in which the significant lack of compliance is alleged to have occurred.

c. A clear and concise written description of the evidence upon which the allegation is based. (Materials and documentation used to support a complainant’s allegations should be limited to and directly related to the reported case.) The evidence should state relevant facts and document and support the allegation that the institution is in significant violation of the standards referenced in the complaint.

d. A description of the action taken by the institution to date and a copy of the institution’s response to the complainant as a result of prescribed procedures.

e. An acknowledgment that SACSCOC staff may send a copy of the complaint to the president of the institution.

f. Full disclosure about any other external channels the complainant is pursuing, including legal action.
Once the formal written complaint is submitted, SACSCOC and the complainant are responsible for the following:

1. SACSCOC will acknowledge a formal written complaint within 15 business days of its receipt.

2. Within 60 calendar days after acknowledging receipt of the complaint, SACSCOC staff will review the complaint and its documentation and determine (1) whether it is within the scope of SACSCOC policies and is accreditation related, (2) if there is adequate documentation in support of the allegations, and (3) whether the complaint raises significant questions about the institution's compliance with SACSCOC standards. Normally, SACSCOC considers reviewing a formal complaint if the circumstances leading to it occurred within one year of the formal filing of the complaint or one year within completion of the complaint process at the institution. SACSCOC will inform the complainant regarding the disposition of the complaint to include one of the following:

   a. The complaint will not be processed further because it is not within the scope of SACSCOC policies and jurisdiction or there is inadequate documentation to raise questions concerning the institution's compliance with SACSCOC standards.

   b. Where appropriate, a resolution is suggested to the complainant and/or the institution.

   c. The complaint has sufficient substance to warrant further review. In this case, SACSCOC will make every effort to expedite the investigation; however, the time required to conduct the investigation may vary considerably depending on the circumstances and nature of the complaint. When a complaint is further investigated, a copy of the complaint will be forwarded to the institution's chief executive officer who will be asked to respond to SACSCOC within 20 business days. Following the review, the complainant and institution involved will be notified regarding one of the following:

      (1) The complaint will not be processed further because there is insufficient evidence of significant non-compliance. The decision of the President of SACSCOC is final.

      (2) If there appears to be sufficient evidence of significant non-compliance or if SACSCOC staff are unable to determine compliance, then one of the following actions may be taken by the President of SACSCOC:

         (a) Authorize a Special Committee to visit the institution. The Special Committee will examine documents and interview institutional personnel to analyze and make a judgment about compliance, and prepare a report. The report of the committee will be forwarded to the SACSCOC Board of Trustees, or one of its standing committees, for review and action at the next meeting of the Board. Following that meeting, the complainant and institution involved will be notified of the decision of the Board.

         (b) Forward the case directly to the Board of Trustees and its standing committees for review and action.

         (c) Include the case in an upcoming scheduled visit to the institution.

         (d) Request additional information. After reviewing the additional information, the President of SACSCOC may decide to take any of the actions as described in (1), (2)(a), (2)(b), or (2)(c) above.

For items (2)(a), (2)(b), or (2)(c) above, the decision of the SACSCOC Board of Trustees is final unless the disposition is one that is otherwise appealable as stated in the SACSCOC policy “Appeals Procedures of the College Delegate Assembly.”
3. If there is a change of staff during the disposition of a formal complaint, the President of SACSCOC will notify the complainant(s) regarding the change, provide the name of the staff member assigned to the institution, and outline a modified schedule for the review of the complaint.

4. Individual complaints will be retained in the SACSCOC files for a period of one year following final formal notification to the complainant regarding the resolution of the complaint. Based on complaints submitted during this period of time and/or on a series of notification letters to previous complainants that suggest a pattern of concern which may evidence a significant lack of compliance with the Principles that was not evident from any one individual complaint, SACSCOC may renew its consideration of the matter for whatever action may be appropriate.

Complaints against SACSCOC Board of Trustees or its Staff

Complaints against SACSCOC are limited to complaints regarding the agency’s standards, procedures, and SACSCOC staff or any other SACSCOC representative. In order to be considered a formal complaint against SACSCOC, a complaint must involve issues broader than a concern about a specific institutional action.

The procedures for filing a complaint are as follows:

1. If the complaint is against a SACSCOC staff member or an agency representative, such as an off-site or on-site visiting team member, the following procedure applies. Examples might include: evidence that a staff member failed to follow SACSCOC policy, evidence of an on-site committee member exhibiting bias against an institution, evidence that a staff member or committee member has a conflict of interest in working with an institutional case, etc.
   • The individual should submit a written complaint to the President of SACSCOC that includes a description of the specific complaint accompanied by documentation supporting the allegation.
   • The President will acknowledge the complaint within 10 working days of its receipt.
   • Following review, the President will inform the complainant of action within 30 days of receipt of the complaint.

2. If the complaint is against the President of SACSCOC, the following procedure applies. Examples might include: evidence of failure to follow SACSCOC policy, evidence of failure to attend to allegations of unfair treatment by a staff member against an institution, etc.
   • The individual should submit a written complaint to the Chair of the SACSCOC Board of Trustees that includes a description of the specific complaint. It should be addressed to “SACSCOC Chair of the Board of Trustees” at SACSCOC’s Decatur, Georgia, address.
   • The Chair of the Board of Trustees will acknowledge the complaint within 20 working days of its receipt and will designate a committee composed of members of the Executive Council to investigate the complaint and recommend action to the Chair. The investigation may include review of the complaint with the SACSCOC President as well as with the complainant.
   • The Chair of the SACSCOC Board of Trustees will review the Council’s action and inform the complainant and the SACSCOC President of action within 45 days of receipt of the complaint.
   • Concern that a SACSCOC action was not in accord with the complainant’s expectations is not in and of itself cause for review of the complaint.
3. If the complaint is against SACSCOC or a member of its Board of Trustees, the following procedure applies. Examples might include: evidence that a Board member failed to recuse him or herself from the discussion and vote of an accreditation case where a conflict of interest existed, evidence that SACSCOC failed to apply policy, etc.

- The individual should submit a written complaint to the Chair of SACSCOC Board of Trustees that includes a description of the specific complaint. It should be addressed to “SACSCOC Chair of the Board of Trustees” at SACSCOC’s Decatur, Georgia, address.

- The Chair of the Board of Trustees will acknowledge the complaint within 20 working days of its receipt and will designate a committee composed of members of the Executive Council to investigate the complaint and recommend action to the Chair. The investigation may include review of the complaint with SACSCOC President, the Board of Trustees member, as well as with the complainant.

- The Chair of the Board of Trustees will review the Council’s action and inform the complainant and SACSCOC President of action within 45 days of receipt of the complaint.

- Concern that a SACSCOC action was not in accord with the complainant’s expectations is not in and of itself cause for review of the complaint.

**Distinction between Submitting Third-Party Comments and Filing Formal Complaints**

SACSCOC is interested in ensuring that member institutions maintain ongoing compliance with SACSCOC standards and policies outside the institution’s scheduled formal review and that member institutions maintain appropriate grievance procedures and standards of procedural fairness that are applied consistently. Therefore, if an individual has evidence of an institution’s significant non-compliance with SACSCOC standards, policies, or procedures, the individual should inform SACSCOC using these procedures.

Third-party comments are submitted by the public at the time of an institution’s formal, scheduled review for the purpose of informing SACSCOC regarding the institution’s ongoing commitment to compliance with SACSCOC standards and policies. Therefore, if an individual wishes to address an institution’s compliance with the Principles of Accreditation at the time of the institution’s formal committee review, he/she should use the policy “Third-Party Comment by the Public.”

**Document History**

Approved: Commission on Colleges, December 1999
Revised and Approved: Commission on Colleges, June 2003
Revised and Approved: Commission on Colleges, December 2006
Revised: Executive Council, November 2007
Revised and Approved: Commission on Colleges, December 2007
Revised: Board of Trustees, June 2011
Revised: SACSCOC Executive Council, March 2012
Revised: Board of Trustees, June 2012, December 2012, December 2013
Revised: Executive Council, March 2016
Edited for the 2018 Edition of the Principles of Accreditation: August 2018
COMPLAINTS AGAINST INSTITUTIONS:
INFORMATION SHEET AND FORM

The following is intended to provide information to persons wishing to file a complaint about an institution accredited by the SACSCOC. **Before filing a complaint, please read the SACSCOC policy “Complaint Procedures for the Commission or Its Accredited Institutions” — see [www.sacscoc.org](http://www.sacscoc.org).** SACSCOC reviews complaints submitted by students, faculty, and other members of the public about its member institutions. This information helps SACSCOC assure that an institution continues to meet the standards of accreditation set by the membership. Procedures have been established, therefore, to provide a mechanism for SACSCOC to consider complaints that address significant violations of SACSCOC standards.

All institutions accredited by SACSCOC are required to have in place adequate procedures for addressing complaints by students, employees, and others. As outlined in the complaint policy, it is the responsibility of the complainant first to attempt to resolve the matter with the institution. The complainant is responsible for providing evidence that all remedies available at the institution have been exhausted. In order to file a complaint with SACSCOC, the complainant must describe these efforts on the complaint form.

**How to File a Complaint Against an Institution Accredited by SACSCOC**

Please use the attached complaint form to submit a formal complaint. You must complete all applicable sections of this form before the complaint will be reviewed. It must be submitted in hard copy, not electronically nor through facsimile transmission. Precisely state the complaint using three sentences or less. Provide the details that support your complaint. Give a description of the steps that were taken to exhaust the institution’s grievance or complaint process. For both responses, you may attach additional sheets of paper if you need more space. Include with the form copies of any documents that pertain to your complaint. Please submit two copies of the form and the attachments.

Please refer to the attached SACSCOC policy for a description of the process for reviewing complaints.
COMPLAINT FORM

I. COMPLAINANT INFORMATION

A. First Name: __________________________ M.I. ________ Last Name: __________________________

B. Street Address: __________________________

C. City: __________________________ State: ________ Zip Code: ________ Country: (If outside of USA) ________

D. Telephone Number: __________________________ Fax Number: __________________________

E. Email Address: __________________________

F. Name of College or University Named in the Complaint __________________________

G. Status in Relation to the College or University:

☐ STUDENT ☐ PARENT ☐ FACULTY ☐ OTHER: __________________________

H. Current Student Status (If applicable):

☐ ENROLLED ☐ GRADUATED ☐ PROBATION ☐ WITHDRAWN ☐ TERMINATED
II. COMPLAINT INFORMATION

A. State the nature of the complaint (in five sentences or less).

B. Briefly describe the details of the complaint in the clearest possible language and indicate how the institution has violated specific sections of the Principles of Accreditation. (List sections of the Principles and, if necessary, attach additional sheets for the description. Materials and documentation used to support a complainant’s allegations should be limited to and directly related to the reported case. The evidence should state relevant facts and document and support the allegation that the institution is in significant violation of the standard(s) referenced in the complaint. Indicate the time frame in which the violations referenced in the complaint occurred.

C. Describe the steps taken to exhaust the institution’s grievance process, describe the action taken by the institution to date, and provide a copy of the institution’s response to the complainant as a result of prescribed procedures. (Indicate any channels external to the institution that the complainant is pursuing, including legal action.)

This complaint will not be processed unless all the boxes below are checked and you have signed and dated the complaint.

☐ I have read “Complaint Procedures Against SACSCOC or its Accredited Institutions” and agree this form constitutes my formal complaint.

☐ As stated in the SACSCOC Complaint Policy, I understand that SACSCOC: (1) does not intervene in the internal procedures of institutions or perform as a regulatory body, (2) is not a formal adjudicatory or grievance-resolving body, and (3) will not serve as a grievance panel when the outcome of an institutional grievance or process is unsatisfactory to the complainant.

☐ I authorize SACSCOC to submit my complaint and/or any documents concerning my complaint to the involved institution(s).

☐ I hereby certify that all of the information I have given above is true and complete to the best of my knowledge.

YOUR SIGNATURE: ___________________________ DATE: __________________________

YOU MUST COMPLETE ALL APPLICABLE SECTIONS OF THIS FORM
Policy on Distance & Correspondence Education

**Purpose:** The purpose of this policy is to ensure compliance with all SACSCOC requirements for Distance or Correspondence Education Programs offered by Larkin University.

**Policy:** Larkin University is committed to face-to-face education in the training of health professionals. Unfortunately, with the outbreak of the COVID-19 pandemic, we realized that a modification had to be made to adapt to a virtual learning platform during an emergency. We understand that emergency situations do occur and the university as good stewards of student education, should offer an accommodation to address unexpected or unanticipated situations. Larkin University therefore, will offer the ability of students an accommodation to utilize online synchronous live-stream instruction for didactic classes as a personal choice option available to those students who are “at risk” to themselves or others, thus creating the potential of a hybrid learning model for some students in our program. Labs and clinical experiences will need to be completed face-to-face after the emergency situation is resolved. This accommodation will be available to students during an emergency or natural disaster and will follow the university policies regarding operations during an emergency.

Accommodation to participate in a Distance or Correspondence Education Program will be requested by the student based upon their own health and safety needs. The university will provide a virtual learning platform for didactic classes, with the understanding that attendance and participation will be expected consistent with face-to-face instruction. Larkin University will commit to following all guidelines and requirements for Distance and Correspondence Education. Larkin University recognizes that it is physically located in an area prone to hurricanes, tropical storms, pandemics and other natural disasters. As such, an Emergency Preparedness Plan and Policy have been developed. In an emergency, the Florida Department of Education and/or Governor has decision-making authority and guidance on how to proceed. In the event of a natural disaster of any kind, educational programs offered at Larkin University would transition to virtual learning if feasible.

In an effort to show commitment to the SACSCOC requirements for Distance & Correspondence, the BOT approved the full text of the SACSCOC Policy and it has been attached to this document.

**Implementation:** May 1, 2019

**Maintenance and Review of the Policy:** The CEO and Larkin University Senior leadership would be responsible for the implementation and compliance of this policy. This policy will be
reviewed every four years for its effectiveness. All administrative policies of Larkin University can be accessed electronically at ularkin.org or can be obtained from the Human Resources Department.

**Document History**

Date adopted by Board of Trustees: 4/19
Date reformatted: 4/19
Date reviewed: 4/20
Date revised 4/21
Next scheduled review date: 4/23
DISTANCE AND CORRESPONDENCE EDUCATION

Policy Statement

Definition of Distance Education

For the purposes of the Commission on College’s accreditation review, distance education is a formal educational process in which the majority of the instruction (interaction between students and instructors and among students) in a course occurs when students and instructors are not in the same place. Instruction may be synchronous or asynchronous. A distance education course may use the internet; one-way and two-way transmissions through open broadcast, closed circuit, cable, microwave, broadband lines, fiber optics, satellite, or wireless communications devices; audio conferencing; or video cassettes, DVD’s, and CD-ROMs if used as part of the distance learning course or program.

Definition of Correspondence Education

Correspondence education is a formal educational process under which the institution provides instructional materials, by mail or electronic transmission, including examinations on the materials, to students who are separated from the instructor. Interaction between the instructor and the student is limited, is not regular and substantive, and is primarily initiated by the student; courses are typically self-paced.

Policy Statements

1. At the time of review by the Commission, the institution demonstrates that the student who registers in a distance or correspondence education course or program is the same student who participates in and completes the course or program and receives the credit by verifying the identity of a student who participates in class or coursework by using, at the option of the institution, methods such as (1) a secure login and pass code, (2) proctored examinations, and (3) new or other technologies and practices that are effective in verifying student identification.

2. At the time of review by the Commission, the institution demonstrates that it has a written procedure for protecting the privacy of students enrolled in distance and correspondence education courses or programs.

3. At the time of review by the Commission, the institution demonstrates that it has a written procedure distributed at the time of registration or enrollment that notifies students of any projected additional student charges associated with verification of student identity.

4. An institution that offers distance or correspondence education must ensure that it reports accurate headcount enrollment on its annual Institutional Profile submitted to the Commission.
5. Institutions must ensure that their distance and correspondence education courses and programs comply with the Principles of Accreditation. This applies to all educational programs and services, wherever located or however delivered.

**Guidelines in the Application of the Principles of Accreditation to Distance and Correspondence Education**

With the underlying concept that the Principles of Accreditation apply to all programs of the institution, regardless of mode of delivery, institutions should consider the following guideline statements in implementing and reporting on distance and correspondence education programs.

**Mission**

If an institution offers significant distance and correspondence education, it should be reflected in the institution's mission.

**Curriculum and Instruction**

The faculty assumes primary responsibility for and exercises oversight of distance and correspondence education, ensuring both the rigor of programs and the quality of instruction.

The technology used is appropriate to the nature and objectives of the programs and courses and expectations concerning the use of such technology are clearly communicated to students.

Distance and correspondence education policies are clear concerning ownership of materials, faculty compensation, copyright issues, and the use of revenue derived from the creation and production of software, telecourses, or other media products.

Academic support services are appropriate and specifically related to distance and correspondence education.

Program length is appropriate for each of the institution's educational programs, including those offered through distance education and correspondence education.

For all degree programs offered through distance or correspondence education, the programs embody a coherent course of study that is compatible with the institution's mission and is based upon fields of study appropriate to higher education.

For all courses offered through distance or correspondence education, the institution employs sound and acceptable practices for determining the amount and level of credit awarded and justifies the use of a unit other than semester credit hours by explaining it equivalency.

An institution entering into consortial arrangements or contractual agreements for the delivery of courses/programs or services offered by distance or correspondence education is an active participant in ensuring the effectiveness and quality of the courses/programs offered by all of the participants.

**Faculty**

An institution offering distance or correspondence learning courses/programs ensures that there is a sufficient number of faculty qualified to develop, design, and teach the courses/programs.

The institution has clear criteria for the evaluation of faculty teaching distance education courses and programs.
Faculty who teach in distance and correspondence education programs and courses receive appropriate training.

**Institutional Effectiveness**

Comparability of distance and correspondence education programs to campus-based programs and courses are ensured by the evaluation of educational effectiveness, including assessments of student learning outcomes, student retention, and student satisfaction.

The institution regularly assesses the effectiveness of its provision of library/learning resources and student support services for distance or correspondence education students.

**Library and Learning Resources**

Students have access to and can effectively use appropriate library resources.

Access is provided to laboratories, facilities, and equipment appropriate to the courses or programs.

**Student Services**

Students have adequate access to the range of services appropriate to support the programs offered through distance and correspondence education.

Students in distance or correspondence programs have an adequate procedure for resolving their complaints, and the institution follows its policies and procedures.

Advertising, recruiting, and admissions information adequately and accurately represent the programs, requirements, and services available to students.

Documented procedures assure that security of personal information is protected in the conduct of assessments and evaluations and in the dissemination of results.

Students enrolled in distance education courses are able to use the technology employed, have the equipment necessary to succeed, and are provided assistance in using the technology employed.

**Facilities and Finances**

Appropriate equipment and technical expertise required for distance and correspondence education are available.

The institution, in making distance and correspondence education courses/programs a part of its mission, provides adequate funding for faculty, staff, services, and technological infrastructure to support the methodology.

*Document History*

*Adopted: Commission on Colleges, June 1997*
*Updated in accord with the revised Principles, December 2006*
*Revised: SACS/COC Board of Trustees: June 2010*
*Edited: January 2012*
*Reformatted: July 2014; August 2018*
Larkin University
18301 N. Miami Ave.
Miami, FL 33169

Records Maintenance Policy of the Commission

Purpose: As part of its application for SACSCOC accreditation, Larkin University must commit and accept all policies of the accrediting body. This policy ensures that Larkin University agrees with this policy as it is applicable to their institution.

Policy: The Southern Association of Colleges and Schools Commission on Colleges, (SACSCOC), maintains files and records in accordance with Commission Policy or federal regulations governing accrediting associations recognized by the Dept. of Education. Larkin University will comply and accept the Records Maintenance Policy of the Commission effective in January, 2012. For reference the full text of the SACSCOC Policy is attached to this document.

Implementation: May 1, 2019

Maintenance and Review of the Policy: The president/CEO and Larkin University Senior leadership are responsible for the implementation, monitoring and compliance of this mandatory policy. This policy will be reviewed every four years for its effectiveness. All administrative policies of Larkin University can be accessed electronically at ularkin.org or can be obtained from the Human Resources Department.

Document History
Date adopted by Board of Trustees: 4/19
Date reformatted: 4/19
Date reviewed: 7/8/1
Next scheduled review date:
RECORDS MAINTENANCE POLICY
OF THE COMMISSION

Policy Statement

The Southern Association of Colleges and Schools Commission on Colleges (SACSCOC) maintains the following files and records in accordance with Commission policy or with federal regulations governing accrediting associations recognized by the U.S. Department of Education.

Official Correspondence to Institutions

All official correspondence signed by the President of SACSCOC addressed to applicant, candidate, and member institutions informing them of formal Commission action and other correspondence deemed to be important for permanent retention are classified as official correspondence.

Disposition: Maintained permanently.

Institutional Profiles and Important Correspondence

Recent print copies of Institutional Profiles are maintained for one year. Institutional profile information is stored in the Commission data base.

Disposition: Information on enrollment and finances collected from the Institutional Profiles is stored in the data base for a minimum of ten years. Print copies of profiles are purged annually upon receipt of the Institutional Profile for the subsequent year and entry into computer. Audits submitted with Institutional Profiles are retained for three years after submission.

Institutional Materials related to Reaffirmation

For each institution, the Commission retains a print copy of the original signed Compliance Certification that includes narrative supporting determination of compliance, the Quality Enhancement Report, the Institutional Summary Report, Report of the Reaffirmation Committee, and the response of the institution to the Report of the Reaffirmation Committee.

Disposition: All copies of the above are maintained in off-site file storage area and recorded in the Commission's data base for such time as to permit the file to contain records of the last two comprehensive reviews. Print copies destroyed after that point; data base files are retained.
Institutional Materials Related to Substantive Change

Institutions notify the Commission before making significant changes in program, location, or program delivery mode in accordance with the Commission’s Substantive Change policy. The Commission’s response may be simple acknowledgement, addition of the information to the Commission’s files, request for further information and/or a prospectus, notification that the change will be reviewed at the point of the next Reaffirmation, referral to the SACSCOC Board of Trustees for approval, or authorization of a Substantive Change Committee visit. When a Committee is authorized, the Commission retains a copy of the Report of the Substantive Change Committee, the response of the institution to the Report, and the letter of notification informing the institution of Commission action.

**Disposition:** The Report of the Substantive Change Committee will be retained for 10 years. If a committee visit is authorized, the institution’s prospectus or application will be maintained by the Commission staff member assigned to that institution. Once the final action of the Commission has been taken, whether by the SACSCOC President or by the SACSCOC Board, all institutional materials are destroyed except for the original institutional notification letter, the Committee Report, and the final letter of notification regarding Commission action.

Other Institutional Accreditation Information and Reports

Currently, institutional accreditation information maintained by the Commission includes reaffirmation, candidate, accreditation, substantive change, special and other visiting committee reports; monitoring reports (formerly called follow-up or progress reports); accreditation decision letters; official correspondence; and fifth-year interim and follow-up reports. Other pertinent information may be maintained at the discretion of the staff.

**Disposition:** Information is retained off site for such time as will permit the file to contain records of the last two institutional reviews. Print copies are destroyed after that point; data base files are retained. Other information may be retained at the discretion of the staff, again, taking into account the need to maintain complete and accurate records while reducing whenever possible redundancy and file storage space requirements. All copies of Applications are destroyed after the initial Accreditation Committee report is received and official action is taken by the Commission.

If an institution is removed from candidate or accredited status or the institution withdraws its status, all files pertaining to the institution will be purged following final action by the Commission’ Board of Trustees (includes appeals) with the exception of the retention of official correspondence.

Documents related to Appeals and Litigation

Print copies of the administrative record, the institution’s brief, the Commission’s response brief, and official correspondence related to an appeal will be stored until final resolution of the appeal. Significant documents related to litigation between the Commission and an institution will be maintained until the case has been resolved.

**Disposition:** Upon notification that litigation has been resolved, all print copies of institutional case materials will be maintained for one year. After one year, only official correspondence and significant material related to litigation will be maintained.

Upon a final resolution of an institution’s appeal, print copies of all case materials will be maintained for two years. After two years, only official correspondence related to the appeal will be maintained.

Staff Working Files

Maintained in staff liaison offices, these files contain day-by-day working papers pertaining to individual institutions, notes, correspondence, etc.
Disposition: Files are purged by staff at the point of staff reassignment. Upon notification that an institution has initiated litigation, no materials regarding the institution will be purged from the files until such action is resolved.

Other Historical Documents relating to the Work of the Commission

Materials include documents deemed by the staff to be important to documenting the history of the institution or of the Commission and its work.

Disposition: Documents are stored off-site and maintained permanently. Staff judgment as to contents of these files will be informed by the knowledge that, since these files relate to the history of the organization, their contents would likely be accessible to its members.

Review of this Policy

This policy will be updated regularly to ensure contemporary compliance with federal laws and regulations and other pertinent legal requirements.

Document History

Approved: Commission on Colleges, December 1994
Revised for the Principles of Accreditation: February 2004
Edited: January 2012