# Pre-Applicant Minimum Requirements Review Report

*Effective Date: January 1, 2021*

**Institution Name:** Click or tap here to enter text.

**Main Campus Address:** Click or tap here to enter text.

**Date(s) of Pre-Applicant Site Visit:** Click or tap to enter a date.

***Section A: Evaluator Information***

**Lead Evaluator Name**: Click or tap here to enter text.

**Title and Institution/Organization**: Click or tap here to enter text.

**Evaluator Name**: **Click or tap here to enter text.**

**Title and Institution/Organization**: **Click or tap here to enter text.**

*By submitting this report, the evaluator affirm(s) that they have reviewed all documentation submitted by the institution, affirm that they have no conflict of interest with the institution, and understand that confidentiality must be maintained relating to this application submission.*

***Section B: Institutional Representatives***

**Institutional representatives at the time of the review:**

**President/CEO**

*[NAME AND TITLE OF PRESIDENT/CEO]*

**Chief Academic Officer**

[NAME AND TITLE OF CHIEF ACADEMIC OFFICER]

**Application Manager**

[NAME AND TITLE OF CHIEF ACADEMIC OFFICER]

**Chief Financial Officer**

[NAME AND TITLE OF CHIEF FINANCIAL OFFICER]

**Chair of the Board of Trustees or Governing Body**

[NAME AND TITLE OF CHAIR]

***Section C: Summary of Findings***

Peer evaluators will document their findings that the institution *appears to meet / does not appear* to meet the minimum requirements.

1. **Legal Authorization and Licensing**
	1. The institution is authorized or licensed to operate as a postsecondary educational institution.

 Y  N (If N/A *see item d. below)*

* 1. The institution is authorized or licensed to award postsecondary degrees.

 Y  N (If N/A *see item d. below)*

* 1. The institution has provided sufficient written documentation documenting both a and b above. *A progressive application to the appropriate authority is acceptable but the institution must provide a status update prior to submission of the Accreditation Readiness Report (ARR). List documentation provided.*

 Y  N (If N/A *see item d. below)*

* 1. The institution is exempt from State authorization under the State constitution or by State law as a religious institution with a religious mission.

 Y  N *Provide details if this is the case.*

1. **Standing with State or Other Accreditors**
	1. The institution is in good standing with no current non-compliance, adverse or the equivalent type of action with the state or other accreditors recognized by the United States Department of Education (USDE) in accordance with federal regulation 34 CFR § 602.28(b).

 Y  N *If No, please explain.*

1. **Institution is Operational**
	1. The institution is operational, with students actively enrolled in its degree programs.

 Y  N *If No, please explain.*

* 1. Did the information provided raise any concerns?

 Y  N *If Yes, please explain.*

* 1. Summarize findings regarding enrollment, academic programs, faculty, facilities/locations, etc.
1. **Institutional Mission and Goals**
	1. The institution has a mission statement and related goals that define its purposes within the context of higher education.

 Y  N *If No, please explain.*

* 1. Summarize findings about mission statement and related goals.
1. **Institutional Governance**
	1. The institution has a governance and administration structure that allows it to have education as its primary purpose and operate as an academic institution with appropriate autonomy.

 Y  N *Please explain your answer.*

* 1. If the institution has any related entities, the governance structure appears to allow the institution to maintain a proper level of control over decision-making and operate as an academic institution with appropriate autonomy.

 Y  N N/A *Please explain your answer.*

1. Summarize findings related to governance.
2. **Financial Resources**
	1. The institution has documented financial resources, funding base, and plans for financial development, including those from any related entities (including without limitation systems, religious sponsorship, and corporate ownership) adequate to support its educational purposes and programs and to ensure financial stability.

 Y  N *Please explain your answer and list the documentation provided, e.g. audited financial statements.*

* 1. The institution’s financial ratio analysis meets the expected indicators.

 Y  N *Please explain your answer.*

1. **Disclosures and Certifications**
	1. The institution has provided all appropriate disclosures and provided appropriate all necessary documentation/information to explain any issues or concerns.

 Y  N *If there are concerns, please elaborate.*

* 1. Information provided in the disclosures disqualifies the institution from proceeding with the application.

 Y  N *Please specify area of concern.*

The Commission reserves the right to decline to review the application for any of the areas addressed in the *Disclosures and Certifications Statement*.

***Section E: List of Additional Evidence Requested by Peer Evaluators***

*List all additional evidence requested by peer evaluators that was used to verify compliance with minimum requirements.*

***Section F: Proposal to Inform Commission Action***

*Select only one of the following options:*

1. [ ]  To allow the institution to submit an application because the pre-applicant institution appears to meet the minimum requirements.
2. [ ]  To decline to review the application because the pre-applicant institution has not demonstrated that it meets the minimum requirements.