

*Unit and Program Approval Review Handbook*

*for*

*Institutions of Higher Education*

*in the*

*State of South Dakota*

*Office of Accreditation and Teacher Quality  
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## INTRODUCTION

Unit and program approval is the process through which a team of educators, appointed by the South Dakota Department of Education (SDDOE), conducts an assessment of an institution's professional educator program(s.) **South Dakota Codified Law 13-42-3** establishes the authority of the South Dakota Board of Education to develop the requirements that institutions must meet in order to gain approval of their teacher preparation programs. These requirements are set forth in **ARSD 24:53 Teacher Preparation Program Approval**. **ARSD 24:53:02:01** states, "In order to be eligible to request approval of programs that prepare educational personnel to meet certification requirements in accordance with **ARSD 24:53**, institutions must provide evidence of compliance with regional accreditation and eligibility for Title IV funding as stated in **SDCL 13-49-27.1**. At least once every seven years, the South Dakota Department of Education will conduct an on-site review of the education unit and each program for the preparation of education personnel offered by a four-year regionally accredited institution that has applied for state approval. After the department has verified that the standards in **ARSD 24:53** have been met by the unit and each program, the South Dakota Board of Education may grant initial or continuing approval to the unit and program(s) that were reviewed. In order to receive and maintain program approval, the unit must submit the following to the department every seven years:

- 1) An Institutional Report, as outlined in the department's *Unit Program and Approval Review Handbook for Institutions of Higher Education in the State of South Dakota*; and
- 2) Evidence of candidate competencies as required in **ARSD 24:53:05** through **24:53:06**.

For institutions seeking initial or continuing accreditation from the National Council for Accreditation of Teacher Education (NCATE) or the Teacher Education Accreditation Council (TEAC), the department shall conduct joint reviews of the unit and its education programs as outlined in the partnership agreement between the department and the accrediting agency.

## Background

The evolution of unit and program approval can be divided into several phases. In the first phase, candidates took courses, completed degree requirements and applied for certification. The Department of Education Office of Accreditation and Teacher Quality examined the applicant information and issued a certificate based upon the applicant's successful completion of a state approved program.

In the second phase, the state established standards for unit and program approval. Review teams visited the universities and colleges to review the facilities, budgetary allocations and resources, and required courses and field experiences to determine response to the standards.

The third phase of unit and program approval began with the "performance assessment" focus around the year 2000. In this phase, teams selected by the state went to the preparing institutions and reviewed the evidence of the candidates' knowledge and competence. The most important documents were the evidence that supported the assessment of the candidates' knowledge and

competence e.g., examinations, journals, videotapes, lesson plans, and all of the items that might be found in a portfolio. The focus of the review was on the institution's ability to prepare and assess the knowledge and competence of candidates prior to recommending them for certification.

The final phase has transitioned into the current phase of unit and program approval. Many national accrediting bodies have asked institutions to gather data on P-12 student learning. The achievement of the P-12 students is the ultimate performance that professional educators are being prepared to enhance. Many variables come into play when assessing performance on the P-12 level. Some of those variables may be beyond the control of veteran teachers, and even more difficult for novice teachers. Still, this challenge represents the frontier to which unit and program approval is directed.

Hopefully, this handbook and the policies and requirements established within, will foster improved preparation programs and ultimately, high quality professional educators that the children of South Dakota deserve and upon whom the future of our state depends.

This handbook is intended to guide all of the South Dakota preparing institutions through the process of gaining state unit and program approval.

Institutions seeking NCATE unit accreditation should access the *NCATE Handbook for Accreditation Visits* for more detailed information on the NCATE review process. Information on how to obtain the NCATE Handbook may be found at [www.ncate.org](http://www.ncate.org).

### **Scheduling the Review**

Unit and program approval is a continuous process that culminates with an on-site review every seven years. The formal process leading up to the review begins two years before the on-site review when the State Consultant in the Office of Accreditation and Teacher Quality, notifies the institution that it will be scheduled for a *Unit and Program Approval Review*. A list of the institutions scheduled during the seven year cycle is contained in the Appendix section of this Handbook.

The review dates run three to four consecutive days, beginning the afternoon of the first and concluding by noon on the third or fourth. Usually the review will be conducted on Sunday-Wednesday.

Institutions seeking NCATE accreditation must comply with the timelines for requesting dates established in the NCATE Handbook. The SDDOE consultant will confirm the mutually agreed upon dates with the institution and with NCATE.

Each institution that is scheduled for a review may plan a technical assistance meeting with the state consultant prior to the review dates. During this meeting the consultant from the Office of Accreditation and Teacher Quality will review the *Unit and Program Review* process and the format for developing the Institutional Report and *Program Report* materials. This meeting is

referred to as a technical assistance visit because its purpose is to provide assistance in developing the report materials that will be utilized during the approval review.

### **Institutional Report and Program Report Overview**

Institutions seeking NCATE unit accreditation must comply with the guidelines and timelines for preparing an Institutional Report that are established in the NCATE Handbook. Each non-NCATE institution is required to prepare an Institutional Report as described in this Handbook, and must send a copy to the SDDOE consultant at least 30 days prior to the on-site visit. Institutions are encouraged to develop the Institutional Report and support documents in an electronic format. Whenever possible, a web-based system of information management should be implemented. The SDDOE consultant will review the specific information to be sent during the technical assistance meeting.

The unit and program review process focuses on making a determination of the degree to which the institution and its teacher preparation programs comply with the standards and guidelines identified in **ARSD 24:53**. During the review process, institutions are required to assemble evidence to support the information presented in their Institutional Report on how those standards and guidelines are met.

In addition to the unit standards, institutions are required to prepare program review materials that address the specific programs, published in **ARSD 24:53**, for each teacher preparation program they intend to offer. The programs that have national standards are aligned with the professional association standards and identify the programmatic requirements of each certification area. Programs not associated with a national professional association will show compliance with standards specifically adopted by the state for that program. Reports will be sent to the SDDOE consultant electronically at least six months to one year prior to the on-site visit. The consultant will distribute reports to the appropriate reviewers.

### **Review Teams**

A *program review team* will be selected to review program reports and report the findings and recommendations to the SDDOE consultant. The team will include a balance of expertise from P-20 education communities. Its composition will include individuals who possess the knowledge and skills necessary to adequately assess the institution and its components and offer recommendations on how to ensure the unit and programs operate within the regulations. The team will be comprised of people trained in the review process, who engage in similar reviews on a regular basis.

A *unit review team* will be selected to review, audit, and verify findings at an on-site review. The on-site review will have at least 4 members, including the SDDOE consultant. The team will include a balance of expertise from P-20 education communities. Its composition will include individuals who possess the knowledge and skills necessary to adequately assess the institution and its components and offer recommendations on how to ensure the unit and programs operate within the regulations. The team will be comprised of people trained in the review process, who engage in similar reviews on a regular basis.

The institution is responsible for the subsistence, lodging, and travel costs for team members.

### **Pre-visit**

Approximately 60 days prior to the on-site review, the SDDOE consultant will meet with the institution's review coordinator to make the final arrangements for the visit. The pre-visit is a very important part of the unit and program approval process. It provides an opportunity for a focused discussion of the SDDOE expectations and the institution's state of readiness for the activities that will take place during the review. During the pre-visit, the state consultant has the responsibility to interact with the coordinator in establishing the collaborative tone for the review.

During the pre-visit, a draft of the required Institutional Report should be available in order to review the organization of materials and confirm the size of the team. When the institution intends to use a web-based review, the website should be in place and reviewed. A tentative schedule of the on-site activities should be developed. A detailed schedule of activities, interviews, class visits, etc., should be reviewed by the team chair, in coordination with the SDDOE liaison and the institution's coordinator, at least 30 days prior to the actual visit. A checklist of pre-visit agenda items is contained in the Appendix section of this Handbook.

### **On-site Review**

Accreditation visits run for three to four days, beginning with the opening of the exhibit room, an orientation, team meeting, and reception on the first day and ending with an exit report around noon on the fourth day. The institution should provide the review team with a hotel and on-campus workroom for its exclusive use during the visit. An exhibit room, including all of the materials identified under *Preparing for the Visit* in this document, should also be created in close proximity to the workroom, if space is not available in the workroom.

When planning the exhibit room, attention should be paid to the transportation of materials. Team members will normally begin the review of the exhibits on the first day, prior to the reception. They may want to continue this process following the reception and on the morning of the second day. Procedures for moving materials from campus to the hotel workroom should be discussed.

At the conclusion of the visit, the SDDOE consultant will conduct an oral exit report with the appropriate institutional personnel. The institutional personnel who will attend the exit interview are determined by the institution. The purpose of the report is to highlight the overall findings of the team and to give the institution a sense of what will be sent to the South Dakota Board of Education (SDBOE). The actual findings and recommendations will be formally presented in a report to SDBOE that will form the basis for the decision on the unit and program approval status of the institution. The process for transmitting the report and findings is described below.

## Final Report

The state consultant has 30 days to prepare the draft of the report, the report includes the findings of the team members regarding the ability of the institution and its programs to operate in accordance with the requirements identified in the ARSD 24:53.

The state consultant prepares and forwards a draft of the report, including the team's findings, recommendations, and overall recommendation regarding approval to team members for review and editing. Team members have five days to respond to the consultant. The consultant incorporates revisions from team members and forwards the report to the institution to review and respond to standards and guidelines that were *not met* or *areas for improvement*. A copy of the final report and the institution's response is sent to the institution and a copy is filed in the Office of Accreditation and Teacher Quality.

Final approval decisions are made by the SDBOE and are conveyed in writing to the president of the institution and the head of the professional education program within 30 days. Representatives from the institution are invited to be in attendance when the report to the SDBOE is delivered.

The South Dakota Board of Education makes one of the four following accreditation decisions:

- 7 year, ***Full Approval***
- 2 year, ***Conditional Approval*** with a visit to the institution to monitor any standard(s) that were determined to have ***significant areas for improvement***.
- 1 year, ***Probationary Approval*** with a visit to the institution to monitor any standard(s) that were determined to be ***not met or with significant areas for improvement***. Those candidates presently in the program as juniors or seniors may complete the program; no new candidates are allowed until the deficiencies are corrected.
- Denial, ***the program approval is removed***. No graduates of such program(s) are authorized for certification, however an institution may appeal. See below for the ***appeals process***.

Written notification of the state board's decision is filed with the Office of Accreditation and Teacher Quality and sent to the institution within 30 days of the decision.

When Conditional or Probationary Approval is granted or when a program(s) is denied approval, the institution has sixty (60) days to respond in writing to the state consultant, if it disagrees with the decision. **It is expected that at times, an institution will receive Conditional or Probationary Approval based on the number of its programs that have been identified with concerns from the program reviewers prior to the on-site review.**

Any institution that receives *Conditional* or *Probationary Approval* is required to submit a plan for addressing any areas for improvement and a timeline for implementing the corrective action within the time limitations of the approval status. Specifics of reporting and follow-up visits will be negotiated between SDDOE and the institution.

When an institution and/or any of its professional educator programs is Denied or put on Probationary status, the following steps must be taken:

- 1) Terminate the admission of candidates to the program.
- 2) All candidates who are presently enrolled in the program must be formally notified of the decision. The formal notification must explain the basis for the denial or probation and inform each candidate of the courses that must be taken in order to complete the program or transfer into another program.
- 3) A list of the candidates that were notified must be forwarded to the Office of Accreditation and Teacher Quality. The list must include the name, social security number, number of credits needed, and anticipated completion date. The completion date cannot be longer than 3 semesters from the date of the denial.

### **Discontinuing and/or Modifying a Program**

When an institution decides to discontinue a professional educator program, the procedure outlined above should be followed. Because this decision may have adverse consequences for the candidates, the institution is responsible for making every effort to facilitate their completion of the program. These efforts should include collaborating with other institutions in the area in accepting coursework, transferring credits and completing other required activities that candidates may need for certification.

When an institution seeks to modify any of its professional educator programs, the planned modifications should be discussed with the State Consultant in the Office of Accreditation and Teacher Quality. Many programmatic changes are minor, such as changes in course sequences and the offering of alternative electives not identified on the advisement sheet utilized during the program approval review. These types of modifications do not need the approval or formal notification of the SDDOE. However, more significant program changes, such as those relating to the Unit Standards or other requirements specifically identified in **ARSD 24:53**, must be submitted in writing at least 90 days prior to the planned implementation date. The submittal must identify: 1) the rationale, 2) the identified changes, 3) the programs, 4) the implementation date, and 5) a revised advisement sheet, when appropriate. The State Consultant will review the modification for consistency with the provision of **ARSD 24:53** and provide written notification of acceptance or concerns to the institution.

### **Conditions for Follow-up Reviews**

When an institution or any of its programs receives a Probationary or Conditional Approval for one or two years, a follow-up review must be conducted during the final semester of the approval period. The follow-up review will be conducted by the SDDOE consultant. This may be the case in such instances as when advisement sheets are cited as inaccurate or inadequate or when performances on the Praxis examinations are an area for improvement. In other instances, it may

be necessary for a programmatic team member(s) to return to the institution for the follow-up. Some examples of this may be when insufficient evidence of candidate knowledge and competence is unavailable, or when the studies cannot be verified through the syllabi, or when significant programmatic changes have to be implemented due to inadequate scope of studies or field experiences. The costs associated with the follow-up reviews must be paid by the institution.

### **Levels of Compliance**

The validation process includes rating the extent to which standards have been met. Each standard is rated and assigned a level of compliance based on specific criteria. Determination of the level must be supported by documentation.

#### **Standard Met**

A standard may be rated as met when it has been determined through the validation process that the institution clearly meets the expectations of the standard.

#### **Standard Not Met**

A standard is rated as not met when it has been determined through the validation process that the intent of the standard has not been addressed or that implementation has been deficient to the extent of negatively affecting the program. The rating must be supported by a description of the documented findings of deficiency, including recommendations, which become a part of the report.

### **Preparing the Institutional Report**

Each institution seeking approval is required to prepare an Institutional Report document that identifies how the institution meets the requirements established under **ARSD 24:53**. Each institution should obtain a copy of the **Unit and Program Approval Review Handbook for Institutions of Higher Education in the State of South Dakota** prior to beginning the Institutional Report development process. A copy of this document is posted on the Department of Education's website at [www.doe.sd.gov](http://www.doe.sd.gov).

When an institution begins the approval process, the emphasis should be on improving the unit and its program(s) by examining its present design and performance in light of the standards and guidelines. Once the institution has identified this information and assigned the responsibility for conducting the internal review of the various aspects of the program(s), it is ready to begin the writing of the Institutional Report.

The template for the Institutional Report for non-NCATE institutions is available at [www.doe.sd.gov](http://www.doe.sd.gov). The content of the Institutional Report should include an introduction that provides an overview of the institution and familiarizes the review team with the history of the institution and the present teacher education program.

Responses in the Institutional Report are written indicating how the institution meets each standard listed in the **ARSD Rules 24:53** governing Teacher Preparation Program Approval. Responses should include a description of the unit's conceptual framework and evidence that demonstrates that **ARSD Rules 24:53** are met. In continuing accreditation visits, the Institutional Report also serves as documentation of the unit's growth and development since the last accreditation visit.

The Institutional Report is to be submitted electronically.

An Institutional Report should include a cover sheet that identifies:

1. The name and address of the unit and institution.
2. The dates of the scheduled visit.
3. The unit's website address.
4. The accreditation review coordinator.
5. A table of contents and three sections.
  - Overview of the Institution
  - Conceptual Framework
  - Evidence for meeting each standard in **ARSD 24:53**

### **Overview of the Institution**

This section sets the context of the visit. It should clearly state the mission of the institution and the unit. It should also describe the characteristics of the unit and identify and describe any branch campuses included in the review, other off-campus sites, alternate route programs, and distance learning programs. The overview should include any other information to help the review team understand the unit (e.g., residential or commuter, religious affiliation, and characteristics of the student body.) This section should also list all programs offered by the unit that prepare individuals to work in P-12 schools.

### **Conceptual Framework**

This section provides an overview of the unit's conceptual framework (s). The overview should include a brief description of the framework and its development. For continuing visits, changes in the conceptual framework since the last visit should be related to revised or refined unit, professional, and/or state standards and assessments. The framework should summarize the following six structural elements: (1) shared vision, (2) coherence, (3) professional commitments and disposition, (4) commitment to diversity, (5) commitment to technology, and (6) candidate assessment aligned with professional and state standards.

### **Evidence for Meeting Each Standard**

In this section the unit should discuss the evidence and provide data that demonstrates that it is meeting the standards in each chapter and section in **Article 24:53**.

The institution should assemble as much supporting documentation as possible in the Exhibit Room. The team should not need to go to another location for written documents that support the Institutional Report and show how the state standards are being met. (Exceptions to this would be reviewing transcripts in the Registrar's office and examining student files in their permanent location.)

Supporting documentation may include but not be limited to the following:

- Catalogs and other printed documents describing general education, teaching majors, and advanced degrees.
- Course syllabi for all required courses in each of the teaching majors and advanced degrees. (grouped by program)
- Course syllabi for all general education courses.
- All printed documents relating to the teacher education programs.
- Examples of student work. (Identify the course in which the work was completed.)
- Follow-up studies of graduates conducted over the past three years.
- Handbooks distributed for student teachers and field experiences.
- Written agreements with local schools for student teaching placement and other collaborative activities.
- Admission policies and criteria.
- Documents relating to advising students.
- List of competencies expected at completion of programs and assessments used to ensure these outcomes.
- Faculty handbook.
- Faculty evaluation instruments.
- Documents that describe the governance and operations of the teacher education program. (e.g., organizational chart for instruction)
- Minutes of advisory groups and governing groups.
- Documents listed in the Institutional Report as sources for verification.
- Documentation of the organizational structure identifying responsibilities.
- Unit policies and procedures.
- Candidate portfolios.

The unit is to notify personnel that team members will need access to transcripts for current students and recent graduates (within the last 3 years). Team members will also examine student files that contain advising and assessment information; and evaluation forms for student teaching, field experiences and evidence of required competencies.

## ***Introduction***

The first section of the document must contain an introduction to the institution, including:

- an identification of the degree(s) and professional educator program(s) offered,
- a description of the demographics of the students who enroll in the teacher preparation programs,
- any other contextual information that will help the review team develop an understanding of the mission, standards, and culture of the institution.

This brief summary will introduce the institution to the members of the review team and provide the context for the data that follows.

The Institutional Report must provide the review team with enough information to suggest that the program(s) is in compliance with the requirements. It is very important to identify the evidence that can be reviewed in support of the institution and its programs meeting the standards and guidelines. The Institutional Report describes the operation of the institution and the professional educator programs in the context of the requirements of the unit standards and program guidelines. The Institutional Report must reference the documents that will be used for verification purposes. The institution must assemble the documentation in an exhibit room and electronically. The exhibit room must be organized so that it allows ready access to documents that were identified. Because of the confidential nature of some of the documents, institutions may choose to provide information that identifies where the documents can be obtained and reviewed.

Professional educator programs must develop a course/program matrix that demonstrates how the courses meet the specific program guidelines and how course requirements are used to demonstrate candidate knowledge and competence. The developed matrix must be supported by course syllabi that also identify the required studies and experiences contained in the guidelines. A matrix that simply refers to a syllabus is not an acceptable form of documentation.

It should be noted that the fact that the topics are covered in a course and reflected on the syllabus is only one indication that the guideline is met. The guidelines state that the program must document the candidates' "knowledge of and competence in" applying the concepts. To that end, the Institutional Report must direct the reviewer to the evidence that the candidates learned what was taught rather than the presentation that the topics were covered. The matrix must reflect this concern. A matrix that merely shows the courses in which the guidelines are covered is inadequate. The matrix must also show the method/product that will be required to demonstrate that candidates learned the topics identified in the guidelines and covered in the courses.

Consideration should be given to the layout of the exhibit room to ensure that adequate space is available for reviewing the materials. Although the exhibit room may serve as the team's on-campus workroom, it should not be used for interviews during the visit. The exhibit room should be equipped with personal computers and a printer if it will serve as the team's on-campus workroom.

Team members may want to transport some of the exhibits to the hotel. Provisions should be made to facilitate this process. In part, this will depend upon the location of the initial meeting on the first day of the review. When the initial meeting is on campus, the team members can select the materials to take to the hotel. When the initial meeting is at the hotel, the institution and team would be best served by setting up some samples of the exhibits there. It is very important that these details be worked out during the pre-visit.

### **Developing the Agenda**

Interviews are another method that the team will use to verify and validate information presented in the Institutional Report. A tentative agenda should be developed by the institution and discussed during the pre-visit. In developing the agenda, careful attention should be given to scheduling activities in a manner that ensures that adequate time is allocated to the various aspects of the program. In addition to scheduling time for the team to become familiar with the exhibit room and other campus facilities, the team will need to interview administrators, faculty, candidates, and personnel from cooperating local schools.

A typical agenda would begin with a team meeting followed by a reception on the first day of the review. The reception allows the team members to meet with faculty and administrators prior to the actual interviews. Specific arrangements for the first afternoon and evening should be discussed during the pre-visit. In making the arrangements, it should be kept in mind that the team has very little time together prior to beginning the on-campus activities. A well-planned first day will get the review off to a good start.

On the morning of the second day, the team should be transported to the exhibit room. At least 30 minutes should be scheduled for the team to become familiar with the exhibits and campus layout before the actual interviews begin. Following this initial period on campus, the meetings with administrators, faculty and support personnel should be scheduled. These meetings should not run more than 40 minutes with a 15-minute break occurring between each. The team is usually divided up in order to cover assigned areas so that concurrent meetings can be scheduled.

A team lunch should be scheduled at a place where the team can discuss the progress of the review and identify areas that may require additional verification. At times it may be necessary to schedule someone for an interview during the lunch, but as a rule, the lunch should be a working lunch for the team members only. The choice of using a campus dining facility or bringing the lunch to the workroom should be discussed during the pre-visit.

Following lunch, the team will continue interviews with faculty, administrators and candidates. Whenever possible, meetings with candidates should be organized into small groups of five to ten candidates. Small groups of faculty, organized by department or function i.e., chairs, are also a viable way of scheduling interviews.

The early afternoon may be the best time to schedule interviews with current candidates while late hours of the afternoon may be a more convenient time to schedule interviews with student teachers, graduates, cooperating teachers and administrators, who have to leave their places of

employment in order to participate in the process. The full day on campus is a very long day and as a rule, interviews should not be scheduled after 5pm. Institutions should make considerable effort to ensure that a wide cross-section, if not all, of the programs are represented by the student teachers and cooperating school district personnel during the interviews.

On the final day of the review, the team works primarily at the hotel. Normally, the only on-campus activity is the exit report. This should take place in the late morning. The specific time should be discussed during the pre-visit and confirmed prior to the team leaving the campus. The exit report allows the team chair to provide the institution with a preliminary list of strengths and concerns. Unit and program approval status and specific recommendations are not presented at that time. The representatives from the institution who will be invited to the exit report should be discussed during the pre-visit.

A sample On-site Review Schedule is presented in Appendix IV. This sample schedule is intended to be a guide. The actual schedule of activities should be negotiated beginning at the pre-visit and continuing through the final day on campus.

### **Preparing the Budget**

The costs associated with the SDDOE consultant's participation in the technical assistance visit are the responsibility of the Department of Education. This pre-visit should be conducted approximately 60-90 days prior to the review.

The costs associated with the review, including the reimbursement for travel, subsistence, and lodging of the team, are the responsibility of the institution. In planning for these costs, the size of the team should be one of the first considerations. An institution should have a sense of the team size when it submits the letter identifying the dates of the review and the options for developing the Institutional Report and Program Reports.

Hotel accommodations should be planned so that each member of the team has a separate room. The hotel should also have a workroom large enough to accommodate the team, with additional space for at least two personal computer workstations. This workroom should be available throughout the review. When possible, the institution should consider selecting a hotel with or near a dining facility. Planned group meals at the hotel and on campus may help in controlling the budget and reduce the need for the direct reimbursement of team members. When group meals are not planned, the institution should provide for meal charges to be billed to the room. The allowable amount should be made clear to the team chair.

In addition to the obvious meals, the institution should budget for refreshments in the hotel workroom and the campus exhibits room.

The transportation of team members from the hotel to the campus is one final factor that should be considered in preparing the budget. Details of the transportation plan should be discussed with the SDDOE consultant.

## **GUIDELINES FOR PROGRAM REVIEWERS**

### **Roles of Reviewers**

- Judge alignment of assessment and candidate data with program standards
- Clearly communicate strengths and weaknesses in relation to the standards
- Make a judgment with a clear and open mind
- Make a judgment based on accepted criteria rather than personal bias
- The job of the reviewer is to make as objective an assessment as possible about the degree to which a given program meets the program standards, based on candidate performance evidence.

### **Primary Documents:**

The **Program Report** is the documentation submitted by the program to demonstrate that it meets the programs standards. All of the information that you will use to make a decision will be found in the Program Report. This document, submitted on-line, is available to you. You can print out individual sections if you'd prefer to work with hard-copy.

As you review the Program Report you will have several documents to work with. The first is the **Reviewer Worksheet** and is included at the end of this document. The Reviewer Worksheet will help you work your way through the standards, and will help you prepare the information you will need to complete the Program Recognition Report. You may want to print this out so you can use it to take notes as you read through the report. This is a personal document and will not be shared with your co-reviewer(s). You will not submit the Worksheet to SDDOE, but we do ask that you destroy it when the review is complete. The Worksheet is just a tool to help you complete the review and to guide you in preparing the information you will need to complete the Program Recognition Report.

The **Program Recognition Report** is the official document that you will submit to SDDOE and will be read by the other members of your team. Your team will prepare a final Program Recognition Report (this will reflect your team's deliberations) and the final Program Recognition Report will be reviewed by the SDDOE State Consultant, and then sent to the institution.

### **Overview of Program Report**

The program report consists of a Cover Sheet and five sections. The Cover Sheet provides basic information about the program being submitted. Section I presents background and contextual information about the program; Section II includes a chart that lists each of the 6-8 assessments; Section III includes a chart that links the 6-8 assessments with the program standards; Section IV provides a narrative explanation for how each assessment addresses the standards and what the assessment data says about candidate proficiency; and Section V provides information on how the program faculty have used the data to improve their program. The following information

supplies more detail about each section of the Program Report including information on how to use each section as you complete your evaluation.

### **Section I--Context**

Section I, the Context Section of the program report, should provide background information for the reviewer. It includes descriptions of faculty expertise and experience in the specialty field, relationship of assessments used in the program to the unit's assessment system, and the program of study together with the field and clinical experiences required for the program. Concerns, strengths, or deficiencies found in this part of the program report may be seen in the evidence provided for the subsequent sections of the report and may serve to explain that evidence. If, as you read Section I, you have strong concerns about the faculty, curriculum or other components of the program, you may note them on your Reviewer Worksheet and/or include them in Part F, item F.1, of the Program Recognition Report.

### **Section II—Assessments and Related Data**

Section II is a chart that program compilers will use to list the key assessments. You will be using this information as you work through Section III and IV of the report so you may find yourselves clicking back and forth between these sections.

### **Section III—Standards Assessment Chart**

The chart in Section III links the assessments to the standards. Each standard is listed in the first column. In the final column compilers have checked the numbers of the assessments (from the chart in Section II) that they feel address each standard.

### **Section IV--Evidence for Meeting Standards.**

In Section IV compilers provide a narrative for each of their key assessments. In this narrative they are asked to provide a very brief description of the assessment, describe how the assessment addresses the standards (as checked in the chart in Section III), summarize the data for the assessment, and then provide a rationale for how the data demonstrates candidate mastery of the cited standards. They will also attach three documents for each assessment: the assessment instrument (or complete descriptions of the assessments), the scoring guide for each assessment, and a chart that includes the data for each assessment.

As a reviewer, you will use this information as you answer two primary questions: are the assessments appropriate for the cited standards and do the candidate data demonstrate that most candidates meet the standard. The information in Section IV should give you insight into how the faculty perceive the assessments align with the standards and provide information about any data that appear questionable or, perhaps, absent.

## **Section V—Use of Assessment Results to Improve Candidate and Program Performance**

The purpose of the final portion of the program report, Section V, is to demonstrate that faculty has used results from the key assessments to improve candidate achievement and program performance. The program report template includes these directions to report compilers:

The description should not link improvements to individual assessments but, rather, summarize principal findings from the evidence, the faculty’s interpretation of those findings, and changes made in (or planned for) the program as a result. Describe the steps program faculty have taken to use information from assessments for improvement of both candidate performance and the program. This information should be organized around (1) content knowledge, (2) professional and pedagogical knowledge and skills, and (3) effects on P-12 student learning.

Reviewer evaluation comments on this portion of the program report are placed in Part D of the Program Recognition Report. This information also provides critical information for the Board of Examiners.

### **Completing a Program Review**

#### **Getting Started:**

When you first open up the Program Report you might find it helpful to begin by reading Section I first, scanning Sections II and III, and then reading Section IV. This should help give you a broad understanding of the assessments and how they relate to the standards. You can then go to the Reviewer Worksheet (and/or other documents) and work through each of the questions.

The Reviewer Worksheet is organized around your program standards. You are asked to evaluate each of the assessments assigned to a specific standard (from Section III of the Program Report), evaluate the reported candidate data, and then to make a decision about whether or not each standard is met.

The following information is to help guide you as you answer each of the questions on the Reviewer Worksheet. Rubrics will be developed for each of these questions. The rubrics have three levels: target, acceptable, and unacceptable. Each of these is defined below:

- Target: Fully meets and exceeds standard
- Acceptable: Meets standard; weaknesses may be found, but overall the standard is met
- Unacceptable: Weaknesses are serious and must be addressed prior to positive rating

#### **A. Are the assessments aligned with the program standards?**

Assessments must be aligned with the standards—there must be a match between the content of the standard and what the assessment is measuring. It is quite likely that a single assessment could address components of multiple standards (as indicated in the chart in Section III of the

program report). Here are some questions that reviewers might ask as they evaluate alignment of the assessments:

- **CONTENT**—Do the same or consistent content topics appear in the assessments that are in the standards?
- **RANGE** —Do the assessments address the range of knowledge, skills, and dispositions that are delineated in the standard? Some program standards are very comprehensive, some cover smaller elements. In general, is the preponderance of the content of the standard addressed by the assessments assigned to it? If the program standard is very dense and covers a number of concepts, it is not necessary to check off every single element. It is better to look holistically at the standard as you compare it to the assessments. Program resources should be helpful to you when addressing this question.

**B. Do the assessments assess meaningful cognitive demands and skill requirements at challenging levels for candidates?**

Here are two questions that reviewers might ask as they evaluate this question:

- **COMPLEXITY**—Are the assessments congruent with the complexity, cognitive demands, and skill requirements described in the standards?
- **DIFFICULTY**—Is the level of effort required, or the difficulty or degree of challenge of the assessments, consistent with standards? Is this level reasonable for candidates who are ready to teach or to take on other professional educator responsibilities?
- *From what you find in the assessment, the instructions, and the scoring guide, is the assessment measuring what it purports to measure?*

**Other issues:**

- **SPECIFICITY**—Are the assessments vague or poorly defined? The assessments might include an entry like “portfolio entries, test results, observations.” What entries? What test results? What observations? These need to be identified as specific experiences. Is the assessment information oblique or confused? Sometimes the response does not actually address the standard.
- **OTHER REMINDERS FOR REVIEWERS**—
  - If grades are used as evidence, then the program report must describe how the content that candidates have studied aligns with program standards, and also what level of proficiency in those standards the grades represent. Institutions cannot claim that an acceptable grade in a course in which an important experience is embedded is sufficient to assume that the specific experience is satisfactory. For example, if a research project in a required course is cited as an example of how candidates meet a program standard, the course grade (which includes many measures beyond the

research project) cannot automatically be assumed to reflect information about candidate mastery of the standard.

- When state licensure examinations are submitted as evidence of preparation, there must be an indication of the content of those exams and how well they are aligned with program standards.

### **C. Are the assessments free from bias?**

From information provided in the program report, reviewers should be able to infer some important qualities about the avoidance of bias. Assessments should be constructed in ways that avoid biases in both language and in testing situations.

Reviewers can consider the following question:

- Are the assessments and their scoring guide free from racial, ethnic, gender, cultural, or other bias?

### **D. Are the scoring guides clear and are the levels of candidate proficiency they describe distinct and appropriate?**

A scoring guide is the tool faculty use to determine candidates' ratings on specific assessments. Scoring guides should address relevant and meaningful attributes of candidate knowledge and performance related to the standards on an assessment task and should be used to reach meaningful decisions. Scoring guides can take many forms (such as Likert scales and rubrics) depending on the assessment activity.

Regardless of the form the scoring guides take, they should have written and shared criteria for judging performance that indicate the qualities by which levels of performance can be differentiated. They should be explicit enough to anchor judgments about the degree of success on a candidate assessment.

Many assessments are little more than checklists completed at the end of the student teaching experience. They do not define what is being sought and the ratings are in some cases mere numbers or words subject to broad interpretation (e.g., 1, 2, or 3; or excellent, good, acceptable). Such instruments do not provide either candidates or supervisors with substantive guidance as to what is being sought.

To be reliable, assessments must be capable of yielding approximately the same values across raters. One way to achieve inter-rater reliability is to train raters, but this is difficult to evaluate in this paper review. A second and more practical approach is to carefully review instruments that are highly explicit as to expectations and ratings.

When evaluating scoring guides, reviewers can consider such questions as the following:

- Are scoring guides clear and explicit about faculty expectations for candidate proficiencies in relation to standards?

- Do scoring guides address relevant and meaningful attributes of candidate performance on an assessment task? Do assessments and scoring guides work together so that different levels of candidate proficiency can be clearly distinguished (Assessment Examples)
- When rubrics are used, is there specific guidance on what a rater might look for?

### **E. Do the data as reported indicate the extent to which the candidates meet the standard?**

The key summarizing question for reviewers is: does the program present convincing evidence that its graduates can demonstrate that they have mastered the program standards? The primary sources of information for you to use to address this question are the data charts for each assessment and the narratives in Section IV for each assessment. This should give you a complete picture of the data, how faculty interprets the data, and contextual issues that might have had an impact on the data.

### **F. Is the standard met?**

After answering the previous four questions, you are now asked to make a holistic decision on whether or not the standard is met. In general, most of the previous four questions should be met at the acceptable level for the standard to be met, but this should certainly be a matter of professional judgment. For example, you may deem that the assessments and scoring guide are appropriate but that the only available data is weak (perhaps it has only been administered one time and the faculty describe plans to change the curriculum appropriately). In this situation, you may determine that the standard is met even though there are some areas for improvement. In another situation, the assessments may be appropriate but the scoring guide is so weak that the data are essentially useless. In this case, the standard could not be met.

### **G. Final Program Recognition Decision**

After you have made individual decisions for each of the standards, you are asked to look at all of these decisions and then make one recognition decision for the program as a whole. As you do this, there are several things to consider.

#### Consideration in Determining a Program Rating

- Number of standards not met.
- Degree of divergence of ratings across standards

#### Remember. . . .

- There may be many ways to reach the same goal.
- Judgments must be based on standards, not personal opinion.
- Be reasonable, not harsh, nor gullible

The validation process includes rating the extent to which program standards have been met or not met. Each standard is rated and assigned a level of compliance based on specific criteria. Determination must be supported by documentation.

### **Standard Met**

A standard may be rated as met when it has been determined through the validation process that the program clearly meets the expectations of the standard.

As you read through the report, you should pay attention to aspects of the program that are unique and/or that you see as strengths. There is a section on the Reviewer Worksheet for you to note these as you see them. Strengths can either be specific aspects of the program (e.g. diversity of clinical sites) or more global statements (e.g. a major focus on teaching in urban settings). These will be cited in Part A.3 in the Program Recognition Report.

### **Standard Not Met**

A standard is rated as not met when it has been determined through the validation process that the intent of the standard has not been addressed or that implementation has been deficient to the extent of negatively affecting the program. The rating must be supported by a description of the documented findings of deficiency, including recommendations, which become a part of the report.

## **The Program Recognition Report**

The Program Recognition Report is the formal document that is completed and submitted to SDDOE. Each reviewer should complete a Program Recognition Report individually for each program he or she reviews. One reviewer for each program should be designated to compile the results of their own review with other reviewer results and complete the team's final Program Recognition Report that will be submitted to SDDOE. However, multiple programs can be combined into one Recognition Report if they were combined in the Program Report.

The Program Recognition Report has 5 sections. The following information provides information about each section and describes how to use information from the Reviewer Worksheet to complete the report.

### **Introductory Information:**

Complete this information for each program. This information can be copied from the Cover Sheet of the Program Report.

### **Part A—Recognition Decision**

#### **A.1.—Program Decision on recognition of the program.**

In this section put your final decision, taken from the Reviewer Worksheet, Section G. Standards will either be “Met” or “Not Met.”

## **A.2—Test Results**

The information on the 80% pass rate can be taken from the Cover Sheet in the Program Report. There is place for you to add comments if appropriate.

## **A.3—Summary of Strengths**

It is important that you cite strengths of the program that you have noticed. These can be taken from your notes on the Reviewer Worksheet. Strengths could be either specific aspects of the program (e.g. diversity of clinical sites) or more global statements (e.g. a major focus on teaching in urban settings), but should not be just a reiteration of the sections of the program standards that were approved.

## **Part B—Status of Meeting Program Standards**

In this section cite each individual standard as Met or Not Met. Take this information from Column F of the Reviewer Worksheet. If a standard is found Not Met, you must include a comment to explain why it is not met. The comment should provide enough information for the program to be able to understand the issue. Some guidelines for writing the comments:

- Use objective, impartial language
- Be complete so no other information is needed to understand why standard is “not met.”
- Explanation must be related only to the standard
- Be as clear and specific as possible
- Use direct language without being harsh or unprofessional
- Don’t use modifiers that appear tentative or uncertain
- Cite weaknesses if these have not already been addressed
- Be careful about including specific instructions for remediation (e.g. the faculty should develop a new course). Any “suggestions” from the reviewers will be taken as “commands” by the faculty. It is not the reviewers’ role to proscribe programmatic changes, but to provide explanation for why particular standards were not met.

## **Part C—Evaluation of Program Report Evidence**

In Part C you are asked to evaluate how well the program’s assessments and candidate data address content knowledge, pedagogical and professional content knowledge skills and dispositions, and candidate impact on student learning. The information in Part C summarizes the program report evaluation in a way that will be extremely useful to the Board of Examiners when they evaluate the unit against Unit Standard 1.

In this section, reviewers should discuss how appropriately the program standards were addressed in each of the three categories, C.1, C.2, and C.3; whether the assessments were of sufficient quality to address the program standards; how effective the scoring guides were in

identifying appropriate levels of proficiency, and to what extent candidates are meeting the standards. To complete Part C, you should use the chart in Section III of the Program Report. To complete section C.1, find those standards that have “Content Knowledge” checked in the second column and summarize your decisions for those standards (or components of those standards). For C.2, find those standards in the Section III chart that are cited for “Professional and Pedagogical Knowledge and Skills.” For C.3, find those standards that are cited for “Effects on Student Learning.”

The last page of the Reviewer Worksheet has a table to help you organize your response to Part C. In each of the sections of Part C you should write relatively brief (1-2 paragraphs) that summarize your evaluation of the relevant standards.

### **Part D—Evaluation of the Use of Assessment Results.**

In Part D, you should provide your evaluation of the information submitted in Section V of the Program Report. Questions for consideration might include:

- Is it clear that assessment evidence is used by the institution in evaluating the program, counseling candidates, and revising courses or other elements of the program?
- Has the institution made program changes based on assessment evidence?
- Do you find the faculty interpretations consistent with the evidence provided in the program report?
- Are the implications for programs that appear in this section of the program report derived from the interpretations?

### **Part E—Additional Comments**

Part E provides you with the opportunity to make any additional comments that you think are appropriate. In E.1 your comments should focus on the Context Statement and other issues that were not addressed elsewhere in this report. In E.2, you can cite concerns for follow-up by the Board of Examiners. These could be issues that are not directly related to the program standards, but are related to the Unit Standards. For example, you may be concerned about the number of faculty assigned to the program in relation to the number of candidates or you could be concerned that the clinical practice experiences are not sufficient for the program.

## **Decision Making FAQs**

In general, SDDOE expects reviewers to use their professional judgment in making decisions. However, it is important that decisions are made consistently by reviewers within programs and across programs. This is difficult to do when we are unable to all meet together and share our thoughts, comments, and opinions until we reach consensus. This list of Decision-Making FAQs has been developed to help reviewers, as much as possible, make consistent decisions when their

response is not clear-cut. We hope that you will also use these as discussion points on the Program Reviewer list serve and add others that may come from your reviews.

### **How much data must be presented?**

SDDOE will be expecting 3 years of data for each of the 6-8 assessments. The only reason that reviewers might give institutions some leeway is in those instances in which a program had to make some radical shifts in their assessments because of the limitation to 6 to 8 assessments. Some institutions have reported that they had been developing their program assessments and had been collecting data on up to 20 or 25 assessments. In order to limit that number to 8 they have not had the time to collect data on their new more comprehensive assessments. It is possible that a program has only 1-2 years of data, due to the implementation and visit schedule, and to program adjustments. These situations should be noted in the data provided in the program report.

### **How many of the assessments must be performance-based?**

All of the assessments should be those in which the candidates demonstrate their mastery of the standard and should be appropriate for the standards being addressed. For example, a paper and pencil test can be a good measure of a candidate's knowledge base but it is certainly limited in its capability of demonstrating a candidate's skill level. Most of the assessments should include activities--tasks that are conducted in a classroom, that provide direct measures of classroom performance, or are similar to daily activities a candidate would face in initial employment.

## 7-YEAR TEACHER EDUCATION PROGRAM REVIEW CYCLE

<u>INSTITUTION</u>	<u>VISITS</u>	<u>NEXT VISIT</u>
SGU STATE	Fall 2001 / **Spring 2010	Fall 2016
MTM STATE	Fall 2001 / **Spring 2010	Fall 2016
DWU STATE	Fall 2002 /	**Fall 2011
OLC STATE	Fall 2005 /	Fall 2012
USF STATE/NCATE	Spring 2002 / Spring 2009	Spring 2016
DSU STATE/NCATE	Spring 2002 / Spring 2009	Spring 2016
BHSU STATE/NCATE	Spring 2003 / *Spring 2011	Spring 2018
SDSU STATE/NCATE	+Fall 2004 /	**Fall 2013
USD STATE/NCATE	+Fall 2004 /	**Spring 2013
AUGUSTANA STATE/NCATE	Fall 2005 /	*Fall 2013
NSU STATE/NCATE	Spring 2006 /	*Spring 2014
PRESENTATION STATE		

\* 1 year deferral granted

+ Delay granted

\*\* 1 year deferral and delay granted

## **Checklist of Pre-visit Agenda Items**

30-60 days before on-site review

- (1) Confirm the accuracy of the Notification form information.
- (2) Determine the status of the Institutional Report.
- (3) Discuss status of the program reviews.
- (4) Identify the number of team members.
- (5) Confirm the dates and review the tentative schedule of activities.
- (6) Identify administrators, faculty, staff, and other groups that will be interviewed.
- (7) Identify whether the first afternoon meeting will take place on campus or at the hotel and locate the exhibits accordingly.
- (8) Review expectations for the first afternoon and the evening reception, as well as the meals throughout the visit.
- (9) Identify when the Institutional Report will be sent and what support documents, including directions to hotel and campus, will be forwarded to the team. (Provide a draft, if possible.)
- (10) Discuss the organization of the exhibit room, including work areas, personal computers, documents, hours of availability, and refreshments.
- (11) Discuss the hotel accommodations, including the workroom, personal computers, meals, refreshments, and travel reimbursement.
- (12) Discuss transportation to and from campus.
- (14) Discuss the support personnel who will be available, including student escorts and technical support for equipment in hotel and campus exhibits room.

## **Accreditation Review Timeline**

SDDOE notifies institution two years prior to the review

Institution notifies SDDOE of dates and options

SDDOE provides institutional orientation technical assistance for writing of reports prior to review

SDDOE selects team members for program and on-site review approximately one year prior to review

Institution submits program reports to SDDOE 6-12 months prior to review

SDDOE consultant will conduct pre-visit with institution, 30-60 days prior to review

Program review will be completed 2-3 months prior to on-site review

Institution will be notified before the on-site review of any program deficiencies. The institution will have an opportunity to rejoin to address the deficiencies.

State consultant forwards an electronic draft report to unit reviewers within 30 days following the on-site visit; reviewers return the report with comments, as necessary, within five days.

Upon completion of unit review and no longer than 30 days after the completion of the on-site review, the institution will receive the program report from SDDOE. The institution will then have 30 days to rejoin.

SDDOE consultant recommends approval status to South Dakota Board of Education

Program Approval Letter is forwarded to institution within 30 days of SDBOE approval

**(Sample) SCHEDULE FOR STATE REVIEW TEAM ON-SITE VISIT**

**First Day (Sunday)**

**1:00 pm – 5:00 pm** Orientation and Team Work Session.

- Review documents in exhibit room, identify incomplete or missing data, and outline plans for interviews and collection of comparative data.

**6:30 pm – 8:00 pm** Dinner/Reception (location determined by institution).

**8:00 pm – 10:00 pm** Continue work session at hotel in meeting room.

**Second Day (Monday)**

**7:30 am – 8:00 am** Breakfast (location determined by institution).

**8:00 am – 12:00** Campus

- Continue review of documents and interviews.
- Identify additional documents needed.

**12:00 – 1:00 pm** Working lunch in workroom.

**1:00 pm – 5:00 pm** Continue review of documents and interviews.

**6:00 pm – 7:30 pm** Dinner (location determined by institution).

**8:00 pm – 10:00 pm** Meeting room at hotel.

- Team consensus building on compliance.

**Third Day (Tuesday)**

**7:30 am – 8:00 am** Breakfast (location determined by institution).

**8:00 am – 12:00** Campus

- Visit school sites, attend campus classes and conduct interviews.

**12:00 – 1:00 pm** Working lunch in workroom.

**1:00 pm – 5:00 pm** Finalize collection of data and begin report writing.

**6:00 pm – 7:30 pm** Dinner at hotel workroom.

**8:00 pm – 10:00 pm** Report writing (in meeting room or your room).

**Fourth Day (Wednesday)**

**8:00 am – 11:00 am** State Team Chair prepares for exit interview.

**11:00 am** – Team leaves and Chair presents findings at exit interview.

**INITIAL INFORMATION FORM  
ACCREDITATION REVIEW**

**Institutional Information**

Chief Executive Officer's Name \_\_\_\_\_

Chief Executive Officer's Title \_\_\_\_\_

Institution Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Type of Institution (Public, Private, Tribal) \_\_\_\_\_

Institution is Accredited by:

Name \_\_\_\_\_ Date of Last Visit \_\_\_\_\_

Name \_\_\_\_\_ Date of Last Visit \_\_\_\_\_

**Education Unit Information**

Education Dean's Name \_\_\_\_\_

Review Coordinator's Name \_\_\_\_\_

Number of Programs Offered: Undergraduate \_\_\_\_\_ Graduate \_\_\_\_\_

List three preferred dates for the accreditation on-site review between March 1st and April 30<sup>th</sup>.

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

\_\_\_\_\_  
Signature of Chief Executive Officer

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Education Dean

\_\_\_\_\_  
Date

## Program Reviewer Worksheet

U= Unacceptable

A=Acceptable

T= Target

Program Standards  [Insert Program standards in this column]	A. Do the assessments align with the components of the standard?	B. Do the assessments assess meaningful cog. demands & skill requirements at challenging levels for candidates?	C. Are the assessments accurate and free from bias?	D. Are the scoring guides clear and are the levels of candidate proficiency they describe distinct and appropriate?	E. Do the data as reported indicate the extent to which the candidate meets the standard?	F. Is the standard met?
1 Assessments cited for this standard:	U A T	U A T	U A T	U A T	U A T	Met Not Met
	Comments:					
2 Assessments cited for this standard:	U A T	U A T	U A T	U A T	U A T	Met Not Met
	Comments:					
3 Assessments cited for this standard:	U A T	U A T	U A T	U A T	U A T	Met Not Met
	Comments:					
4 Assessments cited for this standard:	U A T	U A T	U A T	U A T	U A T	Met Not Met
	Comments:					
5 Assessment cited for this standard:	U A T	U A T	U A T	U A T	U A T	Met Not Met
	Comments:					

<b>Program Standards</b>  [Insert Program standards in this column]	<b>A. Do the assessments align with the components of the standard?</b>	<b>B. Do the assessments assess meaningful cog. demands &amp; skill requirements at challenging levels for candidates?</b>	<b>C. Are the assessments accurate and free from bias?</b>	<b>D. Are the scoring guides clear and are the levels of candidate proficiency they describe distinct and appropriate?</b>	<b>E. Do the data as reported indicate the extent to which the candidate meets the standard?</b>	<b>F. Is the standard met?</b>
6 Assessment cited for this standard:	U A T	U A T	U A T	U A T	U A T	Met Not Met
7 Assessment cited for this standard:	U A T	U A T	U A T	U A T	U A T	Met Not Met

Worksheet for Completing Part C of Program Recognition Report

	Which Assessments Provide Data?	What Standards Are Addressed? Are Standards Met?	What Is Institution Response in Section V?	Based on evidence provided in the report, summarize strengths and areas for improvement under each area.
C.1 Content K				
C.2 PK/Ped/S				
C.3 St Learning				

Notes:

Strengths:

Comments for Board of Examiners:

Final Decision:

\_\_\_\_\_ Met

\_\_\_\_\_ Not Met

## Questions and Answers