<table>
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<th>Criteria: Scope of Recognition</th>
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</thead>
<tbody>
<tr>
<td>Description of Criteria</td>
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<tr>
<td>This is the current scope of recognition for your agency which was granted by the Secretary of Education:</td>
</tr>
<tr>
<td>The accreditation and pre-accreditation (&quot;Correspondent&quot; and &quot;Candidate&quot;) of advanced rabbinical and Talmudic schools to include Associate, Baccalaureate, Masters, Doctorate, and First Rabbinic and First Talmudic degrees programs.</td>
</tr>
<tr>
<td>Geographic Area of Accrediting Activities: The United States.</td>
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<tr>
<td>Narrative:</td>
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<tr>
<td>The scope of Recognition of the AARTS Accreditation Commission was expanded to include associate level degrees in 2018.</td>
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**Document(s) for this Section**

No files uploaded

**Analyst Worksheet- Narrative**

**Analyst Review Status:**

Meets the requirements of this section

**Analyst Remarks to Narrative:**

Department staff confirms that AARTS' scope of recognition was expanded to include associate level degrees in 2018.

**List of Document(s) Uploaded by Analyst - Narrative**

No files uploaded

**Analyst Worksheet - Response**

**Analyst Review Status:**

Not Reviewed
Criteria: 602.10(a-b)

Description of Criteria

The agency must demonstrate that—

(a) If the agency accredits institutions of higher education, its accreditation is a required element in enabling at least one of those institutions to establish eligibility to participate in HEA programs. If, pursuant to 34 CFR 600.11(b), an agency accredits one or more institutions that participate in HEA programs and that could designate the agency as its link to HEA programs, the agency satisfies this requirement, even if the institution currently designates another institutional accrediting agency as its Federal link; or

(b) If the agency accredits institutions of higher education or higher education programs, or both, its accreditation is a required element in enabling at least one of those entities to establish eligibility to participate in non-HEA Federal programs.

Narrative:

All of the seventy-one institutions accredited by the AARTS Accreditation Commission, currently participate in Federal Title IV programs. None of our schools possess any other institutional accreditation, so that it is AARTS accreditation alone which enables these schools to establish eligibility to participate in HEA programs.

Documentation:
List of AARTS Accredited Institutions, Handbook pages 110-135 [Exhibit 1]
Sample Page from FISAP Report [Exhibit 6]

<table>
<thead>
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<th>Agency’s Exhibit Comments</th>
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<td>Exhibit 6 - Sample Page from FISAP Report</td>
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Analyst Worksheet- Narrative

**Analyst Review Status:**

Meets the requirements of this section

**Analyst Remarks to Narrative:**
The agency states in its narrative that all 71 of its accredited institutions utilize AARTS accreditation to participate in Title IV, HEA programs. The agency provided a list of its accredited institutions in Exhibit 1. Department staff spot checked several AARTS institutions and confirmed participation in Title IV, HEA programs with the Office of Federal Student Aid (FSA). In addition, the agency provided one example of a Fiscal Operations Report and Application to Participate (FISAP) submitted by an AARTS accredited institution [Exhibit 6]. The FISAP is an FSA form submitted by institutions to apply for Campus-Based Program funding and to report expenditures for the previous award year.

Criteria: 602.11(a-c)

Description of Criteria

The agency must demonstrate that it conducts accrediting activities within—

(a) A State, if the agency is part of a State government;

(b) A region or group of States chosen by the agency in which an agency provides accreditation to a main campus, a branch campus, or an additional location of an institution. An agency whose geographic area includes a State in which a branch campus or additional location is located is not required to also accredit a main campus in that State. An agency whose geographic area includes a State in which only a branch campus or additional location is located is not required to accept an application for accreditation from other institutions in such State; or

(c) The United States.

Narrative:

The AARTS Accreditation Commission accredits institutions within the United States. Currently, our list of accredited institutions includes schools from California, Florida, Illinois, Maryland, Michigan, New Jersey, New York, Ohio, and
Pennsylvania.

Documentation:
List of AARTS Accredited Institutions including Additional Locations [Exhibit 7]

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<td>Exhibit 7 - List of AARTS Accredited Institutions including Additional Locations</td>
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Analyst Worksheet- Narrative

**Analyst Review Status:**
Meets the requirements of this section

**Analyst Remarks to Narrative:**

The agency's list of accredited institutions demonstrates that AARTS is a national accrediting agency and is being recognized pursuant to 602.12(c) [Exhibit 7]. The agency currently accredits 71 institutions throughout the United States in California, Florida, Illinois, Maryland, Michigan, New Jersey, New York, Ohio, and Pennsylvania.

**List of Document(s) Uploaded by Analyst - Narrative**

No files uploaded

**Analyst Worksheet - Response**

**Analyst Review Status:**
Not Reviewed

**Criteria: 602.14(a)**

Description of Criteria

(a) The Secretary recognizes only the following four categories of accrediting agencies:

1. A State agency that—
(i) Has as a principal purpose the accrediting of institutions of higher education, higher education programs, or both; and

(ii) Has been listed by the Secretary as a nationally recognized accrediting agency on or before October 1, 1991.

(2) An accrediting agency that—

(i) Has a voluntary membership of institutions of higher education;

(ii) Has as a principal purpose the accrediting of institutions of higher education and that accreditation is used to provide a link to Federal HEA programs in accordance with §602.10; and

(iii) Satisfies the “separate and independent” requirements in paragraph (b) of this section.

(3) An accrediting agency that—

(i) Has a voluntary membership; and

(ii) Has as its principal purpose the accrediting of institutions of higher education or programs, and the accreditation it offers is used to provide a link to non-HEA Federal programs in accordance with §602.10.

(4) An accrediting agency that, for purposes of determining eligibility for title IV, HEA programs—

(i) (A) Has a voluntary membership of individuals participating in a profession; or

(B) Has as its principal purpose the accrediting of programs within institutions that are accredited by another nationally recognized accrediting agency; and

(ii) Satisfies the “separate and independent” requirements in paragraph (b) of this section or obtains a waiver of those requirements under paragraph (d) of this section.

Narrative:

The Accreditation Commission of the Association of Advanced Rabbinical and Talmudic Schools meets the requirements of 34 C.F.R. § 602.14(a)(2) because it: 1) has a voluntary membership; 2) has as its principal purpose the accreditation of advanced rabbinical and Talmudic schools, which are institutions of higher education;
and 3) satisfies the Department’s “separate and independent requirements” or qualifies for a waiver of such requirements. This accreditation is a required element in enabling AARTS accredited schools to participate in Title IV.

Documentation:
Association Resource, p.36-46 [Exhibit 5]
Articles of Incorporation [Exhibit 8]

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<td>Exhibit 8 - Articles of Incorporation</td>
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Analyst Worksheet- Narrative

**Analyst Review Status:**
Meets the requirements of this section

**Analyst Remarks to Narrative:**

The agency meets the requirements of 34 C.F.R. § 602.14(a)(2) of this criterion. AARTS has a voluntary membership of institutions of higher education and has as a principal purpose, the accrediting of institutions of higher education and that accreditation is a required element in enabling those institutions to participate in HEA programs in accordance with 34 CFR 602.10. [Exhibits 5 and 8]

In addition, the agency has satisfied the criteria's “separate and independent” requirements as outlined in section 602.14(b).

**List of Document(s) Uploaded by Analyst - Narrative**

No files uploaded

**Analyst Worksheet - Response**

**Analyst Review Status:**
Not Reviewed
Criteria: 602.14(b)

Description of Criteria

(b) For purposes of this section, “separate and independent” means that—

1. The members of the agency’s decision-making body, who decide the accreditation or preaccreditation status of institutions or programs, establish the agency’s accreditation policies, or both, are not elected or selected by the board or chief executive officer of any related, associated, or affiliated trade association, professional organization, or membership organization and are not staff of the related, associated, or affiliated trade association, professional organization, or membership organization;

2. At least one member of the agency’s decision-making body is a representative of the public, and at least one-seventh of the body consists of representatives of the public;

3. The agency has established and implemented guidelines for each member of the decision-making body including guidelines on avoiding conflicts of interest in making decisions;

4. The agency’s dues are paid separately from any dues paid to any related, associated, or affiliated trade association or membership organization; and

5. The agency develops and determines its own budget, with no review by or consultation with any other entity or organization.

Narrative:

602.14(b)(1)

Pages 105 and 106 of the Handbook [Exhibit 1] list the Members of the Accreditation Commission and their terms of office. AARTS does not maintain a standing Appeals Body. A new panel is convened only when an appeal is necessary.

The members are elected in accordance with section II (b) of the Handbook [page 5 - Exhibit 1]

(ii) Accreditation Commission members are elected by the membership of the Association for staggered three year terms. The current members of the Accreditation Commission are listed in Section V of this Handbook.

The membership of AARTS is comprised of the AARTS accredited institutions.
Please note that, as discussed in the section of this petition that corresponds to 602.14(d), the Accreditation Commission respectfully requests a waiver of the separate and independent requirements of 602.14(b).

Documentation:
Handbook, p. 5, pp. 105-106 [Exhibit 1]
Resumes of Accreditation Commission Members [Exhibit 9]
The Process Whereby the Background of Commission Members is Examined [Exhibit 10]
Signed Conflict of Interest Form by Member of the Accreditation Commission [Exhibit 11]

602.14(b)(2)

Of the eleven members of the Accreditation Commission, two are representatives of the public, Mr. David Herzog and Mr. Ira Sussman.

Association Resource, page 44, [Exhibit 5] reads:

(i) The Accreditation Commission will consist of eleven elected members. In addition, there is an Advisory tier consisting of formerly elected members who indicate they cannot attend Commission meetings on a regular basis. Members are voted onto the Advisory tier by the Accreditation Commission, to be confirmed by the membership of the Association voting at the next Annual Meeting. Four members will be elected from among the Roshei Yeshiva or senior faculty members of AARTS institutions, four will be of the general academic world with proven credentials of academic excellence as well as familiarity with rabbinic and Talmudic studies and schools, one will be appointed from a governing board of an accredited school, and two people will represent the public-at-large. These public members may be lay people or academicians with broad community contacts and involvement, not affiliated with any member school or with any related trade or membership organization.

Documentation:
Handbook, pp. 105-106 [Exhibit 1]
The Process Whereby the Background of Commission Members is Examined [Exhibit 10]
Association Resource, page 44 [Exhibit 5]

602.14(b)(3)

The Handbook [Exhibit 1], page 44, has two paragraphs which describe the conflict of interest policy established for members of the Accreditation Commission:
In the section entitled "Fair Accreditation Practices" our Handbook reads:

“No conflict of interest will interfere in the rendering of judgments and decisions.”

This statement has served as a guiding principle for the Association from its very founding. Thus members of the Accreditation Commission recuse themselves from all discussions relating to an institution in which there is a possible personal or professional relationship, or with which there is any expectation that such a relationship might develop in the future.

Included as Exhibit 11 is a signed Conflict of Interest Form by a member of our Commission.

The minutes of the Accreditation Commission meeting of September 6, 2020 record the fact that a Commission Member recused himself from discussion and vote [Exhibit 12].

The guidance for members of the Accreditation Commission begins with the Training Program [Association Resource, Exhibit 5].

Documentation:
Handbook, p. 44 [Exhibit 1]
Signed Conflict of Interest Form by Member of Accreditation Commission [Exhibit 11]
Excerpt from Accreditation Commission Meeting Minutes, September 6, 2020 [Exhibit 12]
Association Resource, pp. 6-14 [Exhibit 5]

602.14(b)(4)

The Accreditation Commission’s dues are paid separately from dues paid to the Association of Advanced Rabbinic and Talmudical Schools. Appended as Exhibit 13 is a memorandum and invoice billing schools separately for Association dues, and for Accreditation Commission dues.

This policy is expanded upon in the annual Independent Auditor's Report for the year ending December 31, 2019 [Exhibit 14]

In keeping with the Department of Education's regulations regarding "separate and independent", the Organization at its annual meeting on October 26, 1997 adopted a policy separating the budget of the Accreditation Commission from the Association activities of the Organization and dues charged for each function will be accounted for separately. Accordingly, as of January 1, 1998 it divided its Operating fund into
separate entities reflecting accreditation activities and association costs respectively. Revenues are allocated by formula with 90% earmarked to fund accreditation activities and 10% to fund association costs. Financial statements for periods commencing after December 31, 1997 reflect this allocation of funds.

In passing we might note that the joint use of resources does not compromise the independence and confidentiality of the accreditation process. On page 61 of the Handbook [Exhibit 1] one reads:

The Accreditation Commission will secure accreditation documents; these will not be made available to the Association.

As noted in the bylaws of the organization, the Accreditation Commission will operate with complete autonomy; in particular the Association has no input into the accrediting process.

Documentation:
Memorandum and Invoice for Accreditation Commission and Association [Exhibit 13]
Certified Audit for year ending December 31, 2019, (note on page 7) [Exhibit 14]
Handbook, p. 61 [Exhibit 1]

602.14(b)(5)

Section II(b)(iv) of the Handbook [Exhibit 1], pp. 5 reads:

(iv) The budget of the Accreditation Commission is developed and determined without review by any other entity and its dues are paid separately from any dues paid to the Association.

Appended as Exhibit 15 is the Accreditation Commission budget for 2020-2021.

A proposed budget is prepared by staff and presented to the Accreditation Commission for consideration, Exhibit 16 records the action taken on March 21, 2021.

Documentation:
Handbook, pages 5 [Exhibit 1]
Budget of the Accreditation Commission 2020-21 [Exhibit 15]
Excerpt from Accreditation Commission Meeting Minutes, March 21, 2021 [Exhibit 16]
The agency’s bylaws state the association shall set up an independent Accreditation Commission to accredit advanced rabbinical and Talmudic schools. The bylaws give the Commission the authority to establish its own standards, policies, and procedures [Exhibit 5, page 43-44]. Section II(b) of the agency’s Handbook states the members of the AARTS Accreditation Commission are elected by the agency’s membership.
Therefore, members of the Commission are not elected or selected by the board or chief executive officer of any related, associated, or affiliated trade association or membership organization. In addition, the Handbook specifically empowers the Commissioners to develop and determine the budget without review by any other entity and specifies that Commission dues are paid separately from any dues paid to the association. This information is verified in the agency’s audited financial statements [Exhibit 14]. The agency also submitted meeting minutes from its March 2021 meeting demonstrating the Commission approves its own budget [Exhibit 16]. Further, the bylaws state the qualifications, terms of office and composition, including that at least 1/7 be representatives of the public. Public representation will be further discussed in the applicable sections throughout section 602.15. The Handbook also describes the agency’s conflict of interest policy, which will be discussed in section 602.15(a)(6) [Exhibit 1, page 44].

Department staff reviewed additional documentation demonstrating the agency meets the separate and independent requirements of this section at the on-site file review conducted July 2022. Specifically, staff reviewed the agency’s approved budgets for 2019-2020 and meeting minutes documenting when each budget was approved and which Commissioners were present and voted for approval. Further, the agency provided minutes from its June 2021 meeting demonstrating the nominations and election by the Commission of two new members who are the only new members added during the recognition period. The agency stated during the file review that there have been no instances where a school has filed a complaint or voiced concerns over conflict of interest of any kind.

List of Document(s) Uploaded by Analyst - Narrative

No files uploaded

Analyst Worksheet - Response

Analyst Review Status:

Not Reviewed

Criteria: 602.14(c)

Description of Criteria

(c) The Secretary considers that any joint use of personnel, services, equipment, or facilities
by an agency and a related, associated, or affiliated trade association or membership organization does not violate the “separate and independent” requirements in paragraph (b) of this section if —

(1) The agency pays the fair market value for its proportionate share of the joint use; and

(2) The joint use does not compromise the independence and confidentiality of the accreditation process.

Narrative:

All fees collected and expenditures by the Accreditation Commission are made subject to the guidance of our Independent Auditor to ensure that we remain in compliance with the “separate and independent” requirements. A letter to this effect is appended.

The Accreditation Commission operates completely independent of the Association.

In passing we might note that the joint use of resources does not compromise the independence and confidentiality of the accreditation process. On page 61 of the Handbook [Exhibit 1] one reads:

The Accreditation Commission will secure accreditation documents; these will not be made available to the Association.

As noted in the bylaws of the organization, the Accreditation Commission will operate with complete autonomy; in particular the Association has no input into the accrediting process.

Documentation
Handbook, p. 61 [Exhibit 1]
Letter from CPA [Exhibit 17]
The latest available financial audit for the year ending December 2019 indicates 90% of funds are allocated to the Accreditation Commission’s activities with the remaining 10% allocated to the rabbinical schools’ membership activities [Exhibit 15 in section 602.14(b)]. Although the Commission shares facilities and equipment with the Association, the Certified Public Accounting firm that audits AARTS attested the Commission paid fair market value for all facilities and equipment shared with the Association [Exhibit 17]. Although this letter dates from 2016, the most recent financial audits demonstrate the Commission pays its calculated proportionate share of 90% for the joint use, and there is no evidence to suggest that the joint use has compromised the agency's independence, or the integrity of the accreditation process. Department staff reviewed copies of the two most recent audited financial statements of the agency (2019 and 2020) during the on-site file review conducted during July 2022. The statements demonstrate that the accounting for the Commission and the Association are separate and that the Commission pays for its fair share of resources.
activities in light of its requested scope of recognition. The agency meets this requirement if the agency demonstrates that—

(a) The agency has—

(1) Adequate administrative staff and financial resources to carry out its accrediting responsibilities;

Narrative:

The professional staff of the Accreditation Commission is headed by Dr. Bernard Fryshman who now serves as Interim Director. In 2013 Dr. Fryshman completed forty years as head of this nationally recognized accrediting body at which point Professor Keith Sharfman (Professor of Law, St. Johns University) spent two full years as Associate Director under Dr. Fryshman and assumed the role of Executive Director in 2013. Dr. Fryshman continued to work for the organization as Associate to Professor Sharfman.

Towards the end of the first year as Executive Director of the Accreditation Commission, Professor Sharfman received an advancement in his role as Professor of Law at St. John’s University and could no longer devote sufficient time to the organization. Dr. Fryshman, Emeritus Executive Vice-President of AARTS, then stepped in as Interim Director in September 2015.

An intense search for a candidate to assume the responsibility of the organization took place and a candidate was identified to work with Dr. Fryshman. The expected transition did not take place and in December 2020, Mr. Zev Dunner was engaged as Associate Director. As seen in the enclosed Resume, Mr. Dunner comes with extensive organizational leadership experience.

The Association of Advanced Rabbinical and Talmudic Schools is well run. Dr. Fryshman with over five decades experience teaching physics at the university level and having served two terms on the National Advisory Committee on Accreditation and Institutional Eligibility (the predecessor to NACIQI), has a broad knowledge of accreditation and higher education in general, as well as the organizational expertise to guide the organization during this transition period.

Dr. Sheldon Epstein, Professor of Computing and Decision Sciences at Seton Hall University, has been serving as Associate Director since August 2011. Dr. Epstein has full responsibility for training, for due process and appeals and for the analysis of quantitative assessment measures submitted by AARTS accredited schools. Dr. Epstein has served as facilitator on several site visits and also serves as a resource person with broad knowledge and understanding of the workings of the institution.
Rabbi Zev Dunner, serves as the Associate Director, since December 2020.

Kayla Oppenheimer, serves as Office Manager and Secretary, and brings to bear extensive background and organizational skills as per her enclosed resume. Mrs. Oppenheimer sees to the effective functioning of the office and coordinates the monitoring function of the organization, as well as following up to ensure satisfactory compliance with the recommendations made in the visiting team reports. She also reviews continuation of recognition applications prior to formal approval by the Accreditation Commission.

Gitty Rosenbaum, Secretary and Special Assistant to the Executive Director, has assumed all responsibility for the preparation and movement of documents, reports and actions centered around the site visit and is directly involved in the preparation of all AARTS documents including this petition.

Chasi Silverman, Secretary and Bookkeeper, brings to her role a B.S. in Business/Finance. Ms. Silverman coordinates the preparation of site visits and is involved in the organization’s bookkeeping functions.

David Singer, CPA, serves as Consultant Acting as Chief Financial Officer to the organization and examines financial statements submitted by schools.

Rabbi Yosef Gavriel Bechhofer, Monitoring Review Specialist, qualifications as per his resume.

Rabbi Shmuel Gut, Monitoring Review Specialist, qualifications as per his resume.

The Association of Advanced Rabbinical and Talmudic Schools is relatively small. Of our seventy-one institutions, about fifty are in the New York Metropolitan area and with the exception of a few larger institutions, our schools are small: thirty three enroll less than 100 students and twenty three between 100 and 200 students. Each institution offers a program centered around the Talmudic and cognate studies. The burden of administering our Association is greatly simplified as a result of the size, the similar programs, and the geographic concentration of our institutions. Staff is sufficient for the needs of the organization, with the now extensive use of electronic means of communication, data gathering, transcription, oversight and recordkeeping. Much of this change came about as a result of the adaptations we had to make because of Covid-19. We discovered we can accomplish far more using modern, internet-based technology. We are looking for additional staff, but only in anticipation of future growth. And we are prepared to have staff members work from home.

This bears emphasizing.
The period from March 17, 2020 until May 30, 2021, was instructive in a number of ways. We found that our office procedures are very well organized and that virtual interaction was very effective in keeping the accreditation process functioning. We concluded that effective virtual meetings including conversations, debate and deliberation are possible and a successful petition for renewal by CHEA was carried out completely in this time.

The combination of staff virtual interaction combined with face-to-face work has provided us with a flexibility and effectiveness we did not have before.

One outcome has been a proposal to move our offices from Manhattan to two separate locations, one in Brooklyn and on in Lakewood to provide greater access and proximity to most of our schools without any loss of effectiveness to staff.

With respect to financial resources, some perspective is in order. By design, we have never sought financial support from outside foundations, from related organizations, or from government. This policy preserves the sense of independence and fiscal integrity consistent with the institutions we serve. This, of course, places the entire burden of supporting the organization on our member institutions, and there is an attempt by the organization to set membership dues and fees at a level as close as possible to actual budgetary needs. Changing staff needs and other expenditures have resulted in a significant positive cash balance.

All members of staff are furnished with the Handbook and other documents which include AARTS standards, policies and procedures. With respect to training Dr. Fryshman had each of Rabbi Bechhofer and Rabbi Gut accompanying him on monitoring visits after they had been furnished with copies of all the documents published by AARTS, in particular with the visitation protocols.

There have been no instances of postponements due to insufficient staffing going back to the time we prepared our first petition in 1973.

Just in passing, we would proudly point out that in our almost 48 years of operation, we have never missed a deadline to the Department, nor have we been delinquent in any other responsibility.

Documentation:
Resume, Dr. Bernard Fryshman [Exhibit 18]
Resume, Rabbi Zev Dunner [Exhibit 19]
Resume, Dr. Sheldon Epstein [Exhibit 20]
Resume, Kayla Oppenheimer [Exhibit 21]
Resume, Gitty Rosenbaum [Exhibit 22]
Resume, Chasi Silverman [Exhibit 23]
Resume, Rabbi Yosef Gavriel Bechhofer [Exhibit 24]
Resume, Rabbi Shmuel Gut [Exhibit 25]
Budget of the Accreditation Commission 2020-21 [Exhibit 15]
Budget of the Accreditation Commission 2019-20 [Exhibit 26]
Certified Audit for year ending December 31, 2019 [Exhibit 14]
Certified Audit for year ending December 31, 2018 [Exhibit 27]
Organizational Chart and Key [Exhibit 28]
Staff Recusal [Exhibit 29]

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Analyst Worksheet- Narrative

**Analyst Review Status:**

Does not meet the requirements of this section

**Staff Determination:**

The agency must submit further narrative and supporting documentation demonstrating how agency staff are initially and continuously trained on their roles and responsibilities, including proof training was delivered during the current recognition period, as applicable. In addition, the agency must provide its 2021 audited financial report and most recently adopted budget in its response to the draft staff analysis.

**Analyst Remarks to Narrative:**

**Staffing:**

AARTS accrediting activities are supported by an executive director, 2 associate directors, an office manager, Chief Financial Officer, 2 secretaries, and 2 monitoring review specialists. The agency has a clear organizational structure [Exhibit 28] and described the responsibilities of agency staff in its narrative. In addition, the agency submitted the resumes for all agency staff members [Exhibits 18-25]. The resumes demonstrate agency staff are qualified for their roles. The agency is adequately staffed for its size and the Department has not received any complaints related to administrative capacity during this review period. The agency notes in its narrative that no decisions were postponed due to insufficient administrative or fiscal capacity. The agency did not provide narrative or supporting documentation describing how agency staff are initially and continuously trained on their roles and responsibilities or proof that training was delivered during the current recognition period.
During the on-site file review conducted during July 2022 the agency restated that there were no letters received from institutions expressing concern regarding the timeliness of agency actions and decisions and its ability to adhere to its published timelines. Further, the Department has not received any complaints from AARTS accredited institutions indicating concern about timeliness.

Financial Resources:

AARTS notes it has never sought financial support from outside foundations, from related organizations, or from government. The agency states this policy preserves independence and fiscal integrity consistent with the institutions it serves. AARTS sets membership dues and fees at a level as close as possible to actual budgetary needs. The agency’s three primary revenue streams include site visit, membership, and user fees. These fees are reflected in the agency’s budget for the two most recent fiscal years [Exhibits 15 and 16]. The agency also provided an audited financial statement for 2018 and 2019. Department staff notes that the budgets and financial audits submitted in the petition indicate that agency expense have outpaced revenues over the last two years. However, the financial statement demonstrates sufficient net assets and unrestricted assets that ensure the agency’s ability to conduct all its accrediting activities. For the on-site file review conducted during July 2022 Department staff reviewed the agency’s budgets for 2020-2022 and its most recent audited financial statement for 2020. The budgets indicate that expenses slightly outpace revenue; however, as noted above, the financial statements continue to demonstrate that the agency has sufficient assets to ensure it can conduct all its accrediting activities.

List of Document(s) Uploaded by Analyst - Narrative

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Response:

Senior Staff

Senior staff at the level of Director and Associate Director are hired on the basis of their records as administrators and their understanding of higher education in general, and accreditation in particular, acquired elsewhere. Ample time is granted them to familiarize themselves with AARTS published material to ensure that they have a
thorough knowledge of AARTS standards, practices and procedures.

At this point Senior Staff will work with colleagues at the senior level to participate continuously in executing daily responsibilities. With time they are given specific tasks (such as organizing and implementing a site visit), continuously monitored with sufficient written and oral follow up to ensure that the task is a learning experience as well.

There is no formal curriculum for the process which entails a great deal of judgmental and decision making qualifications. Performance over a period of two years determines suitability or not.

Support Staff

We have always viewed the roles of individuals with decision making responsibilities as inherently and significantly different from the role of those with administrative responsibilities such as organizing, facilitating and implementing decisions made by others.

Agency staff with service and secretarial responsibilities are hired on the basis of their computer, secretarial, and office skills. Some of the responsibilities they encounter such as preparing the logistics of a meeting, ensuring that a course description fits an established template or arranging the schedule for monitoring visits are carried out under the supervision of Senior Staff which, again, serves as both a learning and evaluative opportunity.

At this level, on the job training is an absolute necessary component given the wide diversity and sometimes unexpected nature of tasks facing staff. As time goes on staff at this level are given responsibilities of increasing complexities, always with careful oversight and guidance.
During the most recent period of recognition there have been two attempts to engage a potential replacement for the current Executive Director. This did not turn out to be successful and a current search is underway for a suitable Executive.

One staff member who joined AARTS in 2013 was found to have excellent computer and secretarial skills. She was asked to read the agenda and minutes of several years worth of Accreditation Commission meetings as well as the Handbook of the Accreditation Commission. Subsequently she was asked to record issues as they came to the attention of staff and to categorize them into the appropriate areas of the Commission’s attention. There was subsequent discussion, item by item, with the Executive Director. By the end of a year this staff member was capable of preparing an agenda for a formal Accreditation Commission meeting.

The same kind of process takes place in developing decision making expertise. This staff member was asked to review a number of acceptable Self Study reports. Shortly afterwards she reviewed on her own a newly arrived Self Study report for comprehensiveness and to determine whether it is responsive to the Standards of the Association. She discusses her observations and conclusions with the Executive Director on an item by item basis. After several such cases she proved capable of making a decision on her own.

Because we are so small the training program displays some elements of an apprenticeship and, at the same time, helps senior staff determine whether the candidate has the intellectual capacity and requisite skills to fill the position.

Service in an accreditation agency cannot always follow a fixed curriculum. While there are commonalities between one school’s application and another, and the steps taken from application to final decision follow a fixed pattern, the essence of accreditation both in terms of office and administrative functions as well as decision making varies significantly from school to school, beginning with the Mission statement.

For this purpose experience is by far the most effective determinant of success and therefore has to serve as the fundamental element of a training program.
Budget

Over the past several years AARTS has incurred additional expense as a result of the transition period in which long term Executive Director Dr. Bernard Fryshman is preparing to hand over leadership of the organization. This special circumstance and associated additional expense is precisely why we maintain significant net assets for the foreseeable future. Nonetheless the membership, acting of the Annual Meeting of February 19, 2023, confirmed an increase of 30% of all fees.

Exhibit:

Exhibit 65: Training Sessions

**Analyst Worksheet - Response**

**Analyst Review Status:**

Meets the requirements of this section

**Analyst Remarks to Response**

In response to the draft analysis the agency submitted its fiscal year end 2021 audited financial statements and its 2023 budget. The FYE 2021 audited financial statements continue to show declining net assets because expenses outpace revenue; however, the agency appears to have sufficient net assets on hand [Exhibit 44]. In addition, the agency's 2023 budget shows it increased membership fees 30% bringing its revenue more inline with its expenses [Exhibit 45].

The agency also provided additional information regarding staff training. Specifically, the agency states it has no formal training curriculum for staff. Rather, due to its small size, the agency relies heavily on hands-on training and mentorship of its staff involved in accrediting activities, which occurs periodically throughout the recognition period. All members of staff are furnished with the Handbook and other documents which include AARTS standards, policies and procedures. Senior and support staff receive constant guidance from the Executive Director and are given increasing levels of responsibility based on performance and feedback from the Executive Director. Department staff notes the agency provided a list of trainings;
however, it appears to be for site visit teams rather than staff. [Exhibit 1].

List of Document(s) Uploaded by Analyst - Response

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Criteria: 602.15(a)(2)

Description of Criteria

(2) Competent and knowledgeable individuals, qualified by education or experience in their own right and trained by the agency on their responsibilities, as appropriate for their roles, regarding the agency's standards, policies, and procedures, to conduct its on-site evaluations, apply or establish its policies, and make its accrediting and preaccrediting decisions, including, if applicable to the agency's scope, their responsibilities regarding distance education and correspondence courses;

Narrative:

The enclosed list of Academicians [Exhibit 30] who have served as site visitors and Accreditation Commission members testifies to the "competent and knowledgeable individuals, qualified by education and experience" of our people.

The Commission has a structured training program [Association Resource, pp. 6-14, Exhibit 5] which builds on the background of our site visitors and Accreditation Commission members.

The discussion with respect to 602.14(b)(3) and Exhibit 32 describes how our training program has been implemented; note that all training is completed before the individual assumes his duties.

Documentation:
Academician Site Visitors [Exhibit 30]
Roster of Site Visitors in the Past Year with Specific Focus [Exhibit 31]
Association Resource, pp. 6-14 [Exhibit 5]
Implementation of Training Program [Exhibit 32]
Handbook, pp. 105-106 [Exhibit 1]
### Analyst Worksheet- Narrative

**Analyst Review Status:**

Meets the requirements of this section

**Analyst Remarks to Narrative:**

Accreditation Commission:

The Accreditation Commission’s roles and responsibilities are described in section II(b) of the agency’s Handbook [Exhibit 1, page 5]. The Commission consists of 11 members including: four Roshei Yeshiva (senior faculty); four general academics with established credentials as well as familiarity with rabbinic and Talmudic studies and institutions; one member from an AARTS accredited institution’s governing board; and two public members. The Commission serves as the agency’s decision and policy making body. The agency lists the names of current Commissioners in its Handbook along with their current position and employer [Exhibit 1, page 105]. Section II(b)(viii) of the Handbook states that Commissioners receive ongoing training as appropriate for their roles. The agency’s training program is described in detail in the Association Resource [Exhibit 5, page 6]. New Commissioners receive a copy of the AARTS Handbook, Site Visitors Manual, and the Accreditation Manual, which they review at their own pace. Further training consists of an intensive one-on-one session with senior agency staff to cover the roles and responsibilities of the Commission, including in-depth discussion of the agency’s Standards, major policy decisions, votes, and minutes of past meetings. The agency notes that the

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Accreditation Commission has remained stable over the years and has added only two new members during the recognition period. The agency provided documentation that the two new members were trained in 2021 [Exhibit 32].

Department staff reviewed resumes for all current Commissioners during the on-site file review conducted July 2022. The resumes demonstrate all Commissioners appear qualified for their roles.

Site Visitors:

Evaluators are chosen according to the special nature of rabbinical and Talmudic institutions. All site visit teams have a minimum of three individuals including: one Rosh HaYeshiva, one general academic of the associate or full professorial rank at a regionally accredited institution, and one individual who holds senior administrative responsibility at an accredited institution. The agency provided a roster of site team evaluators who conducted site visits in the past year. The roster includes the mix of individuals as described in the Handbook along with their specific roles [Exhibit 31]. Site visitors are trained on their responsibilities, as appropriate for their roles, regarding the Association’s standards, policies, and procedures. In addition to the expectation that all site visitors review the agency’s Handbook, Site Visitors Manual, and the Accreditation Manual, site visitors receive an additional two trainings. Site visitors receive an intensive one-on-one training with senior AARTS staff who cover in depth the each of the agency’s 12 standards with special emphasis placed on those standards reviewed by each member of the site visit team specific to his role. The final training occurs just prior to and during the site visit. The chair of the team and the AARTS staff member assigned to the site team are available to answer any questions the team has based on their review of the institution’s self-study. The agency keeps records of those who attended the training and provided a sample of training records in Exhibit 32. Department staff reviewed resumes for all site visitors who participated in a site visit during the past two years at the on-site file review conducted July 2022. Each site visitor appears qualified for their role. In addition, Department staff reviewed updated training information during the file review to include recent trainings conducted during 2021 and 2022, including records of who attended each training and the method by which the training was conducted.
Department staff observed an AARTS on-site evaluation team and found them to be competently led by the Chair, conscientious in their duties, informed as to the agency’s expectations, prepared and trained.

Appeal Panel:

The AARTS creates a special Appeals Board of three persons to hear appeals on an as-needed basis. Each Appeals Board consists of an academic, a Rosh Yeshiva (senior faculty), an administrator, a public member, and an additional member chosen from any of the same categories [Exhibit 1, page 53]. Training of the Appeals Board is the same given to Accreditation Commission members discussed above [Exhibit 5, page 11].

The agency notes in section 602.25(f) that the most recent appeal occurred in 2015-16, which is outside the current recognition period and therefore no recent training records exist.

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 Analyst Worksheet - Response

Analyst Review Status:
Not Reviewed

Criteria: 602.15(a)(3)

Description of Criteria

(3) Academic and administrative personnel on its evaluation, policy, and decision-making bodies, if the agency accredits institutions;

Narrative:

Section III (j) of the Handbook [Exhibit 1], (p.40), describes the composition of the site visiting team.
The Accreditation Commission’s visiting teams are chosen with the special nature of rabbinical and Talmudic schools in mind. Every team consists of at least three members, of which one must be a Rosh HaYeshiva or senior faculty member of a rabbinical/Talmudic school and another from the general academic world. The faculty member from the general academic world implies a faculty member of associate or full professorial rank at a regionally accredited institution, preferably with knowledge and an understanding of advanced rabbinical and Talmudic education.

The Commission must also designate as a member of the visiting team, an individual with senior administrative responsibility at an accredited school.

The Accreditation Commission, the policy and decision making body, has also been carefully structured:

(i) The Accreditation Commission consists of eleven members. Four members are elected from among the Roshei Yeshiva or senior faculty members of AARTS institutions, four are of the general academic world, with established academic credentials as well as familiarity with rabbinic and Talmudic studies and schools, one is elected from a governing board of an accredited school, and two people represent the public-at-large.

(Handbook [Exhibit 1], p.5)

In the Handbook, too, on p.21, the role of the Rosh HaYeshiva is described:

The Rosh HaYeshiva fills a role unique in higher education. Chosen primarily for his scholarship, he sets the intellectual tone of the organization. The Rosh HaYeshiva often provides leadership for the administration as well as for the faculty and students.

Since there are four Roshei Yeshiva on the Accreditation Commission, there is always at least one person who satisfies the "Administrator" criterion. The list of members of the Accreditation Commission is on pages 105-106 of the Handbook [Exhibit 1]. Rabbi Boruch Horowitz, head of the Rabbinical College Bobover Yeshiva Bnei Zion, currently satisfies this requirement. Dr. Yedidyah Langsam, is Chairman of the Department of Computer and Information Science at Brooklyn College and thereby also satisfies the administrator responsibility on the Commission.


Documentation:
Handbook, pp. 5, 21, 40, 53, 105-106 [Exhibit 1]
Analyst Worksheet- Narrative

**Analyst Review Status:**
Meets the requirements of this section

**Analyst Remarks to Narrative:**

AARTS is an institutional accreditor and therefore must include academic and administrative personnel on its evaluation, policy, and decision-making bodies.

Accreditation Commission:

Section II(b) of the agency’s Handbook sets forth the composition requirements for the Commission. Specifically, the Handbook states that the Accreditation Commission consists of 11 members. Four members are Roshei Yeshiva (senior faculty), four are academics, one is from the governing board of an accredited institution and two represent the public at-large. The agency notes in its narrative that the Rosh HaYeshiva provides leadership for the administration, faculty, and students and is chosen for his scholarship. The Rosh HaYeshiva sets the intellectual tone for the organization. The agency states that since there are four Rosh Yeshiva on the Commission there is at least always one person serving in the role of administrator. The agency provided a list of current Commissioners and states that Rabbi Horowitz and Dr. Langsam satisfy the administrator responsibility on the Commission. Department staff confirmed the agency includes academics and administrators on its Commission through a review of the Commissioner’s resumes at the on-site file review conducted during July 2022.

Site Visitors:
Section III(j) of the agency’s Handbook states that site teams consist of at least 3 members to include a Rosh HaYeshiva or senior faculty member of a rabbinical/Talmudic institution and another from the general academic world. The Handbook also requires that site visit teams designate an individual with senior administrative responsibility at an accredited institution [Exhibit 1, page 40]. The agency provided a roster of site team visitors used during the previous year demonstrating it utilizes academics and administrators on its site visit teams as required by this criterion. [Exhibit 31, Section 602.15(a)(2)]. In addition, Department staff reviewed resumes for all site visitors who participated on a site visit team over the past two years as well as specific site team rosters for institutions selected by the Department during the on-site file review conducted during July 2022. The documentation demonstrates the agency includes at least one qualified academic and one qualified administrator on each site visit team.

Department staff observed an on-site review of an institution undergoing reaccreditation and confirmed the team was composed of both academics and administrators.

Appeals Board:

Section II of the agency’s Handbook states that an Appeals Board must be comprised of a Rosh Yeshiva, an academician, an administrator and a member of the public and an additional member from any one of the same categories [Exhibit 1, page 53]. As previously noted, the agency has not had an appeal during the current recognition period.

### List of Document(s) Uploaded by Analyst - Narrative

No files uploaded

### Analyst Worksheet - Response

#### Analyst Review Status:

Not Reviewed

### Criteria: 602.15(a)(5)

Description of Criteria
Representatives of the public, which may include students, on all decision-making bodies; and

Narrative:

Two of the eleven members of the Accreditation Commission serve as representatives of the public. The Association's definition of public members is on page 5 of the Handbook [Exhibit 1].

These public members may be lay people or academicians with broad community contacts and involvement, not affiliated with any member school nor with any related trade or membership organization. Note that a public member cannot be

1. An employee, member of the governing board, owner, or shareholder of, or consultant to, an institution or program that either is accredited or preaccredited by the AARTS Accreditation Commission or has applied for accreditation or preaccreditation.

2. A member of any trade association or membership organization related to, affiliated with, or associated with the AARTS Accreditation Commission; or

3. A spouse, parent, child or sibling of an individual identified in paragraph (1) or (2) of this definition.

Public Members will be asked to sign a declaration confirming that they meet the above criteria and to inform the Commission at once, should their status change.

A signed declaration is enclosed as [Exhibit 33].

Appeals Boards are also decision making bodies, and the relevant language of the Handbook [Exhibit 1], p.53 is clear:

(d) An Appeals Board must be comprised of a Rosh Yeshiva, an academician, an administrator, a member of the public, and one other member from any of the categories above.

Documentation:
Handbook, p. 5, p. 53 [Exhibit 1]
Public Member Declaration, [Exhibit 33]
Public Members of the Accreditation Commission, Handbook pp. 105-106 [Exhibit 1]
The agency's Handbook requires two public members on the AARTS Accreditation Commission, which is the agency's primary decision-making body and consists of 11 members. In addition, the agency's written policies clearly require that a public member be among the three members of any Appeals Board, which is selected on an as-needed basis to hear an institution's appeal [Exhibit 1 pages 5 and 6]. The agency’s definition and selection process of a public representative meet the requirements of this section. AARTS provided signed forms for its public members declaring they meet the public member requirements [Exhibits 33 and 33a].

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**Analyst Worksheet - Response**

**Analyst Review Status:**

Not Reviewed

**Criteria: 602.15(a)(6)**

Description of Criteria

(6) Clear and effective controls, including guidelines, to prevent or resolve conflicts of interest, or the appearance of conflicts of interest, by the agency's—

(i) Board members;
(ii) Commissioners;

(iii) Evaluation team members;

(iv) Consultants;

(v) Administrative staff; and

(vi) Other agency representatives; and

Narrative:

The AARTS Conflict of Interest Policy is spelled out in complete detail on page 48 of the Handbook [Exhibit 1].

Documentation:
Handbook, p. 48 [Exhibit 1]
Signed Conflict of Interest Form by Member of Accreditation Commission [Exhibit 11]
Excerpt from Accreditation Commission Meeting Minutes, September 6, 2020 [Exhibit 12]
Staff Recusal [Exhibit 29]
Sample Conflict of Interest Forms [Exhibit 34]

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Analyst Worksheet- Narrative

**Analyst Review Status:**

Does not meet the requirements of this section

**Staff Determination:**

The agency must demonstrate it consistently follows its own policies on recusals related to conflict-of-interest. Specifically, the agency must demonstrate that individuals who recuse themselves during a Commission meeting remove themselves from the room and do not participate in discussion.

**Analyst Remarks to Narrative:**

AARTS Handbook sets forth the agency’s policies/processes for clear and effective controls, including guidelines, to prevent or resolve conflicts of interest, or the appearance of conflicts of interest for all the individuals covered by this criterion [Exhibit 1, page 48]. Guidance from AART’s counsel states that once a conflict of interest is determined then the affected individual must recuse himself from the matter. The recusal extends to removing oneself from discussion as well as any vote, preferably by leaving the place where the discussion is taking place. In addition, all members of AARTS covered by this criterion must sign a conflict-of-interest statement.

AARTS provided sample recusals by staff and a Commissioner [Exhibits 12 and 29]. The agency also provided blank copies of its conflict-of-interest forms for the individuals covered by this criterion. In addition, the agency provided one copy of a signed conflict-of-interest form for site visitors; however, the name of the individual was redacted.

As noted in section 602.15(a)(2), the individuals covered by this criterion receive intensive one-on-one training on the agency’s standards, policies, and procedures, including conflict-of-interest and the agency provided documentation demonstrating it tracks attendance in the petition and as part of the on-site file review conducted July 2022.

Nevertheless, Department staff observed a virtual Commission meeting on June 12, 2022. The Executive Director of AARTS self-reported a conflict-of-interest for one
institution up for review by the Commission. Although the Executive Director excused himself from the discussion he remained on the call and joined the conversation when Commissioners raised concerns about fire safety at the institution. Therefore, the agency was not following its own policies on conflict-of-interest as described above.

Lastly, for the on-site file review conducted during July 2022, the agency provided signed conflict-of-interest forms for all individuals covered by this criterion.

List of Document(s) Uploaded by Analyst - Narrative

No files uploaded

Response:

In a demonstration of excess caution Dr. Fryshman recused himself during discussion of a school whose affiliate high school enrolled two of his grandchildren. There was no need for him to recuse himself according to any rational conflict of interest policy since he has no vote in the decision making process. He did so to eliminate any possible appearance of a conflict of interest.

When a factual question arose he provided necessary information but did not in any way participate in the decision making or in the deliberations.

Although there was no demonstrable conflict of interest here, and AARTS policy has been to follow its attorney’s guidance that recusal is ‘highly preferable,’ AARTS regulations have been rewritten to clarify recusal as meaning ‘it is necessary that the conflicted person will absent himself from the place where the discussion is taking place and only return upon the completion of the pending action.’

In our Handbook, page 48, we added a clarification after the word ‘preferable’ to read:

Clarification: Recusal will mean that it is necessary that the conflicted person will absent himself from the place where the discussion is taking place and only return upon the completion of the pending action.
Exhibit:

Exhibit 64: Updated Handbook, Page 48

**Analyst Worksheet - Response**

**Analyst Review Status:**

Substantially Compliant

**Staff Determination:**

The agency is substantially compliant with this section. The agency must submit a monitoring report within 12 months demonstrating that it adheres to its revised conflict of interest policy, including that any person who recuses himself leaves the room during the discussion of the institution under review.

**Analyst Remarks to Response**

In response to the draft analysis the agency provided additional information and documentation regarding how it adheres to its own conflict of interest policies. Specific to the example discussed in the draft analysis regarding the observation by Department staff that the Executive Director failed to remove himself from the discussion of an institution after identifying a conflict of interest, the agency states there was not an actual demonstrable conflict of interest because the Executive Director is not a Commissioner and has no vote on the institution's accreditation status. The agency states that the Executive Director declared a conflict of interest out of an abundance of caution and only participated in discussion on fact based matters related to fire safety. Department staff believes that the Executive Director's reason for recusal was correct because there was a demonstrable conflict of interest. The Executive Director's own family attend the school under review by the Commission and their education could be affected by the Commission's actions. Further, although the Executive Director does not vote on an institution's accreditation, his discussion may influence how Commissioners vote. Department staff notes that the agency's conflict of interest policy states “Such recusal extends beyond refraining from exercising a vote; it includes exclusion from involvement in the discussion leading up to the taking of an action.”

In addition, the agency notes that its Handbook contains guidance on conflict of interest from legal counsel that states “it is highly preferable that the conflicted person
absent himself from the place where the discussion is taking place, and only return upon the completion of the pending action.” Although it is not expressly stated in the agency's response it appears the agency claims the language “highly preferable” provides leeway on whether or not an individual must physically leave the discussion.

To that end, the agency states it has added clarifying language to its handbook that now states “preferable” means: "Recusal will mean that it is necessary that the conflicted person will absent himself from the place where the discussion is taking place and only return upon the completion of the pending action. This clarifying language strengthens the agency's conflict of interest policy by making it clear any person covered by its conflict of interest policy who declares a conflict of interest must leave the discuss until the completion of the pending action. A person absent from the discussion also cannot participate in the discussion, which would prevent further instances of the type described in the draft analysis and discussed again in this final analysis where someone recuses themselves, but still participates in the discussion.

List of Document(s) Uploaded by Analyst - Response

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Criteria: 602.15(b)

Description of Criteria

(b) The agency maintains complete and accurate records of—

(1) Its last full accreditation or preaccreditation review of each institution or program, including on-site evaluation team reports, the institution's or program's responses to onsite reports, periodic review reports, any reports of special reviews conducted by the agency between regular reviews, and a copy of the institution's or program's most recent self-study; and

(2) All decision letters issued by the agency regarding the accreditation and preaccreditation of any institution or program and any substantive changes.

Narrative:

The Handbook (page 69), [Exhibit 1] of the Accreditation Commission reads:

The Accreditation Commission maintains complete and accurate records of the last full accreditation/preaccreditation review of each institution, including visiting team reports, institutional responses, periodic review reports, reports of special reviews
The Commission also maintains a permanent record of all accreditation/preaccreditation decisions, including adverse decisions. A full description of the AARTS Record Keeping Policy is in the Association Resource, [Exhibit 5], pp. 47-48.

Documentation:
Handbook, p. 69 [Exhibit 1]
Association Resource, pp. 47-48[Exhibit 5]

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Analyst Worksheet- Narrative

**Analyst Review Status:**
Meets the requirements of this section

**Analyst Remarks to Narrative:**

Section IV(h) of AARTS Handbook states that the Accreditation Commission maintains complete and accurate records of the last full accreditation/preaccreditation review of each institution to include all the documents required by this criterion [Exhibit 1, page 69]. In addition, the agency also maintains a permanent record of all accreditation/preaccreditation decisions, including adverse decisions. Chapter 5, Record Keeping Policy, of the agency’s “Association Resources” provides further details including that electronic and paper records are stored according to the same policy and names the Executive Vice President as responsible for the effective implementation of the policy [Exhibit 5, pages 47-48].

Department staff spot check files and confirmed adequate records are being maintained for each accredited or preaccredited institution, as described in this section. Specifically, each file staff reviewed contained the institution’s most recent self-study, on-site visit report, any responses and all decision letters issued by the agency and any substantive change requests, as applicable.
(a) The agency must demonstrate that it has standards for accreditation, and preaccreditation, if offered, that are sufficiently rigorous to ensure that the agency is a reliable authority regarding the quality of the education or training provided by the institutions or programs it accredits. The agency meets this requirement if the following conditions are met:

(1) The agency’s accreditation standards must set forth clear expectations for the institutions or programs it accredits in the following areas:

   (i) Success with respect to student achievement in relation to the institution’s mission, which may include different standards for different institutions or programs, as established by the institution, including, as appropriate, consideration of State licensing examinations, course completion, and job placement rates.

Narrative:

Introduction

Some background is needed to properly understand our response to 602.16(a)(1)(i).

Special Features of Our Community of (Mostly Small) Schools

Because the student/faculty ratio in most of our schools is small and because the students and faculty members are present the entire day in the Bais Hamedrash, the focus on assessment is an intense one. Growth is examined against the skills and indicators outlined in the Taxonomy of Skills (Hierarchy, pages 22-26) [Exhibit 4]. Assessment using this personal and ongoing structure, is able to focus on knowledge, competence and performance at every level.
Every one of our schools offers a program based on a core of Talmud courses. Although schools have diverse missions, enroll students with different abilities, reflect various schools of thought regarding the philosophy of education, nonetheless the assessment measures need not encompass a variety of disciplines.

There are also a great number of commonalities. Thus we expect that every school will emphasize social responsibility. Every school will add both to the knowledge and the intellectual skills possessed by the student.

Mission. The mission statement takes on enhanced importance in a small school because it can capture the attention of every member of the academic community; there is no danger of it becoming diffuse as it tries to encompass a multiplicity of disciplines.

Educational Program. In a small school there is one program which students complete in tandem. A teacher might spend twenty or more hours a week with his charges in lecture, in preparation and beyond the lecture. Small size and single focus help establish learning outcomes in a uniquely effective way.

Faculty. Another benefit of small size is that faculty as a whole meets regularly and is able to discuss issues relating to outcomes, goals, progress and the accomplishments and needs of individual students. This contributes both to enhancing the quality of the program and to assessment. Faculty becomes a community of scholars working together to create a coherent program of studies, to ensure effective counseling and to contribute to the daily interactions which are so important in moving novice students through the years to the point of scholarship.

An Approach to Learning and to Outcomes

We are guided by the principle that learning is important for its own sake. At the same time, we are mindful of the fact that over and above the personal growth, the scholarship skills and the knowledge attained, graduates from our schools emerge with highly trained minds. In addition, they have the ability to learn, to grow, to adapt to the changing circumstances and to enter any field where a highly trained mind is an asset. The experience of our students at graduate and professional programs in conventional colleges and universities has been extremely impressive, establishing once again that a trained mind is a highly marketable outcome.

By 2021, the community became aware of a surprising number of graduates from AARTS schools who had become successful businessman. An educational program that emphasized creativity, that engendered confidence, that depended on collaboration and that rewarded hard work, turned out to be particularly suited to young men seeking to enter the business world.
Week after week, AMI Magazine highlights stories of young people — graduates of AARTS schools — who describe the paths they took from Yeshiva to becoming successful businessmen, often in IT related fields. [Exhibit 37]

We were recently surprised to learn of the surprisingly large number of AARTS schools graduates who had attended ivy league law schools, seemingly far out of proportion to the size of our institutions.

One of our schools had 37 students who took 98 sections of the CPA exam, 72.5% passed with an average score of 77.7. Both numbers are the highest in the State of New Jersey.

Evidently, the scholarship skills of the typical program offered by AARTS accredited schools are transferable to a business environment – as well as to conventional graduate and professional programs.

This is an extremely valuable outcome, given the almost exponential growth our community is experiencing, as well as the economic pressures we are facing.

Finally, we note that learning does not take place in a vacuum. It is important to examine inputs and processes in the light of an institution’s mission and scope. A need for improvement very often is expressed in changes to resources, to processes, i.e. to inputs, so that an exclusive focus on outcomes in examining success with respect to student learning is incomplete.

The following paragraph from the 1828 Yale Report continues to be relevant for our schools:

A commanding object, therefore, in a collegiate course, should be, to call into daily and vigorous exercise the faculties of the student. Those branches of study should be prescribed, and those modes of instruction adopted, which are best calculated to teach the art of fixing the attention, directing the train of thought, analyzing a subject proposed for investigation: following, with accurate discrimination, the course of argument; balancing nicely the evidence presented to the judgment: awakening, elevating, and controlling the imagination; arranging, with skill, the treasures which memory gathers; rounding and guiding the powers of genius. All this is not to be effected by a light and hasty course of study; by reading a few books, hearing a few lectures, and spending some months at a literary institution. The habits of thinking are to be formed by long continued and close application.

Assessment is Integral to Teaching and Learning
The actual teaching methodology at AARTS schools emphasizes the acquisition of content and developing the ever more sophisticated skills of the aspiring scholar. The student/faculty interaction takes place on an almost daily basis and is characterized by challenge and probe, by argument and question. Students are treated as colleagues early in their career, and even as faculty members use intense questioning as a basis of assessment and subsequent direction for growth, students are encouraged to question at increasing levels of intensity, of depth and, ultimately to challenge as equals.

It is not only knowledge and intellectual skills that our schools look for but also the progress in the student’s character that delineates the process from novice to scholar and ultimately to colleague.

The collegiality which emerges from the student/master relationship is a touchstone of all AARTS accredited schools. Learning and assessment take place simultaneously. And of course in striving to accomplish that level of collegiality, the student is motivated to do more than simply perform well on an examination. The student looks to assimilate the skills he has learned with the content acquired of years of study, joining them together in the thinking patterns which distinguish the scholar from the student.

Establishing Success with Respect to Student Achievement: The Three Stages

(a) The Student

First and foremost, there is the direct assessment of students as a result of the close and continuous interaction with faculty. To a great extent, the determination of student learning is integral to the learning/teaching process itself. A faculty member might probe a student's understanding of a difficult concept. Depending on the outcome, there will be a slightly enhanced challenge and when that is mastered, the student will be shown how to probe even deeper.

This ‘give and take’/‘thrust and parry’ which characterizes so much of the interaction succeeds partly because of the manner in which learning takes place. Our schools typically have a very small student to faculty ratio; students (and often) members of faculty are present the entire day, five 1/2 days a week, ten months a year in the Bais Medrash, for all the years that a student is enrolled at a school.

Chapter X of 'Hierarchy' [Exhibit 4] has an extensive discussion on the nature of faculty/student interaction, and the indicators used to measure success.

Nothing about a student's intellectual growth escapes faculty. The rate at which he acquires content, the quickness of his mind, the intensity and depth with which he is able to approach difficult topics, and the progress in acquiring the skills outlined in
the Taxonomy of Skills, (Hierarchy, pages 22-26) [Exhibit 4] are evident to the members of faculty. Every student's success – and sometimes failure, is discussed periodically by the Hanhala – which receives reports on students' progress on an ongoing basis.

Determining how much a student has advanced, establishes a platform for the continued interaction between master and student, enabling further gains. This iterative process is marked by touchstones which are well established and which enable him to arrive at a comprehensive conclusion about each student at the end of the term. These touchstones are discussed in detail in Hierarchy [Exhibit 4], pages 27-28.

Note, that this form of assessment does not exclude other evaluative techniques. Teachers, especially in the early grades, administer written examinations, senior students are expected to deliver chaburahs, others are observed tutoring younger or less knowledgeable colleagues. There are other measures of student success, but the one to one interaction, whether with chavrusah or faculty member is a key feature of the Bais Medrash, both for learning and for assessment.

On pages 36 and 37 of Hierarchy [Exhibit 4] there is a brief description of the student/faculty interaction in the Beth Medrash. Pages 36 to 52 of Hierarchy [Exhibit 4] discuss some of the indicators which enable faculty to determine success with respect to student learning.

There is much more we would be happy to submit, provided we'd be given more room.

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The agency's standards regarding success with respect to student achievement related to the institution’s mission are based primarily in Standard F: Educational Program, and Standard L: Evaluation of Outcomes [Exhibit 1]. In addition, implementation of those standards is supported by the Site Visitors’ Manual [Exhibit 3], the Accreditation Manual [Exhibit 2], and the extensive document entitled "A Hierarchy of Assessment and Accountability in the AARTS Accredited Rabbinical and Talmudic Schools" (Hierarchy) [Exhibit 4].

The agency requires that each institution demonstrate that a program of assessment is in place and that the assessment program has led to improvements within the institution. Foundational to this process is demonstrating that the institution's students have achieved certain skills as identified in the agency's taxonomy of skills, which is included in the Hierarchy. These skills include, among other things, the ability to translate texts in three different languages, to reason and argue within a logical framework, problem solve, formulate hypotheses, maintain a consistent argument, and defend a position. In addition, the institution must demonstrate that its students can communicate clearly and critically in both speech and writing. The determination as to whether students have achieved the skills is determined through faculty-student interaction that occurs throughout the entire educational program. Institutions are free
to select their own assessment instruments such as course completion rates, job placements and admission to graduate programs. Nonetheless, all institutions must establish success with respect to student achievement on three levels -- the student, the program, and the institution as a whole.

Students must be challenged intellectually through a series of exchanges with a faculty member that causes the student to grasp a concept more deeply by continually probing his understanding of the concept. Because of the small faculty/student ratios faculty can continually monitor a student's intellectual growth through daily interchanges on the content of the program being delivered. In some institutions, teachers may administer written examinations daily to ascertain the achievement of the skills.

The program is evaluated constantly by a group of senior faculty and administrators to ensure that it is fostering student achievement. The group gathers student data to determine the progress made by each class and that data is evaluated to determine the success of the faculty in achieving the institution's mission. Improvements are made to the program as necessary when any problems are detected.

At the institutional level, the senior administrator/scholar (the Rosh HaYeshiva), the senior faculty, and the senior administrators are responsible for implementing the assessment program focused on the institution's overall effectiveness regarding student achievement. The assessment program includes individual student accomplishments and all course and program reports submitted by the faculty and administrators. In addition, information is gathered regarding enrollment data, exit interviews with students, and the success of individuals after graduation by identifying how many became teachers, Rabbis, community leaders, researchers or entered graduate school. The agency requires each institution that chooses to establish its own standards with respect to student achievement to submit those standards to the Accreditation Commission in advance for review and approval. Further, site reviewers are expected to examine the appropriateness of the institutionally established achievement standards.

In addition to the documentation submitted by the agency to demonstrate its compliance, Department staff observed an on-site visit conducted by AARTS and
found the team focused on the institution's student achievement assessment data, including retention rates, the acceptance rate at graduate institutions, as well as the quality of the accepting institutions. The team members evaluated the institution's effectiveness in their discussions with faculty, staff, students, and representatives of the institution's board. It was noted during the on-site visit that faculty members review individual student progress daily, while faculty and staff meet weekly to review the institution's overall effectiveness. A significant part of the visit was the random selection of students from each year for interviews and oral testing by the senior Talmudic scholar on the AARTS team. Department staff readily observed the increased confidence, ability to reason, and sharpened communication skills demonstrated by the students as they moved from year to year.

AARTS provided a self-study, site visit report, and decision letter for one institution selected by Department staff [Exhibit 38-40] and an additional 3 institutions selected by Department staff for the on-site file review conducted July 2022. All examples provided in the petition and virtual file review demonstrate that the agency has clear standards related to student achievement that are sufficiently rigorous to ensure the agency is a reliable authority regarding the quality of education or training provided by the program it accredits. The site visit reports contain ample discussion of student achievement, including on appropriate standards such as retention and graduation rates and the Commission’s decision letter includes its conclusion regarding the institution’s performance with respect to student achievement.

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### Analyst Worksheet - Response

**Analyst Review Status:**

Not Reviewed

### Criteria: 602.16(a)(1)(ii)

**Description of Criteria**

(ii) Curricula.

**Narrative:**
The diversity of schools accredited by AARTS does not extend to the program structure, subjects offered, credits awarded, and very often course nomenclature. Because the programs offered are so similar, the course map readily indicates whether the school's curriculum is consistent with AARTS standards; a program's coherence and its being consistent with the institutional mission is determined by the close review that takes place at a site visit.

In addressing the curriculum requirements of standard F (Educational Program) and standard J (Graduate Program), schools design their courses to be consistent with the institutional mission. There are many schools of thought as to how best to teach the Talmud, what levels of depth to present the material, whether to encourage young students to publish their insights, whether to offer chaburahs, to devote time to teaching others, and how best to engage students so they become lifelong learners.

The Commission requires each school to record with the Accreditation Commission the program being offered including the number of credit hours and submit a course map each year.

Site Visitors examine documents and records, observe classes, interview students at each level, examine original student work, attend student disquisitions, and engage in discussions with faculty, in order to determine whether a program of acceptable quality and level is in effect at the school.

Institutions and visitors benefit from the discussion in the Interpretive Guidelines to Standard F (pages 48-52) and Standard J (pages 73-76) of the Accreditation Manual [Exhibit 2].

An institution whose Baccalaureate level program is less than four years in duration is considered too short for students to develop the content and scholarship skills mentioned above and in the Taxonomy of Skills. A school whose Baccalaureate level program does not offer at least two full years of Talmud courses is inconsistent with AARTS scope and will fail Standard F. A program whose students do not demonstrate growth year to year, whose graduates are not admitted to graduate programs, and which otherwise do not satisfy the levels of rigor, depth, and content consistent with advanced rabbinic and Talmudic education will similarly not satisfy Standard F.

A graduate program which does not have courses which, in content, rigor, challenge and level are beyond the undergraduate, will not satisfy Standard J. Similarly, a school whose students do not demonstrate the scholarship skills enumerated in Standard J will not satisfy Standard J.

The Commission has approved curricula for several schools which are offering Associate level Degrees. The focus of these curricula is not to prepare students with
the ability to enter graduate programs, but rather to establish that the bearers of the Associate Degree have demonstrated sufficient growth in scholarship skills and acquisition of content which enables them to enter the upper level courses at a conventional Rabbinical and Talmudic school. While the Associate level programs are focused on the Talmud, students who have been awarded an Associate Level Degree are prepared to enter a more Advanced Talmud track or Halacha track.

The Halacha track, first mentioned in our 2018 petition, has proven to be quite attractive to certain students, many of whom will not seek to go to a more intense Talmud program at the graduate level.

The Halacha track requires students to complete three full years of Talmud study, and then embark on a study of Jewish Law and Jurisprudence as it emanates from the Talmud. The rigor and challenge are similar to that of the conventional Talmud track, but the focus is on developing a deep understanding of the system of Halacha, and a mastery of significant sections of Jewish law. The study begins with study of relevant sections of the Talmud, but then moves to practical application, to Halacha, as it emanates from the Talmud.

Documentation:
Accreditation Manual, pp. 48-52, 73-76 [Exhibit 2]
Standard F in Shaar Ephraim Self Study, pp. 58-72 [Exhibit 38]
Shaar Ephraim Visiting Team Report [Exhibit 39]
Shaar Ephraim Decision Letter [Exhibit 40]

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Analyst Worksheet- Narrative

Analyst Review Status:
Meets the requirements of this section

**Analyst Remarks to Narrative:**

The agency’s Standard F: Educational Program and Standard J: Graduate Program addresses curriculum. Each standard contains a U.S. Department of Education regulatory reference followed by the agency’s standard. The standards contain interpretative guidelines and a section on adding depth to assist institutions in the preparation of their self-study reports. The agency’s standards for undergraduate and graduate curricula expect the program to develop the ability of students to think independently, develop critical, thinking skills, and to demonstrate competence in the skills identified in the Hierarchy, as discussed under the previous section on student achievement. Curricula must be closely related to the Torah mission of the institution and institutions are required to explain how graduate programs differ from undergraduate [Exhibit 1].

Implementation of Standards F and J is supported by the Site Visitors’ Manual and by the Accreditation Handbook [Exhibits 1 and 3, in Section 602.16(a)(1)(i)]. The Site Visitors’ Manual provides review teams with direction, reminders, and bright lines as to how to assess programs at both the undergraduate and the graduate degree level. Standard J: Graduate Program clarifies the distinctions that the agency makes between a graduate and undergraduate program. Furthermore, the curriculum is evaluated on its ability to facilitate the development of student skills, as specifically discussed in the AARTS document “A Hierarchy of Assessment and Accountability in the AARTS Accredited Rabbinical and Talmudic Schools” (Hierarchy) [Exhibit 4 in Section 602.16(a)(1)(i)].

Department staff observed an on-site visit conducted by AARTS and found that the team evaluated the self-study and reviewed evidence to verify the use of curriculum materials, examined student work and progress, and conducted interviews of those involved in the education provided by the institution, and therefore adequately demonstrated the agency’s effective application of its standards regarding curricula.

Lastly, the agency provided the full cycle of review for one institution in the petition [Exhibits 38-40] and an additional three institutions selected by Department staff for the on-site file review conducted July 2022. All examples provided in the petition and file review demonstrate that the agency has clear standards related to curricula that are sufficiently rigorous to ensure the agency is a reliable authority regarding the
quality of education or training provided by the institutions it accredits.

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<td>(iii) Faculty.</td>
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In our 2018 petition, our discussion of 602.16(a)(1)(iii) began with the sentence, “We are saddened to note the loss of several elderly Roshei Yeshiva who provided a live connection to the earlier world of European Talmudic scholarship.”

The impact of Covid-19 was similarly tragic. Six Roshei Yeshiva of stature died in the past year – a significant percentage of our 71 accredited schools. This has furthered the unfortunate transition we have had to make between aged, sage scholars and younger American born Roshei Yeshiva. Yet there has been no diminution in the quality of education being offered students – not at the six schools who replaced their Rosh Yeshiva, nor at schools who did so five years ago. Becoming a Rosh Yeshiva is the goal of every serious student in advanced rabbinical and Talmudic schools throughout the world. With every year the pool of quality of young scholars increases and the competition for appointment to a position in an AARTS postsecondary institution intensifies.

The result is that AARTS schools on a whole are now led by scholars who understand the nuance of the American student and who provide role models for the younger charges.

As we noted in our previous petition, “This is extremely important in providing the counseling and guidance (over and above Talmudic scholarship) to students who must negotiate a world full of challenges of a kind not encountered ever before. The study of the Talmud requires a rare combination of dedication, concentration, and study not
easily found among 18-22 year olds.”

More, the impact of the social media as a diversion to young people has affected our community as well. This has resulted in the appointment of a significant number of Mashgichim, i.e., scholars who are focused on providing counseling, guidance and ethical behavior, over and above the academic program in effect at AARTS schools.

The standards for appointment as a Mashgiach are similar to and sometimes even more demanding than appointment as an ordinary faculty member of our accredited institutions.

Standard G of the Handbook, (page 26) [Exhibit 1] and as interpreted in the Accreditation Manual (page 53-54) [Exhibit 2] and pages 50-53 of the Site Visitors’ Manual [Exhibit 3] provide the framework against which faculty is to be evaluated.

Briefly, the emphasis is on the quality characteristics and contributions of the individual – the scholarship strengths, teaching ability, leadership, and the ability to help the institution achieve its mission.

The following excerpt from the Handbook (page 26) is instructive:

Quality of faculty is seen as pivotal in any successful educational program. Faculty quality can be established in many ways, including the number of years of advanced study completed by the faculty member; the nature of the graduate institution in which he completed his advanced studies; evidence of creative scholarship; and the nature and extent of previous teaching experience.

Site visitors devote considerable time interacting with individual members of faculty, determining for example, what part they play (and their effectiveness!) in counseling and in serving as role models over and above their responsibilities in the classroom. Meetings of visitors with groups of faculty members usually focus on assessment strategies used at the school, and the nature of oversight of both student progress and program success.

Page 53 of the Site Visitors’ Manual provides important insight to the threshold standards used in judging an institution's faculty. An institution whose faculty does not demonstrate the scholarship strengths characteristic of an AARTS accredited institution will not satisfy Standard G: Faculty. A scholar who has not spent a minimum of ten years in intensive graduate studies will, with rare exceptions, not develop the scholarship skills consistent with this standard.

Documentation:
Handbook, p. 26 [Exhibit 1]
The agency’s Standard G: Faculty addresses the agency’s standards for institutional faculty. The standard cites the appropriate U.S. Department of Education regulatory reference followed by the agency’s standard. The standard also contains interpretative guidelines and a section on adding depth to assist institutions in the preparation of their self-study reports. The agency’s standard for faculty expects the institution recruit faculty whose goals are in line with the mission of the institution. The standard also states the agency’s expectations regarding the qualifications, intellectual and professional growth, and teaching effectiveness [Exhibit 2].
Implementation of Standard G is supported by the Site Visitors’ Manual and by the Accreditation Handbook [Exhibits 1 and 3]. The Site Visitors’ Manual provides review teams with direction, reminders, and bright lines as to how to assess faculty including qualifications, student/faculty ratio, contributions, administration, and effectiveness.

Department staff observed an on-site visit conducted by AARTS and found that the team evaluated the self-study and reviewed evidence including faculty contributions to the development, implementation and evaluation of curricular objectives, and their contributions to the overall quality of the program. The visiting teams also ensure that institutions maintain an appropriate student-teacher ratio to permit high-quality instruction. The actions of the on-site team, together with the documentation provided by the agency, adequately demonstrate the agency’s effective application of its standards regarding faculty.

Lastly, the agency provided the full cycle of review for one institution in the petition [Exhibits 38-40] and an additional three institutions selected by Department staff for the on-site file review conducted July 2022. All examples provided in the petition and file review demonstrate that the agency has clear standards related to faculty that are sufficiently rigorous to ensure the agency is a reliable authority regarding the quality of education or training provided by the institutions it accredits.

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Analyst Worksheet - Response

Analyst Review Status:
Not Reviewed

Criteria: 602.16(a)(1)(iv)

Description of Criteria

(iv) Facilities, equipment, and supplies.
The growth of the community and expectations of students has resulted in a gradual enhancement of the educational facilities at AARTS institutions. The spare buildings which once characterized rabbinic and Talmudic schools are no longer characterized by AARTS accredited schools and indeed schools which do not offer a comfortable environment have a more difficult time recruiting students.

The AARTS requirements relating to this section are published in the Handbook [Exhibit 1] under Standards D (Physical Plant, Materials and Equipment) — page 23, Standard E (Library) — page 23 and Standard H (Students and Student Services) — page 26-27. The interpretive guidelines for each standard are to be found in the Accreditation Manual [Exhibit 2], on pages 35-38 (Standard D), pages 41-43 (Standard E) and pages 60-64 (Standard H). Thresholds (‘bright lines’) are in the Site Visitors’ Manual, [Exhibit 3] page 38 (Standard D), page 41 (Standard E) and page 59 (Standard H).

In examining facilities, institutions are expected to demonstrate that ‘classrooms are large enough and properly lighted, ventilated and heated...’ Maintenance should ensure ‘a high standard of cleanliness, preventive maintenance, and housekeeping.’ ‘Campus security and first aid facilities’ must also be addressed. In addition to the above considerations, AARTS looks at renovation, and room for faculty to meet privately with students.

Office equipment, desks, storage closets, tables, chairs, kitchen facilities are addressed by the standards as well.

The library collection must be consistent with the program being offered and with the institutional mission. Special holdings are of interest and importance as well. Depending on the school, a tape library and English language material is of interest.

Also relevant are the considerations noted in Standard I (Records and Record Keeping), Accreditation Manual [Exhibit 2] page 66. Separate and adequate office space, backup and permanent storage of computerized files, are among the items of interest.

A school operating a plant which is so overcrowded as to threaten health or safety of students or which compromises the effective delivery of the program would fail Standard D. Similarly, deficient fire safety measures, first aid facilities and security precautions would signal a failure of Standard D.

The process whereby AARTS institutions have undertaken to enhance their facilities continues. Of the three schools initially recognized since 2018, two presented new buildings specifically designed to serve as a postsecondary institution, enrolling about
150 students and providing the kind of education which is traditional at our schools.

One school renewed in recognition presented an enhanced environment and extensive, approved plans for a major upgrade of its main building and associated campus.

Documentation:
Accreditation Manual, pp. 35-38, 41-43, 60-64, 66 [Exhibit 2]
Site Visitors Manual, pp. 38, 41, 59 [Exhibit 3]
Standards D, E and H in Shaar Ephraim Self Study, pp. 42-57, 82-90 [Exhibit 38]
Shaar Ephraim Visiting Team Report [Exhibit 39]
Shaar Ephraim Decision Letter [Exhibit 40]

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Analyst Worksheet- Narrative

Analyst Review Status:

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Analyst Remarks to Narrative:

The agency’s expectations regarding facilities, equipment, and supplies are found in
Standard D: Physical Plant, Materials and Equipment; Standard H Students and Student Services; and Standard E: Library. Furthermore, the agency’s expectations regarding storage space are included under Standard I: Records and Record Keeping. Each standard contains a U.S. Department of Education regulatory reference followed by the agency’s standard. The standards contain interpretative guidelines and a section on adding depth to assist institutions in the preparation of their self-study reports [Exhibit 2].

The AARTS’ standards expect that the institution’s facilities, equipment, and supplies are adequate to meet the mission of the institution. Classrooms must be large enough, properly lighted, ventilated, and heated to meet the needs of the students. Facilities must be well maintained and kept clean, including any dormitories, as appropriate. Security measures for the institution must be in place, and there must be first aid facilities for students and staff. A budget must be established for facilities maintenance, equipment, and supplies. All institutions must have a library with holdings that allows the institution to meet its mission, and there must be policies on how library needs are identified, how collections are ordered, and the hours that the library is open. As well, there must be a budget for the library that allows for growth and development of its collection.

Implementation of Standards D, E, H, and I is supported by the Site Visitors’ Manual and by the Accreditation Handbook [Exhibits 1 and 3]. The Site Visitors’ Manual provides review teams with direction, reminders, and bright lines as to how to assess facilities, equipment, and supplies for each standard.

Department staff observed an on-site visit conducted by AARTS and found that the team evaluated the self-study and examined the facilities, classrooms, library and other resources, including the dormitories, to verify that they are appropriate and adequate to support the institution’s objectives. The actions of the on-site team, together with the documentation provided by the agency, adequately demonstrate the agency’s effective application of its standards.

Lastly, the agency provided the full cycle of review for one institution in the petition [Exhibits 38-40] and an additional three institutions selected by Department staff for the on-site file review conducted July 2022. All examples provided in the petition and
file review demonstrate that the agency has clear standards related to facilities, equipment, and supplies that are sufficiently rigorous to ensure the agency is a reliable authority regarding the quality of education or training provided by the institutions it accredits.

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(v) Fiscal and administrative capacity as appropriate to the specified scale of operations.

Narrative:

The need for institutions, as well as AARTS, to function effectively from March 2020 to May 2021 paradoxically had a positive impact on the administrative capacity of schools and AARTS. Simply put everyone had to adapt to an electronic communications and organization and as we discussed in 602.15 with respect to AARTS, we have discovered this increased sophistication of use of internet based tools to be the case of schools we have visited as well as schools we have monitored and communicated with.

With a few exceptions most of our schools are small. The scale of operation is small but of course the nature of the challenge facing small schools (and a relatively small accrediting agency) is comprehensive.

We have found our schools to be equal to the task facing them and it is with a sense of satisfaction that we point to our standards and requirements as having moved our accredited institutions to the point where our findings during visitations are relatively few.

In general both fiscal and administrative resources have become much more secure at AARTS institutions. The community as a whole has matured and many AARTS
institutions now have substantial alumni bodies which are beginning to support their alma maters to a significant extent. The computerization of AARTS institutions is complete.

New hires arrive with computer and administrative skills which are evident at almost every site visit. Record keeping, both academic and financial, occasionally results in a finding, but only occasionally.

AARTS requirements relating to fiscal and administrative capacity are published in the Accreditation Manual [Exhibit 2] under Standard B: Organization and Administration (pages 22-27) and Standard C: Finance (pages 28-33). The Commission also uses part of Standard I: Records (pages 68-69) to reinforce its evaluation of the school’s finances. The review of the institutional audit is a particularly important part of the visit. At one level, the opinion letter and the scale of operation as reflected by actual figures, provides a framework against which both Standard C: Finance and Standard I: Financial Record Keeping can be gauged.

Each institution may develop organizational and administrative structures to meet its own needs, but we look for evidence of clear lines of authority, competent administrative staff, and the institution’s ability to carry out its organizational and administrative responsibilities. The school’s resources must be equal to its financial responsibilities.

An institution whose organizational activity is confused, or is characterized by people working at cross purposes will not be viewed as demonstrating administrative capability. Similarly, a school operating at a deficit without a plan to remedy the situation will fail this requirement. Further insight to threshold levels (‘bright lines’ fiscal and administrative capacity can be found in the Site Visitors’ Manual [Exhibit 3], on pages 30, 35, and 69.

Schools are expected to send financial information each year; this material is analyzed by a CPA consultant, and findings recorded in the Monitoring/Oversight Compliance Document.

Action follows, if necessary, and as appropriate.

Careful note and follow up is made of communications received relating to schools which have not met the Financial Responsibility Index score of 1.5.

Schools that are required to submit a compliance audit are asked to submit a copy in conjunction with their annual Institutional Survey.

Documentation:
The agency’s expectations regarding fiscal and administrative capacity are found in Standard B: Organization and Administration; and in Standard C: Finance. Furthermore, expectations regarding finances are reinforced under Standard I: Records. Each standard contains a U.S. Department of Education regulatory reference followed by the agency’s standard. The standards contain interpretative guidelines and a section on adding depth to assist institutions in the preparation of their self-study reports [Exhibit 2].

Per the agency’s standards, the institution must demonstrate it has a well-structured organization that operates effectively. The standards set forth the agency’s expectations regarding board of directors, role of the Rosh HaYeshiva, organizational
structure, number and type of administrative staff, financing, audits, expenditures, and assets.

Implementation of Standards B, C, and I is supported by the Site Visitors’ Manual and by the Accreditation Handbook [Exhibits 1 and 3]. The Site Visitors’ Manual provides review teams with direction, reminders, and bright lines as to how to assess fiscal and administrative capacity for each standard.

Department staff observed an on-site visit conducted by AARTS and found that the team evaluated the self-study and examined the fiscal and administrative capacity of the institution. The actions of the on-site team, together with the documentation provided by the agency, adequately demonstrate the agency’s effective application of its standards.

Lastly, the agency provided the full cycle of review for one institution in the petition [Exhibits 38-40] and an additional three institutions selected by Department staff for the on-site file review conducted July 2022. All examples provided in the petition and file review demonstrate that the agency has clear standards related to fiscal and administrative capacity that are sufficiently rigorous to ensure the agency is a reliable authority regarding the quality of education or training provided by the institutions it accredits.

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<td>(vi) Student support services.</td>
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As noted in section 602.16(a)(1)(iii) above, the impact of social media has made it necessary for schools to increase the number of Mashgichim and sometimes to broaden the range of responsibilities of regular faculty members to include a strong focus on counseling, guidance and advice for students.

We have found over the years that parents are increasingly focused on the school providing a healthy social as well as rigorous academic environment.

AARTS visitors now are attuned to this changing need and are on the lookout for deficiencies in this area. Quite often there will some informal comments and suggestions between visitors and the institution.

The guiding principle for Standard H: Students and Student Services (Handbook, p. 26, Exhibit 1) is captured in the very first line of the standard:

The student must be considered as a total individual.


Campus security and first aid facilities are among the areas an institution is expected to address.

Standard H then goes on to discuss issues relating to counseling, financial advice and assistance, remedial help, job placement assistance, health and safety considerations, and the like. As always the standards of the Accreditation Commission take into account the nature of the school.

Within this framework, the special circumstances under which each institution operates should be described.

Visitors look for the close teacher-student relationship which is the usual characteristic of a school whose goal is to produce scholars. Further insights to the concerns of the Association are found in the Accreditation Manual (pages 60-63, Exhibit 2).

Note that here, as in much of the AARTS accreditation process, the focus is on helping the institution address each standard comprehensively, encouraging it to examine itself against a broad series of questions, thereby suggesting strategies for improvement.

One interesting aspect of student services at many AARTS schools is students helping
students. Site visitors sometimes remark at the extent to which students help one another in their studies, welcome foreign students, sometimes even collecting money to help a needy fellow. Usually this is an unstructured activity, but speaks volumes about an institution’s mission - and its outcomes.

The community served by AARTS accredited schools has experienced a significant growth in the number of students, with a corresponding growth in the number of postsecondary schools. At the same time, students in increasing numbers are beginning to elect careers and lifestyles outside AARTS institutions and sometimes at institutions accredited by other agencies. This has had two results. Schools often have self-selected students who seek a certain style and level of learning. It has also resulted in a careful focus by institutions on student services, particularly related to counseling in order to establish a reputation for successfully educating young men from the ages of 17 to 22.

AARTS visiting teams are attuned to these changes and the conversations that take place with administration, faculty and students increasingly include inquiries and discussions relating to student services. While the standards of the association remain relevant, their implementation has become far more intense.

In general, there is a wide range of acceptable strategies for providing a satisfactory level of student and student services. An institution which cannot ensure student health and safety, or which does not provide counseling, for example, does not satisfy Standard H.

Documentation:
Handbook, pp. 23, 26 [Exhibit 1]
Accreditation Manual, pp. 60-63 [Exhibit 2]
Standards D and H in Shaar Ephraim Self Study, pp. 42-50, 82-90 [Exhibit 38]
Shaar Ephraim Visiting Team Report [Exhibit 39]
Shaar Ephraim Decision Letter [Exhibit 40]
The agency’s expectations regarding student support services are found in Standard D: Physical Plant, Equipment, and Materials; and in Standard H: Students and Student Services. Each standard contains a U.S. Department of Education regulatory reference followed by the agency’s standard. The standards contain interpretative guidelines and a section on adding depth to assist institutions in the preparation of their self-study reports [Exhibit 2].

The AARTS standard H requires the institutions it accredits to consider the student as a total individual. The agency’s standards expect an institution to demonstrate that adequate student services are provided, including health and guidance services, remedial help, extra-curricular activities, dormitory life, food, job placement assistance, and financial advice and assistance. Student safety includes campus security and first aid facilities. The level of student services expected by the agency is based upon the nature and size of the institution. Nevertheless, the institution is responsible for demonstrating that it is adequately addressing all its student’s needs, as appropriate.

Implementation of Standards D and H is supported by the Site Visitors’ Manual and by the Accreditation Handbook [Exhibits 1 and 3]. The Site Visitors’ Manual provides review teams with direction, reminders, and bright lines as to how to assess student support services for each standard.
Department staff observed an on-site visit conducted by AARTS and found that the team evaluated the self-study and examined the student support services of the institution. The actions of the on-site team, together with the documentation provided by the agency, adequately demonstrate the agency’s effective application of its standards.

Lastly, the agency provided the full cycle of review for one institution in the petition [Exhibits 38-40] and an additional three institutions selected by Department staff for the on-site file review conducted July 2022. All examples provided in the petition and file review demonstrate that the agency has clear standards related to student services that are sufficiently rigorous to ensure the agency is a reliable authority regarding the quality of education or training provided by the institutions it accredits.

Criteria: 602.16(a)(1)(vii)

Description of Criteria

(vii) Recruiting and admissions practices, academic calendars, catalogs, publications, grading, and advertising.

Narrative:

There is a sociological/demographic aspect to the issue of recruiting. AARTS schools on the whole do not recruit at the high school level; for many schools there is a natural flow from certain high schools into the postsecondary program. Some schools depend on the children of alumni and the communities they serve and some schools benefit from the strong growth in numbers in the pool of students available.

The Orthodox Jewish community largely stems from the Holocaust survivors who
arrived in America between 1948-1950. Several generations have past and suddenly the numbers are beginning to increase noticeably.

Concomitantly, because the optimum number of students in schools such as ours which is focused on the scholar, the scholarly mind and the personality is less than 150 students there is a need for additional schools.

As noted earlier, the pool of young men capable of serving as postsecondary faculty and as Roshei Yeshiva has increased as well and certain parts of Brooklyn and Lakewood, New Jersey, each sees the opening of at least one new postsecondary school each year.

This process has only intensified with the difficulty of students traveling to Israel for their Senior year and for graduate studies because of Covid-19.

Standard H (Students and Student Services), pages 26-27 of the Handbook [Exhibit 1] reads:

The recruitment program and admissions policy should be discussed against the institutional mission as background.

Pages 60 and 61 of the Accreditation Manual [Exhibit 2] expands on this element of Standard H, and page 57 of the Site Visitors’ Manual [Exhibit 3] adds,

Is the school recruiting successfully? Is the school recruiting ethically? Are its admissions criteria realistic? Is the student body selected in accordance with the institution’s mission statement?

A school whose enrollment suddenly drops or is suddenly forced to become much less selective in the kinds of students it admits, will result in a finding which will be brought to the Accreditation Commission.

The question of academic calendars is addressed on page 61 of the Accreditation Manual [Exhibit 2].

Is your academic calendar consistent with what is to be expected at an AARTS accredited school...”

The Site Visitors Manual [Exhibit 3], p.63, highlights the Accreditation Commission's concern regarding grading practices:

Did you review the grading practices of the institution? Are they reasonable, effective, and professional?
Are you satisfied that grades are recorded accurately?
Are the grade rosters in conventional format?

On page 62 of the Handbook [Exhibit 1] the Ethical Practices section discusses publications and advertising:

... unfair or misleading advertising or publication practices and the like, will be grounds for initiating the Commission’s probation mechanism.

On the same page, there is a paragraph which explains the Commission’s expectations:

To ensure compliance with this section, the Commission reviews, as part of the accreditation process, promotional material, catalogs and other public documents issued by schools. Of particular concern are statements regarding program and faculty resources, admission practices, academic offerings, degree requirements and satisfactory progress policies, fees and refund structures and graduation rates. Statements regarding educational effectiveness and placement of graduates must also be complete and accurate. All quantitative statements made in publicly available documents must be supported by data available for review.

The threshold expectations regarding catalog and grading are described on page 63 of the Site Visitors’ Manual. Substantially inaccurate/incomplete records would result in an institution’s failing this standard. The records include both academic records pages (61-66) and financial records (pages 67-68)

As noted earlier, recruitment is now an important feature in the life of an AARTS accredited school. Competition by other four year institutions, as well as by individual scholars of great repute offering two year programs to outstanding young men, makes it increasingly important that schools develop a recruitment initiative.

Interestingly, recruitment in the AARTS community of schools does not mean written materials, brochures and booklets, but rather person to person interviews, contacts with high schools, word of mouth by alumni and sometimes a trip to Israel to try to interest students in returning to America.

Community schools rarely have this problem: every student in a Chassidic community for example aspires to enter “his school” so that such schools grow regularly, sometimes by several hundred students each year. Other schools must either offer an outstanding student experience or suffer enrollment drops which inevitably trigger concern and more intense oversight at AARTS annual monitoring visits.

Once again the language in AARTS publications remains valid and relevant, but the
focus and implementation of these guidelines takes the realities carefully into account.

Documentation:
Handbook, pp. 26-27, 62 [Exhibit 1]
Accreditation Manual, pp. 60-61 [Exhibit 2]
Site Visitors’ Manual, pp. 57, 61-68 [Exhibit 3]
Standards H and I in Shaar Ephraim Self Study, pp. 82-97 [Exhibit 38]
Shaar Ephraim Visiting Team Report [Exhibit 39]
Shaar Ephraim Decision Letter [Exhibit 40]

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Analyst Worksheet- Narrative

Analyst Review Status:
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Analyst Remarks to Narrative:

The agency’s expectations regarding recruiting and other practices are found in Standard H: Students and Student Services and Standard I: Records of its manual. Each standard contains a U.S. Department of Education regulatory reference followed by the agency’s standard. The standards contain interpretative guidelines and a section on adding depth to assist institutions in the preparation of their self-study reports [Exhibit 2].
Implementation of Standards H and I is supported by the Site Visitors’ Manual and by the Accreditation Handbook [Exhibits 1 and 3]. The Site Visitors’ Manual provides review teams with direction, reminders, and bright lines as to how to assess recruitment and other practices for each standard. Policy IV(k)(vi): Recruitment and Admissions; and Policy IV(c): Ethical Practices provides further guidance for all areas covered by this criterion.

The agency expects the institution’s recruitment program and admissions policy to be measured against the institution’s mission. Institutions must file a copy of their catalog with the agency. In addition, the grading system must be consistently applied, and all grades must be entered into a permanent student record. Furthermore, the agency reviews the accuracy and completeness of promotional material, catalogs, and other public documents. [Exhibits 1-3].

Department staff observed an on-site visit conducted by AARTS and found that the team evaluated the self-study and examined the recruitment and other practices of the institution. The actions of the on-site team, together with the documentation provided by the agency, adequately demonstrate the agency’s effective application of its standards.

Lastly, the agency provided the full cycle of review for one institution in the petition [Exhibits 38-40] and an additional three institutions selected by Department staff for the on-site file review conducted July 2022. All examples provided in the petition and file review demonstrate that the agency has clear standards related to recruitment and other practices that are sufficiently rigorous to ensure the agency is a reliable authority regarding the quality of education or training provided by the institutions it accredits.

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Criteria: 602.16(a)(1)(viii)

Description of Criteria

(viii) Measures of program length and the objectives of the degrees or credentials offered.

Narrative:

AARTS schools traditionally were open a total of ten months, with each term lasting about 20 weeks each. That has now changed and increasing numbers of institutions are offering three term programs of 12 weeks each in length.

This change is viewed as a substantive change and the Accreditation Commission has reviewed each application for change carefully. In the case of Chassidic institutions where students usually marry at age 19, the first three years are offered on a 12-12-12 basis with the last two years offered on the basis of two terms, 12 weeks each in length, for years four and five. The student week remains the same as in the past.

The Commission feels that the academic credits and the degrees awarded are consistent with commonly accepted practice taking into account the extremely intense rigorous and demanding nature of the program being offered.

The Handbook (page 75) [Exhibit 1] specifies that:

Commission staff will ensure that academic credits and degrees conform to commonly accepted practice.

We have noted previously that the small size of the AARTS community, as well as the common elements offered by all institutions, make it possible to readily determine the appropriateness of program length to the degrees offered at the school.

AARTS schools place a heavy emphasis on Talmud, and typically also offer a course in Bible, one in Ethics, and one in Jewish Law. The levels and objectives change year by year, and the manner in which each school names its courses differs somewhat, but the fundamentals remain constant. Some schools will transliterate titles into English, while others will try to translate them.

Every year schools are expected to submit a course map outlining the courses offered and the credits assigned to their undergraduate program and, if applicable, a graduate program course map as well. The submission is reviewed by staff and any material departure from the prior year's submission results in a request for further information.
If the change is significant or unusual (e.g., a substantively different course or a change in the number of credits assigned to a course) the matter is brought to the attention of the Accreditation Commission. The Commission, in turn, will arrange for a visit, require the school to make a formal application under Significant Change, send a letter asking a school to desist immediately or, take an appropriate adverse action as per our Handbook.

This close attention to program structure is possible only because all AARTS-accredited institutions offer programs which are fundamentally similar to each other. This is also why it has not been necessary for course length and objectives to be a significant part of the site visit, instead monitored by experienced staff alert to significant changes.

The only exception arises in the case of new applicant institutions where site visitors do indeed ensure that the curriculum, the length of the program, and the credits assigned are consistent with the norm.

AARTS institutions offer a program that consists of a full morning and full afternoon session which call for a student to be in the bais medrash for about 40 hours per week in a school term which extends a minimum of ten months.

In most AARTS schools there is a night session, in addition to the morning and afternoon sessions and in some schools there is an organized study structure seven days a week.

The Baccalaureate and Frist Talmudic degrees are structured to require anywhere from 120-150 credits usually divided over four or five years. Note that all programs are measured in credit hours only.

As noted above in 602.16(a)(1)(i) graduate school admission are but one indicator of the rigor of the programs and common acceptance in higher education.

Documentation:

Handbook, p. 75 [Exhibit 1]
Standards A and F in Shaar Ephraim Self Study, pp. 3-14, 58-72 [Exhibit 38]
Shaar Ephraim Visiting Team Report [Exhibit 39]
Shaar Ephraim Decision Letter [Exhibit 40]
The agency’s expectations regarding program length are found in Standard F: Educational Program and Standard H: Students and Student Services. Each standard contains a U.S. Department of Education regulatory reference followed by the agency’s standard. The standards contain interpretative guidelines and a section on adding depth to assist institutions in the preparation of their self-study reports [Exhibit 2].

Implementation of Standards F and H is supported by the Site Visitors’ Manual and by the Accreditation Handbook [Exhibits 1 and 3]. The Site Visitors’ Manual provides review teams with direction, reminders, and bright lines as to how to assess program length and objectives.

The agency expects that the institution's program length will be appropriate, and that the tuition and fees will be in keeping with what is usual in the community of advanced rabbinical and Talmudic schools. The agency expects institutions to publish program length to prospective students. The agency states in its narrative that due the small size of its accredited institutions and because all their programs are fundamentally the same it is possible to annually monitor program length and objectives. Institutions are required to submit a course map outlining courses offered
and credits assigned and any significant departure from prior years may require a visit and formal action under significant change.

Lastly, the agency provided the full cycle of review for one institution in the petition [Exhibits 38-40] and an additional three institutions selected by Department staff for the on-site file review conducted July 2022. All examples provided in the petition and file review demonstrate that the agency has clear standards related to program length that are sufficiently rigorous to ensure the agency is a reliable authority regarding the quality of education or training provided by the institutions it accredits.

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Analyst Worksheet - Response

Analyst Review Status:
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Criteria: 602.16(a)(1)(ix)

Description of Criteria

(ix) Record of student complaints received by, or available to, the agency.

Narrative:

On pages 58 – 60 of the Handbook [Exhibit 1] special note is made of the need for accredited schools to address student complaints:

Accredited institutions must inform students of their opportunity to file complaints when aggrieved, and to document that complaints received have been addressed and responded to in an orderly and expeditious manner.

In particular, students must be informed that the school is accredited by the Accreditation Commission of the Association of Advanced Rabbinical and Talmudic Schools, and that complaints can be filed with the office of the Association at 11 Broadway, Suite 405, New York, NY 10004.

This information must be widely disseminated by publication in the college bulletin,
by inclusion in registration material, or by some other means that reaches all students.

The policy should also discuss who receives the complaints, who discusses it, and what steps are taken to resolve it in a timely manner. In addition to the Commission reviewing a school’s record of complaints between site visits, site visitors must be provided with all records of student complaints received. Commission staff or visitors, as the case may be, will review the record to see if there is a pattern of student complaints, or if there is a trend. A trend sometimes indicates a weakness in a school’s compliance with one standard or other, and will direct visitors to focus their review accordingly. This in turn has implications for the subsequent accreditation decision.

(Student complaints are rare and those which come to the attention of the Accreditation Commission rarer still. In the last five years there was one such complaint which was brought to the attention of the Accreditation Commission and after appropriate interaction, was resolved.)

Site visitors are very sensitive to the need for a school to have an appropriate complaint procedure and for the students to be aware of the policy.

There have been no complaints recorded since May 2018.

Documentation:
Handbook, pp, 58-60 [Exhibit 1]

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**Analyst Review Status:**

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**Analyst Remarks to Narrative:**

The agency’s expectations regarding student complaints are found in Policy IV(a) of its Handbook [Exhibit 1]. The policy requires that all institutions have a complaint policy, that institutions maintain a record of student complaints, and that AARTS be
informed about complaints each year. The institution’s policy must notify students of their opportunity to file a complaint and to document that any complaints were addressed in an orderly and expeditious manner. The policy must be widely disseminated and include notice that complaints can be filed with AARTS and include the agency’s contact information. The agency notes in its narrative that it has not received any complaints during the current recognition period. Implementation of Policy IV(a) is supported by the Site Visitors’ Manual [Exhibits 3]. The Site Visitors’ Manual provides review teams with direction, reminders, and guidance as to how to review student complaints. Site visitors are expected to review the institution’s complaint policy, review any complaints on file at the institution and discuss the issue with students.

The agency provided the full cycle of review for one institution in the petition [Exhibits 38-40] and an additional three institutions selected by Department staff for the on-site file review conducted July 2022. All examples provided in the petition and file review demonstrate that the agency has clear standards related to student complaints that are sufficiently rigorous to ensure the agency is a reliable authority regarding the quality of education or training provided by the institutions it accredits.

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**Criteria: 602.16(a)(1)(x)**

**Description of Criteria**

(x) Record of compliance with the institution’s program responsibilities under title IV of the Act, based on the most recent student loan default rate data provided by the Secretary, the results of financial or compliance audits, program reviews, and any other information that the Secretary may provide to the agency; and

**Narrative:**

Standard I of the Handbook [Exhibit 1], page 27 reads:
The Commission review of student financial aid, i.e. the institution’s compliance with Title IV responsibilities, will be based on program reviews, financial and compliance audits, audited financial statements, and any other information that the Secretary provides.

This review takes place at the site visit, as discussed in the Site Visitors’ Manual [Exhibit 3] pages 67-68 (Student Financial Aid Records). As noted there, the direct review of student SFA records is no longer a part of a site visit, but careful review of all materials provided by the Secretary, is.

Because of the importance of this set of responsibilities, institutions may request a review prior to the visitation, as on page 27 of the Handbook.

Prior to each visitation, a member of AARTS staff, upon request, will review the audited financial statements, financial and compliance audits, program reviews, and academic records of the school. These records will also be the subject of review during possible unannounced visits as well as periodic monitoring visits. If any deficiencies are found during a visitation, expected improvements will be specified by the Accreditation Commission together with a timetable to be followed.

Two institutions federal financial responsibility index fell below 1.5. Upon notification by the Department the schools were contacted and the AARTS CPA was asked to review this situation in detail. Our CPA spoke to the auditor for both schools and reported to the Commission that in spite of the low responsibility index numbers, the schools were in excellent financial health.

Documentation:
Handbook, pp. 27 [Exhibit 1]
Site Visitors’ Manual, pp. 67-68 [Exhibit 3]

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Analyst Worksheet- Narrative

**Analyst Review Status:**
Meets the requirements of this section
The agency's expectations regarding the institution's record of compliance with its title IV responsibilities are found in Standard I: Records, and in Policy IV(c): Ethical Practices. [Exhibits 1 and 2]. In addition, the agency uses any information provided by the Secretary, and the Monitoring/Oversight/Compliance Report as they relate to an institution's compliance with financial aid requirements.

Implementation of Standard I and Policy IV(c) is supported by the Site Visitors’ Manual [Exhibit 3]. The Site Visitors’ Manual provides review teams with direction, reminders, and bright lines as to how to review a school’s title IV responsibilities. Site visitors are expected to review the institution's compliance with its title IV responsibilities, and to cite the institution if issues are found. Information reviewed includes financial aid payments to students, compliance audits, program reviews conducted by the Department, default rates, and any other information that may have been furnished by the Department.

The agency expects the institution's student records, including financial aid records, to be accurate. Prior to each on-site visit, AARTS staff reviews the institution's compliance with its title IV responsibilities, including audits and program reviews. This information is passed on to the site visitors that will be conducting the review of the institution. Furthermore, the AARTS Policy on Ethical Practices puts each school on notice that the Accrediting Commission will take appropriate action if an institution is not complying with its title IV responsibilities [Exhibit 1].

The agency provided the full cycle of review for one institution in the petition [Exhibits 38-40] and an additional three institutions selected by Department staff for the on-site file review conducted July 2022. All examples provided in the petition and file review demonstrate that the agency has clear standards related to title IV responsibilities that are sufficiently rigorous to ensure the agency is a reliable authority regarding the quality of education or training provided by the institutions it accredits.

Lastly, the agency notes in its narrative that review of student financial aid records is no longer part of the site visit process and that upon request AARTS staff will review the audited financial statements, financial and compliance audits, program reviews,
and academic records of the institution prior to a visit. Despite this narrative, Department staff notes that the files reviewed at the on-site file review contained information related to title IV responsibilities, as applicable, and the site visit reports included observations about an institution’s title IV responsibilities. Department staff reminds the agency that in the future it must continue to review an institution’s record of compliance with the institution's program responsibilities under title IV of the Act, based on the most recent student loan default rate data provided by the Secretary, the results of financial or compliance audits, program reviews, and any other information that the Secretary may provide to the agency and this must be reflected in its accreditation standards and accreditation review process.

List of Document(s) Uploaded by Analyst - Narrative

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Analyst Worksheet - Response

Analyst Review Status:

Not Reviewed

Criteria: 602.16(a)(2)

Description of Criteria

(2) The agency's preaccreditation standards, if offered, must--

(i) Be appropriately related to the agency's accreditation standards; and

(ii) Not permit the institution or program to hold preaccreditation status for more than five years before a final accrediting action is made.

Narrative:

AARTS has not granted correspondent status to any school for at least a decade, preferring instead to work with new schools to prepare them for candidate status. This has proven to be a wise policy and while there may be reason to drop our correspondent status, the prevailing sentiment within the organization is to retain the status in case circumstances warrant its use.

Note that since its inception in 1973 AARTS has always considered both correspondent and candidate status as accreditation status.
The Handbook [Exhibit 1], on pages 11-13, describes the accreditation categories recognized by the Commission. Whereas schools applying for candidate status follow procedures as prescribed for accreditation status, institutions applying for correspondent status are directed to page 36 of the Handbook, “For Schools Seeking Correspondent Status.”

Pages 11 and 12 discuss the limited times these statuses can be maintained.

This status cannot be maintained for longer than two years at which time it must progress to Candidate status. A school cannot be in Candidate or Correspondent and Candidate status together for a period longer than five years. Annual reports must be submitted indicating progress towards candidate status. (page 11)

This status is normally awarded by the Accreditation Commission for a period of four years, taking into consideration the recommendation of the visiting team. There is an absolute limit of five years in candidate status for any institution. (page 12)

Documentation:

Handbook, pp. 11-13, 36 [Exhibit 1]
Candidate School Self Study [Exhibit 41]
Candidate School Visiting Team Report [Exhibit 42]
Candidate School Decision Letter [Exhibit 43]

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Analyst Worksheet- Narrative

**Analyst Review Status:**

Meets the requirements of this section
Analyst Remarks to Narrative:

The agency awards two categories of preaccreditation, “correspondent” and “candidate” status. The agency’s policy ensures that an institution can remain preaccredited for a maximum of five years before a final accrediting action is made.

The first preaccreditation category, “correspondent” status, is intended for institutions that are in the early stages of development. A correspondent institution must have been in existence for at least two years, have a four-year program, and have enrolled students in each level of the program. Institutions seeking correspondent status must provide a self-study addressing all the agency’s standards and undergo a site visit. Institutions can only remain in this status for two years. The agency notes in its narrative that it has not granted this status to an institution in the preceding 10 years.

The second preaccreditation category, “candidate” status, is awarded to institutions that demonstrate they are in substantial compliance with the AARTS standards and will come into full compliance within 5 years of receiving candidate status. Institutions seeking candidacy must submit a self-study addressing all the agency’s standards and undergo a site visit. Normally, institutions can remain in candidacy status for four years. However, candidacy status can be extended for an additional year for a maximum of five years.

To demonstrate compliance with this criterion the agency submitted a full cycle of review for one institution that achieved candidate status with AARTS [Exhibits 41-43]. In addition, the agency’s Handbook lists four institutions currently preaccredited in “candidate” status [Exhibit 1]. Department staff reviewed an additional three institutions granted candidate status during the recognition period at the on-site file review conducted July 2022. Each example included the self-study, site visitor report and decision letter and demonstrate that the institutions were reviewed against the agency’s accreditation standards and were granted a preaccreditation status for four years.

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Analyst Worksheet - Response

Analyst Review Status:
Criteria: 602.16(d)

Description of Criteria

(d)

(1) If the agency has or seeks to include within its scope of recognition the evaluation of the quality of institutions or programs offering distance education, correspondence courses, or direct assessment education, the agency's standards must effectively address the quality of an institution's distance education, correspondence courses, or direct assessment education in the areas identified in paragraph (a)(1) of this section.

(2) The agency is not required to have separate standards, procedures, or policies for the evaluation of distance education or correspondence courses.

Narrative:

AARTS does not have distance education in its scope of recognition and is not seeking to include it in its scope, therefore this regulation is not applicable.

Document(s) for this Section

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Analyst Worksheet- Narrative

Analyst Review Status:

Does not meet the requirements of this section

Staff Determination:

The agency must state whether it accredits institutions that deliver education via correspondence or direct assessment and provide its standards that effectively address the quality of an institution’s correspondence or direct assessment education in the areas identified throughout section 602.16(a)(1) as well as the self-study, site visit report and decision letter of at least one institution each that provides education via correspondence and direct assessment, as applicable, or inform Department staff that it does not wish to have correspondence and direct assessment added to its scope of recognition.

Analyst Remarks to Narrative:
The agency notes in its narrative that distance education is not part of its scope and it is not seeking to have distance added to its scope at this time; however, the agency did not state the same for education delivered by correspondence or direct assessment. The agency must inform the Department whether it wishes to have correspondence and direct assessment added to its scope of recognition.

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Response:

An addition to the Handbook will explicitly state that the Association does not accredit institutions that deliver education via correspondence or direct assessment.

In our Handbook, page 29, we added:

*(c) The Accreditation Commission does not accredit institutions which deliver education via correspondence or direct assessment.*

Exhibit:

Exhibit 64: Updated Handbook, Page 29

Analyst Worksheet - Response

Analyst Review Status:

Meets the requirements of this section

Analyst Remarks to Response

In response to the draft analysis the agency clarified it does not wish to add correspondence or direct assessment to its scope of recognition. In addition, the agency updated its Handbook to specifically state it does not accredit institutions that offer programs via correspondence or direct assessment [Exhibit 33].

List of Document(s) Uploaded by Analyst - Response

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(e) If none of the institutions an agency accredits participates in any title IV, HEA program, or if the agency only accredits programs within institutions that are accredited by a nationally recognized institutional accrediting agency, the agency is not required to have the accreditation standards described in paragraphs (a)(1)(viii) and (a)(1)(x) of this section.

(f) An agency that has established and applies the standards in paragraph (a) of this section may establish any additional accreditation standards it deems appropriate.

(g) Nothing in paragraph (a) of this section restricts--

(1) An accrediting agency from setting, with the involvement of its members, and applying accreditation standards for or to institutions or programs that seek review by the agency;

(2) An institution from developing and using institutional standards to show its success with respect to student achievement, which achievement may be considered as part of any accreditation review; or

(3) Agencies from having separate standards regarding an institution’s or a program’s process for approving curriculum to enable programs to more effectively meet the recommendations of

(i) Industry advisory boards that include employers who hire program graduates;

(ii) Widely recognized industry standards and organizations;

(iii) Credentialing or other occupational registration or licensure; or

(iv) Employers in a given field or occupation, in making hiring decisions.

(4) Agencies from having separate faculty standards for instructors teaching courses within a dual or concurrent enrollment program, as defined in 20 U.S.C. 7801, or career and technical education courses, as long as the instructors, in the agency’s judgment, are qualified by education or work experience for that role.
All AARTS accredited institutions participate in Title IV programs.

602.16(f)

AARTS Standards (Handbook, pp. 21-29 [Exhibit 1]) describe a complete and coherent set of requirements, policy and practices which are consistent with a well-run postsecondary institution.

Documentation:

Handbook, pp. 21-29 [Exhibit 1]

602.16(g)(1)

Procedures whereby the Accreditation Commission adds, removes or modifies standards is well established within the organization. The Accreditation Commission acts independently to make any of these changes but traditionally, and almost invariably, brings the matter to the members of the association at the Annual Meeting for comments, recommendations, discussion and sometimes a vote. Only after does the Accreditation Commission take final action on proposals before it.

602.16(g)(2)

The means of demonstrating success with respect to student achievement is generally similar across all institutions. Schools are encouraged to develop and present original approaches.

602.16(g)(3)(i)

602.16(g)(3)(i) is not applicable to our agency.

602.16(g)(3)(ii)

602.16(g)(3)(ii) is not applicable to our agency.

602.16(g)(3)(iii)

602.16(g)(3)(iii) is not applicable to our agency.
Graduates of AARTS accredited institutions are increasingly moving on to graduate and professional graduate programs in conventional colleges and universities. Those graduates who enter more traditional careers find that outcomes of the traditional curriculum which characterizes AARTS accredited schools is precisely what is being sought by employers.

602.16(g)(4)

602.16(g)(4) is not applicable to our agency.

The agency’s narrative for this section states that regulations applicable to this section do not apply. The agency does not have separate or additional standards as described at 602.16(f) or (g). 602.16(e) does not apply because all the agency’s accredited institutions participate in Title IV, HEA programs. The agency’s student achievement standards are discussed extensively in section 602.16(a)(1)(i).

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Analyst Worksheet - Response

Not Reviewed
The agency must have effective mechanisms for evaluating an institution’s or program’s compliance with the agency’s standards before reaching a decision to accredit or preaccredit the institution or program. The agency meets this requirement if the agency demonstrates that it—

(a) Evaluates whether an institution or program—

(1) Maintains clearly specified educational objectives that are consistent with its mission and appropriate in light of the degrees or certificates awarded;

(2) Is successful in achieving its stated objectives at both the institutional and program levels; and

(3) Maintains requirements that at least conform to commonly accepted academic standards, or the equivalent, including pilot programs in §602.18(b);

Narrative:

(1) This concern is addressed on page 32 of the Handbook [Exhibit 1] which reads:

In particular, the Commission expects that the school’s educational objectives, clearly stated, are consistent with its mission, and appropriate to the postsecondary degrees being offered.

Chapter V of Hierarchy [Exhibit 4], p.19 is responsive:

Since educational objectives are so closely related to institutional mission, it is possible to discuss objectives for the AARTS community as a whole, as was the case for mission.

At one level, educational objectives serve as the building blocks which enable a school to achieve its mission. Thus, a school intent on preparing young men for a lifetime of scholarship will likely include “senior students are able to deliver an acceptable Chaburah” as an objective. Another objective might be the expectation that “graduates demonstrate mastery of form tractates in Noshim/ Nesikim”.

There will be other objectives as well. A school whose mission includes service to the community will point to “students volunteering to tutor neighborhood children”, or studying with adult members of the community as objectives which contribute to the total mission.
Contributing to the above comprehensive educational objectives, are the narrower objectives which characterize expectations for each grade level. Two examples are “third year students must be able to understand the commentary of the Rishonim on his own” and “at the end of the first year, a student is expected to be able to make a laining on his own”.

Objectives at this level of detail serve as a template against which the Hanhala will assess the progress of the program throughout the year. As noted, these objectives aggregate to the comprehensive objectives which, in turn, lead to the attainment of institutional mission.

The third level of educational objective usually appears as part of the course description. A progression of such course descriptions enables the observer to determine whether the course content, rigor, challenge, and expectations will combine to lead to the higher order, more general objectives noted earlier.

(2) AARTS accredited schools admit postsecondary students, and offer undergraduate programs of four or five years’ duration. The school year extends about ten months and students attend classes, lectures, and maintain structured study schedules and carry out research for five and a half days a week, typically for about nine hours a day. As noted on page 47 of the Site Visitors Manual [Exhibit 3] site visitors determine

"Is the Institution achieving its stated objectives?"

(3) The rigor and demands of the typical AARTS program are consistent with the requirements of the finest programs offered anywhere. The performance of students transferring from our schools to professional and graduate programs at regionally accredited institutions provides us with independent objective evidence that the preparation and level of the course work offered at our schools is consistent with commonly accepted standards for undergraduate and graduate degrees.

Furthermore, the scholars of professorial rank at regionally accredited colleges and universities who participate in every visiting team and constitute almost half of the members of the Accreditation Commission assure us that offerings in our schools “at least conform to commonly accepted standards.”

In states where our schools offer the Baccalaureate degree, state reviewers have similarly confirmed the quality and level of AARTS degree requirements.

A catalog review determined that a school’s course description was not sufficient to establish that objectives correlate to the mission. This appeared in the Monitoring/Oversight/Compliance Report, which was sent to Visiting Team
members, in conjunction with a site visit. Visitors were thereby alerted to examine this issue carefully.

Page 47 of the Site Visitors’ Manual is also relevant here.

Institutional Monitoring has taken on a life of its own. With few exceptions, every institution is visited once a year and the interaction with schools ensures compliance, as well as institutional improvement, particularly in years between comprehensive site visits. The team of monitoring review specialists play an increasingly important role in enhancing the close relationship between AARTS and its accredited schools, and in helping schools sharpen their focus on mission objectives, assessment and outcomes. The annual conversation with scholarly monitors as evidenced by their resumes has become a regular, and not unwelcome feature of AARTS accredited school life.

Excerpts from annual monitoring visits exemplify both the focus of AARTS on institutional compliance and the energy and effectiveness of the AARTS improvement initiative.

And at the risk of being repetitious the comments made with respect to 602.16(a)(1)(viii) are relevant here:

AARTS institutions offer a program that consists of a full morning and full afternoon session which call for a student to be in the bais medrash for about 40 hours per week in a school term which extends a minimum of ten months.

As noted earlier many of our schools have transitioned to a three term (12/12/12 weeks) per year. There is no change in the duration of each program or the nature of the courses offered except that the restructuring seems to fit the needs of students and the school

In most AARTS schools there is a night session, in addition to the morning and afternoon sessions and in some schools there is an organized study structure seven days a week.

The Baccalaureate and First Talmudic degrees are structured to require anywhere from 120-156 credits usually divided over four or five years. Note that all programs are measured in credit hours only.

As noted above in 602.16(a)(1)(i) graduate school admission are but one indicator of the rigor of the programs and common acceptance in higher education.

Documentation:
Handbook, p. 32 [Exhibit 1]
Site Visitors’ Manual, p.47 [Exhibit 3]
Analyst Worksheet- Narrative

Analyst Review Status:

Does not meet the requirements of this section

Staff Determination:

The agency must specify if it has evaluated any pilot programs during the current recognition period.

Analyst Remarks to Narrative:

AARTS’ Handbook addresses educational quality as it relates to institutional mission. Specifically, Section III(e) states that that the Commission expects an institution’s educational objectives are clearly stated, consistent with its mission, and appropriate to the postsecondary degrees being offered. Section L: Evaluation of Outcomes states that the agency determines whether institutions have succeeded with respect to student achievement related to institutional mission. Institution’s select their own assessment instruments and strategies using Chapter X of the Hierarchy of Assessment and Accountability in the AARTS Accredited Rabbinical and Talmudic Schools (Hierarchy) as a guide [Exhibit 1]. Chapter IV of the agency’s Hierarchy is premised, in part, on the fact that all AARTS accredited institutions offer similar programs and share the same mission and therefore assessment of objectives and outcomes is possible using a single document. The Hierarchy sets forth objectives at the institutional level as well as within programs, including objectives based on the year of study [Exhibit 4, Section V].
The agency’s Site Visitor’s Manual describes how the agency evaluates the institution’s mission and objectives, including that the institution maintains requirements that at least conform to commonly accepted academic standards [Exhibit 3, Section F]. However, the agency did not explicitly state whether it evaluated any pilot programs. The agency included one full cycle of review for an institution selected by Department staff throughout section 602.16 [Exhibits 38-40]. The exhibits demonstrate that the agency evaluated the institution’s mission and objectives in light of section 602.17(a)(1)-(3).

Department staff observed an on-site visit conducted by AARTS and found that the team evaluated the institution’s success at achieving its educational objectives in light of the institution’s mission and degrees awarded as well as its educational requirements to ensure they conform to commonly accepted academic standards. The actions of the on-site team, together with the documentation provided by the agency, adequately demonstrate the agency’s effective application of its standards.

Lastly, the agency provided the full cycle of review for an additional three institutions selected by Department staff for the on-site file review conducted July 2022. All examples provided in the petition and file review demonstrate that the agency has effective mechanisms for evaluating an institution’s compliance with the agency’s standards related to mission and objectives before reaching a decision to accredit the institution or program.

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AARTS did not evaluate any pilot programs.

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In response to the draft analysis the agency attests it did not evaluate any pilot programs as described at 602.18(b) during the current recognition period.

**List of Document(s) Uploaded by Analyst - Response**

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**Criteria: 602.17(b)**

Description of Criteria

(b) Requires the institution or program to engage in a self-study process that assesses the institution's or program's education quality and success in meeting its mission and objectives, highlights opportunities for improvement, and includes a plan for making those improvements;

Narrative:

The language describing the AARTS Accreditation Commission requirement regarding the self-study process incorporates much more than the regulations seem to be asking for. The reason is simple. In 1974 the Department expected that “the self analysis would be a qualitative assessment of the strengths and the limitations of the institutions or programs…”

In 2013 the Department required “the institution or program to prepare following guidance provided by the agency, an in-depth self-study that includes the assessment of educational quality and the institution or program continuing efforts to improve educational quality.”

The 2021 regulation requires that “the self-study process assesses the institutions or programs educational quality and success in meeting its mission and objectives, highlights opportunities for improvement and includes a plan for making those improvements.”

The self-study provides a framework for establishing compliance with the standards of the Association, a guide to the visitors preparing for the site visit, a tentative roster of areas needing closer investigation, as well as a description of the totality of the institution – its past, and often its accomplishments. And in the course of preparing for a site review, the visitors spend time evaluating the self-study, raising questions, and providing suggestions for improvement, even while noting items that should be examined during the visit itself.
Preparing a self-study document is a serious challenge, particularly for a smaller school. We have tried to be helpful in a number of ways. As noted the Accreditation Manual [Exhibit 2], is devoted mainly to assisting schools in the preparation of a self-study.

All of the above is background. Accreditation Commission staff continues to apply an ‘in-depth self-study’ requirement, rejecting (while making suggestions for improvement) documents which do not address the standards with sufficient level of detail and comprehensiveness. We also require a discussion of assessment of educational quality and its improvement.

Throughout the Accreditation Manual [Exhibit 2] there are a series of questions under self-study outcomes which are intended to help institutions emerge from the process with a focus on improvement. (Accreditation Manual, [Exhibit 2]) As an example, we quote the language on page 52:

Are there any insights you have developed as a result of this intensive review of your educational program? Are there any changes that may result? Any long-term improvements to be expected?

Section III of the Accreditation Manual [Exhibit 2], pp. 92-106 has a sample to illustrate in depth responses to questions.

We believe that an in-depth self-study and accompanying self-study report are extremely helpful to the institution and to the site visitors, particularly because it focuses on all the standards of the Association.

A side note may be of interest. In higher education there are many improvements, but not to the teaching/learning process itself. The environment might be more helpful, the admissions process smoother, transportation more accessible and wallboards more readable. These are all improvements to the experience of the student, but there is virtually nothing that has appeared to improve the teaching/learning process to help the student. Quite the contrary better pictorial textbooks, online modules, quick and easy research of facts and references all make the student’s life easier, but they do not enhance actual learning.

We at AARTS are of course always looking to help the student succeed and with a very small staff/student ratio, it sometimes becomes possible to tailor a presentation to the needs of only a handful of students. And throughout our system of schools there is a culture of improvement. People are always trying new approaches and reporting on successes. The same is largely true in conventional colleges and universities where the watercooler talk inevitably centers around the new way to teach a physics derivation, a more successful textbook, better architecture software. There is a
universal desire to improve, to enhance learning, but reviewing the landscape and the outcomes improvement in the existential part of the postsecondary experience, i.e., the learning – there have been no improvement over the years.

Having said this, the Department is to be commended for placing a stress on a search for improvement.

Documentation:
Accreditation Manual [Exhibit 2]

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Analyst Worksheet- Narrative

**Analyst Review Status:**
Meets the requirements of this section

**Analyst Remarks to Narrative:**

Although not discussed in the agency’s narrative or included in this criterion, Section III(a): Applying for Accreditation and Section III(f): For Accredited Institutions Seeking Renewal of Recognition of the agency’s Handbook require an institution to engage in an in-depth self-study process to compare the institution’s operations to the agency’s standards including the institution’s educational quality and success in meeting its mission and objectives [Exhibit 1 in section 602.16(a)(1)]. The Handbook and Manual serve as extensive guides to assist institutions in the self-study process. The Manual contains sections that include each of the agency’s standards with associated regulatory references, interpretive guidelines, a discussion on adding depth, and outcomes. Standard F: Self Study Outcomes prompts the institution to identify areas needing improvement.

To demonstrate compliance with this criterion, the agency submitted the self-study of an institution selected by Department staff and attached throughout section 602.16(a)(1). The self-study is comprehensive and addresses each of the agency’s standards [Exhibit 38]. In addition, the sections “Comparison of Total Picture with Five years Before” and “Projected Activities Over next Five Years” under each
standard in the self-study highlight opportunities for improvement and a plan for making those improvements.

The agency also provided self-studies for an additional three institutions selected by the Department for the on-site file review conducted July 2022. Those site visit reports were similarly sufficiently detailed in addressing compliance with the agency’s standards. In addition, the agency stated during the file review it does not provide formal training to institutions on the self-study process. Institutions are sent a copy of the Handbook and the agency provides one-on-one guidance via e-mail, telephone, and upon request, facilitated visits. Department staff notes that the examples of self-studies reviewed during the file review contained copies of e-mails sent to the institution providing guidance during the self-study process. In addition, Department staff reviewed the transcript for a facilitated visit with one institution preparing its self-study and noted the in-depth guidance provided to the institution by the agency.

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<td>(c) Conducts at least one on-site review of the institution or program during which it obtains sufficient information to determine if the institution or program complies with the agency's standards;</td>
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<td>Central to the whole accreditation process is the site visit conducted by a team selected to reflect the special nature of the advanced rabbinical and Talmudic school (Handbook, pages 40-46, Exhibit 1). The site visit examines all aspects of the institution against the standards of the Association, keeping in mind the institutional mission.</td>
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The discussion in the Site Visitors’ Manual, pages 7-14, (Exhibit 3) provides insight to AARTS’ philosophy and practice regarding the site visit. The Site Visitors’ Manual is intended to guide the site visitor through the process.

The site visit stresses interaction with students, with administration, and with faculty. Meetings with each group, as well as careful review of each standard, enable the visitors to validate the self-study report, and helps the Commission understand the functioning of the institution as an educational entity.

The site visit is more than fact finding, or even process finding. It is also an opportunity to interact with members of the various campus constituencies to explore ideas, to examine the outcomes of the school vis-à-vis its mission, and to experience the totality of the institution. Visitors are not limited by the self-study, but rather use it as a springboard to seek additional pertinent information. Finally, the site visit often proves to be a unique opportunity for the cross-fertilization of ideas and practices.

Visiting team members are furnished with extensive background material, including the institutions most recent FISAP report, IPEDS documents, student lists and the like. All of these appear in the Visitors' Resource Manual prepared in the AARTS office for each site visit. Also included in the background material is a copy of the school’s latest Monitoring/Oversight/Compliance report. Visitors have found the previous site visit report to be extremely helpful in placing the changes the school has undergone into perspective. This report also helps provide a basis for judging the accuracy and completeness of material furnished for the current visit.

It is important to note that AARTS did not undertake any visits between March 17, 2020, and April 25, 2021 due to the Covid-19 pandemic. We felt that there is so much missing in a virtual visit and that the essential elements of peer review were simply impossible that for us, it would have been intellectually dishonest to arrive at a conclusion regarding institutional quality based on a virtual visit. We did, however, monitor (electronically) the strategies used by schools offering education at a distance. We are happy to report that in the interval between April 2020 and July 2021 we have had 9 visits to additional locations, 15 monitoring visits, and 4 comprehensive site visits. In addition, 9 comprehensive site visits have been scheduled between August and December 31, 2021.

Documentation:
Handbook, pp. 40-46, [Exhibit 1]
Site Visitors’ Manual, pp.7-14 [Exhibit 3]
Analyst Worksheet- Narrative

**Analyst Review Status:**

Meets the requirements of this section

**Analyst Remarks to Narrative:**

Section III(f) of the agency’s Handbook states that institutions seeking re-accreditation must submit to a comprehensive site visit following submission of a self-study report [Exhibit 1]. The Handbook outlines the site visit process and the Site Visitor Manual [Exhibit 3] discusses the process in further detail. Site visitors verify the contents of the self-study and make observations, suggestions, and recommendations. The agency states in its narrative that it stresses interactions between the site visit team and members of the campus community to explore ideas, examine outcomes, and experience the totality of the institution. In addition to the self-study, site visitors base their visit on additional background material including the most recent FISAP report, IPEDS documents, student lists and a copy of the agency’s Monitoring/Oversight/Compliance report.

The agency provided a site visit report including for an institution selected by Department staff in section 602.16(a)(1) [Exhibit 39]. The report is sufficiently detailed in addressing compliance with the agency’s standards. The agency also provided site visit reports for an additional three institutions selected by the Department for the on-site file review conducted July 2022. Those site visit reports were similarly sufficiently detailed in addressing compliance with the agency’s standards.

Lastly, Department staff observed an on-site review conducted by AARTS for one of its accredited institutions September 2022. AARTS reviewed the school against each of its standards during the on-site review.

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Criteria: 602.17(d)

Description of Criteria

(d) Allows the institution or program the opportunity to respond in writing to the report of the on-site review;

Narrative:

The Handbook, page 49 [Exhibit 1], reads:

Before the visiting team report is sent to the Accreditation Commission the institution is given the opportunity to respond in writing, to submit supplementary material, and to correct factual errors in the report.

Although schools typically have at least three full weeks to respond to a report, in cases where a school has less than three weeks to respond, it is offered the opportunity to have their application deferred to the next meeting of the Commission.

Documentation:
Handbook, p. 49 [Exhibit 1]

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Analyst Worksheet - Narrative

Analyst Review Status:

Meets the requirements of this section

Analyst Remarks to Narrative:
Section III(I): Following the Site Visit of the agency’s Handbook states that an institution is given the chance to respond in writing to the site visit report including the opportunity to submit supplementary material and correct factual errors in the report. The policy specifies that institutions typically have three weeks to respond; however, in cases where the institution is given less than three weeks, it is offered the opportunity to defer its appearance before the Commission until the next meeting.

The agency did not include in the petition any examples of responses it received from institutions visited by the agency during the current recognition period and therefore Department staff could not verify application of the agency’s policy as it relates to this criterion. However, at the on-site file review conducted July 2022 the agency stated that the institution included in the petition did not respond to the site team report. In addition, two of the three institutions selected by Department staff for the file review had no response. Department staff notes that each institution received a standard cover letter as part of the visiting team report indicating the institution has 21 days to respond. One of the institutions provided a timely response. The agency also provided additional examples of responses received for candidate institutions. Lastly, Department staff notes responses were included in files spot checked as part of 602.15(b) during the file review.

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**Analyst Worksheet - Response**

**Analyst Review Status:**

Not Reviewed

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**Criteria: 602.17(e)**

**Description of Criteria**

(e) Conducts its own analysis of the self-study and supporting documentation furnished by the institution or program, the report of the on-site review, the institution's or program's response to the report, and any other information substantiated by the agency from other sources to determine whether the institution or program complies with the agency's standards;
Narrative:

As outlined in the procedures following the visit (Handbook, page 49, [Exhibit 1]):

The accrediting process continues with a copy of the visiting team report going in a timely fashion to every member of the visiting team for their approval, and subsequently to the head of the institution.

Further, we read:

In addition to copies of the institutional self-study and visiting team report, members are also sent copies of any supplementary material or corrections furnished by the head of the institution, as well as material furnished by staff.

Members of the Commission are each expected to review all the relevant material regarding the school, in preparation for discussion and decision-making which leads to the accreditation action.

It is important to recognize that the site visit provides the opportunity for intensive review of an institution, going well beyond the educational program to include student academic records and institutional finance records. The financial audit examination is a searching one, for example, and the site visitor’s report is based on an in-depth consideration of every aspect of the institution’s operation.

The visiting team report that emerges from such a site visit not only provides an evaluation, but also suggests areas to be addressed for each standard. Strengths and weaknesses are identified and areas needing improvement are highlighted. Visitors are encouraged to make observations, suggestions, and recommendations; the Site Visitors’ Manual, page 11, differentiates carefully among the three. All of the above are used by Commission members in arriving at their decision.

Documentation
Handbook, p. 49 [Exhibit 1]
Site Visitors’ Manual, p. 11 [Exhibit 3]
Shaar Ephraim Self Study [Exhibit 38]
Shaar Ephraim Visiting Team Report [Exhibit 39]
Shaar Ephraim Decision Letter [Exhibit 40]
Analyst Worksheet - Narrative

Analyst Review Status:

Meets the requirements of this section

Analyst Remarks to Narrative:

Section III(1) of the agency’s Handbook addresses the requirements of this section. Specifically, the Handbook states that copies of the institution’s self-study, site visit report, any supplementary materials or corrections provided by the institution, as well as supplementary materials provided by staff are forwarded to the Commission who are expected to review all relevant materials in preparation for discussion and decision-making, which leads to accreditation action [Exhibit 1].

To demonstrate compliance with this criterion the agency submitted the full cycle of review for one institution selected by Department staff [Exhibits 38-40]. The agency also submitted the agendas for all Commission meetings held during the previous two years [Exhibit 44 in section 602.17(a)].

Department staff observed a virtual Accreditation Commission meeting during June 2022. It was clear from the meeting that the Commissioners had access to and reviewed the material referenced in this criterion in making its accreditation decisions. In addition, Department staff reviewed Accreditation Commission meeting minutes for all meetings conducted between January 2021 and February 2022 during the on-site file review conducted July 2022. The minutes reflected that the Commission had access to and reviewed the self-study and supporting documentation.
furnished by the institution, the report of the on-site review, and the institution’s response to the report to determine whether the institution or program complies with the agency’s standards.

**List of Document(s) Uploaded by Analyst - Narrative**

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**Analyst Worksheet - Response**

**Analyst Review Status:**

Not Reviewed

**Criteria: 602.17(f)**

**Description of Criteria**

(f) Provides the institution or program with a detailed written report that assesses the institution’s or program’s compliance with the agency’s standards, including areas needing improvement, and the institution’s or program’s performance with respect to student achievement;

**Narrative:**

The Accreditation Commission provides to the institution a detailed written report assessing the institution’s compliance with standards, including areas needing improvement, as well as a report addressing the institution’s performance with respect to student achievement. (Handbook, pp. 49-50, Exhibit 1)

The following paragraph is pertinent:

The Commission provides a detailed written report to the school assessing compliance with AARTS standards, including areas needing improvement, identifying deficiencies in the institution’s compliance with these standards, and also assessing the school’s performance with respect to student achievement.

Excerpts from visiting team reports (which are integral to the decision letter, after action by the Accreditation Commission) (pages 58-60) of the Hierarchy [Exhibit 4] are instructive.

**Documentation:**

Handbook, pp. 49-50 [Exhibit 1]
The agency provides institutions it accredits with a detailed written report that assesses the institution’s compliance with the agency’s standards, including areas that need improvement, including with respect to student achievement. Section III(l) of the agency’s Handbook states that following the site visit a copy of the visiting team report is sent to each team member for approval and then forwarded to the head of the institution. In addition, the agency’s Hierarchy [Exhibit 4] and Site Visitor’s manual [Exhibit 3 in section 602.17(e)] provide guidance and examples on how the agency assesses the institution’s compliance with the agency’s standards, including areas that need improvement. For example, the Site Visitor’s manual provides instruction on the difference between strengths and weaknesses, suggestions, and recommendations. The Hierarchy provides examples from past site visit reports on how the agency communicates compliance with its standards to the institution.

Further, the agency submitted the full cycle of review for an institution selected by the Department [Exhibits 38-40] and an additional three site visit reviews selected by the Department for the on-site file review conducted July 2022. The reports are sufficiently detailed and each standard notes strengths as well as areas needing improvement, including with respect to student achievement, as applicable.
Criteria: 602.18(a)-(b)(1)

Description of Criteria

(a) The agency must consistently apply and enforce standards that respect the stated mission of the institution, including religious mission, and that ensure that the education or training offered by an institution or program, including any offered through distance education, correspondence courses, or direct assessment education is of sufficient quality to achieve its stated objective for the duration of any accreditation or preaccreditation period.

(b) The agency meets the requirement in paragraph (a) of this section if the agency—

(1) Has written specification of the requirements for accreditation and preaccreditation that include clear standards for an institution or program to be accredited or preaccredited;

Narrative:

The Handbook [Exhibit 11] was first published in 1973 and has been updated regularly to reflect changes in regulatory requirements as well as modification to policy, practice and standards as recommended by the community of schools, and as adopted by the Accreditation Commission.

In practice, as well as in policy and intent, the Handbook has proven to be a clearly written and easily understood document, presenting AARTS standard, policy and practice in an easily understood format. The Accreditation Manual [Exhibit 2] and the Site Visitors Manual [Exhibit 3] are widely viewed as extremely helpful to schools, site visitors, and to Commission Members. They were structured in a manner to enable both institutions and visitors to understand one another's perspectives and problems – as well as to encourage an openness and frankness which leads to fair evaluation and decision making.

The Handbook [Exhibit 1], as well as the Site Visitors’ Manual [Exhibit 3], make it amply clear, both in print and in implementation, that the institution is examined against the standards of the Association.

Page 44 of the Handbook reminds the visitor

We know you will observe, record, consolidate, and comment as required, based on
our standards, while keeping the institutional mission in mind.

This is reiterated on page 45:

As we noted earlier, all observations, comments, and recommendations must be based on the published standards.

The Site Visitors’ Manual [Exhibit 3], by its structure and intent, guides the Site Visitor to make observations and draw conclusions, strictly according to the standards.

Finally, participants at every Comprehensive Standards Review going back to July 4, 2012 have engaged in a wide ranging conversation regarding the standards. There has never been any indication that the standards were anything but perfectly clear to all.

Documentation:
Handbook, pp. 44-45 [Exhibit 1]
Accreditation Manual [Exhibit 2]
Site Visitors Manual [Exhibit 3]

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Analyst Worksheet- Narrative

**Analyst Review Status:**

Meets the requirements of this section

**Analyst Remarks to Narrative:**

The agency’s Handbook contains written specifications of the requirements for accreditation and preaccreditation as well as the agency’s standards [Exhibit 1]. Section III(b) of the Handbook states “The Commission consistently applies and enforces standards that respect the stated mission of the institution, including religious
mission, and that ensure that the education offered by an institution is of a sufficient quality to achieve its stated objective for the duration of any accreditation or preaccreditation period granted by the Commission.”

The agency notes that the Accreditation Manual [Exhibit 2] and Site Visitor Manual [Exhibit 3] support the Handbook and are written to enable all parties to understand each other perspectives and encourage openness. Both manuals expand on the agency’s standards and offer further clarity to the standards found in the Handbook.

As discussed throughout 602.16(a)(1), the agency’s accreditation standards are clear and the agency has demonstrated that it effectively applies its standards to ensure that its accredited institutions are of sufficient quality to achieve the stated objectives.

Department staff notes the agency does not accredit institutions that offer education through distance, correspondence, or direct assessment education.

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List of Document(s) Uploaded by Analyst - Narrative

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Analyst Worksheet - Response

Analyst Review Status:

Not Reviewed

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Criteria: 602.18(b)(2)

Description of Criteria

(2) Has effective controls against the inconsistent application of the agency’s standards;

Narrative:

Section III. (k) (2) of the Fair Practices Section of the Handbook [Exhibit 1], page 47 reads
All standards, policies, and procedures are fairly and uniformly applied.

Special care is taken at every step to ensure that procedures are appropriate and fair, even while remaining rigorous and demanding. If requested, a member of staff works with the institution to guide the initial stages of the self-study; the fact that staff is present at all site visits and evaluation decision meetings helps ensure that institutions are examined consistently against uniform standards.

There is an extensive training program (pp.6-14, in the Association Resource, [Exhibit 5]) which has been implemented successfully which is but one element in a program to ensure consistency. Staff participating at all site visits is another contributing factor for consistency.

A multi-level evaluation process was designed to ensure consistency. The self-study report is sent to all members of the Accreditation Commission, as well as to the site visitors for review and assessment. The visitors have a scheduled period during the visit for discussion among themselves, and sufficient time for the exit interview to enable discussion and clarification to ensue. Finally, there is an extensive discussion at the meeting of the Accreditation Commission itself. All of the above takes place within the framework of AARTS standards.

Another factor which contributes to consistency is the fact that schools have the opportunity to comment on visiting team reports.

Visiting team members are furnished with extensive background material, including the institutions’ most recent FISAP report, IPEDS documents, student lists and the like. All of these appear in the Visitor’s Resource Pack prepared in the AARTS office for each site visit. Visitors have found the previous site visit report to be extremely helpful in placing the changes the school has undergone into perspective.

Documentation:
Handbook, p.47 [Exhibit 1]
Association Resource, pp. 6-14 [Exhibit 5]
Section III(k)(2) of the agency’s handbook stresses that all standards, policies, and procedures are fairly and uniformly applied [Exhibit 1]. The agency accomplishes consistent treatment of institutions through a combination of staff guidance, internal discussion, and extensive training. Staff are available to assist institutions undergoing the self-study process. Further, staff are present at both the site visit and Commission meeting to ensure that discussion and accreditation decisions are consistent and grounded in the agency’s standards. Lastly, the agency’s Association Resource document describes a training program to ensure the Commission, site visiting teams and appeal boards are all trained on the agency’s standards, policies, and procedures [Exhibit 5]. Training includes a discussion using examples of past site visit reports and meeting minutes demonstrating how site visit teams and Commissioners arrived at their decisions. Department staff notes that there have been no complaints submitted to the Department against AARTS for the inequitable application of standards during the recognition period. The agency stated to Department staff at the on-site file review conducted July 2022 that there have been no complaints received from institutions regarding inconsistent treatment of institutions. Lastly, Department staff reviewed Accreditation Commission Meeting Minutes for March 2021, June 2021, and February 2022. All minutes reflect that the Commission received all relevant documentation (i.e. self study, site visit report, background information) for the institutions considered at each meeting and the minutes reflect a standardized discussion and vote format.

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**Criteria: 602.18(b)(3)**

**Description of Criteria**
Bases decisions regarding accreditation and preaccreditation on the agency’s published standards and does not use as a negative factor the institution’s religious mission-based policies, decisions, and practices in the areas covered by §602.16(a)(1)(ii), (iii), (iv), (vi), and (vii) provided, however, that the agency may require that the institution’s or program’s curricula include all core components required by the agency;

Narrative:

The Visiting Team Report is prepared on a Standard by Standard basis and the Accreditation Commission, in its evaluation of a school, does so on the basis of standards.

The fact that our community of schools is a relatively small one also helps ensure that standards will be applied consistently: any unreasonable or unequal application of standards would elicit wide-spread and swift response. The presence on the Accreditation Commission of highly respected members with many years of service is also reassuring.

The Training Program (Association Resource [Exhibit 5], pages 6-14] has proven to be very effective in this respect as well.

It goes without saying that AARTS institutions’ religious mission based policies, decisions and practices, are not a negative factor in the decision making process.

Documentation:
Association Resource, pages 6-14 [Exhibit 5]

Document(s) for this Section

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Analyst Worksheet- Narrative

Analyst Review Status:
Meets the requirements of this section

Analyst Remarks to Narrative:

As previously noted, AARTS consistently incorporates its published standards and
expectations throughout the agency’s corresponding policies, guidance and training. In addition, the institutions seeking accreditation or preaccreditation base their self-studies on the AARTS standards; the agency’s on-site teams conduct their evaluations utilizing the agency’s published standards; and the agency’s decision-makers (the Commission) cite any issues with an institution in accordance with the agency’s published standards. The documentation provided by the agency provides consistent evidence that AARTS bases its decisions on its published standards. As noted by the agency, the institutions’ religious mission is not a negative factor considered when reviewing the areas covered by §602.16(a)(1)(ii), (iii), (iv), (vi), and (vii) because all AARTS accredited institutions have a religious mission.

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Analyst Worksheet - Response

Analyst Review Status:

Not Reviewed

Criteria: 602.18(b)(4)

Description of Criteria

(4) Has a reasonable basis for determining that the information the agency relies on for making accrediting decisions is accurate;

Narrative:

For Each School Under Consideration, Accreditation Commission members are furnished with:

? Summary Sheet (facts, accreditation history, figures – taken from the Resource Pack that had been sent to Site Visitors
? Visiting Team Report
? Monitoring/Oversight/Compliance Report
? Action Sheet (Sample copy is attached)

The very nature of the site visit provides a reasonable basis for determining that the information reaching the Accreditation Commission is accurate. Visitors meet with faculty, students, and Board members throughout the visit and the interviews, conversations, and questioning probe deeply into the reality of the school being
visited.

The Members of the Accreditation Commission, well prior to the meeting, had received a copy of the Self Study and certified audit, so that there is a complete package of material to enable members to arrive at a complete, coherent, and accurate picture of the institution.

Also relevant is the fact that the total universe of AARTS accredited schools is relatively small. Most of the institutions are familiar to staff and to some of the members of the Commission because of the number of recognition cycles the school has gone through as well as because of the annual monitoring visits that have taken place.

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**Analyst Worksheet- Narrative**

**Analyst Review Status:**

Does not meet the requirements of this section

**Staff Determination:**

The agency must provide a copy of the supporting documentation provided to the Commission about each institution referenced in its narrative but not included as exhibits. Specifically, the agency must provide examples of summary sheets representing the accreditation history of the institution, monitoring/oversight/compliance reports and action sheets.

**Analyst Remarks to Narrative:**

The agency has a reasonable basis for determining that the information it relies on is accurate because it provides the Commission with ample materials and background information about each institution the Commission reviews for an accrediting decision. In addition to the self-study and site visit report, the Commission is provided with a resource pack that includes a summary sheet representing the accreditation history of the institution, monitoring/oversight/compliance report and an action sheet. Although discussed in the narrative, the agency did not provide a copy of these materials as supporting documentation; however, Department staff did review examples of these materials during the on-site file review conducted during 2022. Nevertheless, the agency must upload a sample of each of these materials in its response to the draft analysis.
In addition, site visitors follow a rigorous process for obtaining necessary information and for verifying its accuracy through cross-checking existing records and interviewing numerous parties in different situations. Site visitors present their initial findings to the institution while on-site. This provides for the first opportunity for the institution to ensure that the team has accurate information. The institution may also provide comment on the initial draft site visit report to ensure that the information is accurate before it goes to the Accreditation Commission for an accreditation decision.

Lastly, the agency notes the small number of AARTS accredited schools and their long history lend themselves to a certain level of familiarity with Commissioners and the agency.

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Response:

Requisite documents are being submitted together with an apology for having failed to do so originally.

Analyst Worksheet - Response

Analyst Review Status:
Meets the requirements of this section

Analyst Remarks to Response

In response to the draft analysis, the agency provided the requested documents. Specifically, the agency provided an example of a resource pack that includes a summary sheet, monitoring/oversight/compliance report (M/O/C) and an action sheet for an institution. The agency redacted the summary sheet and M/O/C/ report; therefore, Department staff could not determine if they were for the same institution. In addition, the action sheet was blank. The agency provided additional details about these documents in an email dated 3/23/23 [Exhibit 54]:

"The Action Sheet is described in the Accreditation Commission Protocol as “an outgrowth of materials used at Accreditation Commission meetings, refashioned and expanded to adapt to expanding oversight responsibilities. It is intended to help accreditation members keep track of salient points in each area that he may want to bring to the attention of his peers and/or take notes for his own records."
These sheets remain with the members of the Accreditation Commission. They are neither collected nor kept in our files. All the information that one might want to put into the Action Sheet is included in the Visiting Team Report, Resource Manual, and the Monitoring/Oversight/Compliance document.

In a word, the Action Sheet (actually sheets) is a convenience which Accreditation Commission members may or may not want to use for their own purposes."

Exhibits 4 and 5 are for the same institution."

As previously discussed in the draft analysis, this information provides the Commission with ample information about each institution and provides a reasonable basis for determining that the information it relies on is accurate.

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<td>(5) Provides the institution or program with a detailed written report that clearly identifies any deficiencies in the institution's or program's compliance with the agency's standards; and</td>
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<td>The visiting team report is integral to the decision letter sent each school after an Accreditation Commission action.</td>
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written report after the site visit. The report records the site team’s observations and assessments regarding compliance with each of AARTS standards. In addition, guidance provided to site teams instructs evaluation team members on the differences between strengths, weaknesses, suggestions, and recommendations. Although it is clear the agency’s policies and procedures require a detailed written report, it should be noted that the site visit report and decision letter included in the petition [Exhibits 39 and 40 included in sections 602.16(a)(1) and 602.17(e)] contained no deficiencies so it was not possible for Department staff to assess how clearly deficiencies are typically identified in the agency’s detailed written reports. However, Department staff reviewed numerous examples of site visit reports during the on-site file review conducted during July 2022, including for three institutions selected by the Department. Department staff note that when there were deficiencies, the site team report clearly stated its recommendations under the appropriate standard. In addition, the Accreditation Commission meeting minutes enumerate the site team recommendations for each institution reviewed.

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Analyst Worksheet - Response

Analyst Review Status:
Not Reviewed

Criteria: 602.18(c)

Description of Criteria

(c) Nothing in this part prohibits an agency, when special circumstances exist, to include innovative program delivery approaches or, when an undue hardship on students occurs, from applying equivalent written standards, policies, and procedures that provide alternative means of satisfying one or more of the requirements set forth in 34 CFR 602.16, 602.17, 602.19, 602.20, 602.22, and 602.24, as compared with written standards, policies, and procedures the agency ordinarily applies, if—

(1) The alternative standards, policies, and procedures, and the selection of institutions or programs to which they will be applied, are approved by the agency's decision-making body and otherwise meet the intent of the agency's expectations and requirements;
(2) The agency sets and applies equivalent goals and metrics for assessing the performance of institutions or programs;

(3) The agency’s process for establishing and applying the alternative standards, policies, and procedures is set forth in its published accreditation manuals; and

(4) The agency requires institutions or programs seeking the application of alternative standards to demonstrate the need for an alternative assessment approach, that students will receive equivalent benefit, and that students will not be harmed through such application.

Narrative:

The Standards of the Association reflect the fact that Talmudic and Rabbinic education must be delivered in a traditional fashion which stresses person to person interaction with a faculty member scholar, extensive interaction on a one to one basis with peers and a teaching/learning approach in which assessment is integral to growth and development.

Even during the months long lockdown that all schools experienced, the education at a distance which our schools instituted stressed the one to one interaction between students and faculty and the extensive student pairs study and preparation.

Neither the organization nor any of its accredited schools have explored alternate standards, policies and procedures but there is provision for the assessment of the background of an individual applicant who might have acquired sufficient knowledge and background on his own.

The manner in which AARTS schools adapted virtually seamlessly to the strictures imposed by Covid-19 is illustrative of the importance of postsecondary education to our community and the efforts made to ensure its effective continuation. As part of this Exhibit [Exhibit 45] we are enclosing a report from an AARTS accredited school describing the approach it used to ensure that its educational program continue. This report was distributed by the AARTS office to every AARTS accredited institution, many of which used this example as a basis for their own work. There were several other similarly innovative and effective approaches used as well.

Documentation:
AARTS Addresses Covid-19 [Exhibit 45]
The agency states in its narrative that neither AARTS nor its institutions have explored alternative standards; however, during COVID-19 the agency has provided information and guidance on flexibilities available to its institutions to continue teaching [Exhibit 45]. The exhibit, “AARTS addresses COVID-19,” describes certain modifications made necessary by the pandemic. The document is primarily concerned with how AARTS will monitor its accredited institutions during the pandemic emergency. The document stresses its accredited institutions continue to offer a “standard program” accredited by AARTS and needs no approval. Therefore, it does not appear that AARTS has adopted alternative standards as described by this criterion because the information in the agency’s narrative and Exhibit 45 do not meet the requirements under 602.18(c)(1)-(4).

List of Document(s) Uploaded by Analyst - Narrative

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Analyst Worksheet - Response

Analyst Review Status:
Not Reviewed

Criteria: 602.18(d)

Description of Criteria

(d) Nothing in this part prohibits an agency from permitting the institution or program to be out of compliance with one or more of its standards, policies, and procedures adopted in satisfaction of §§602.16, 602.17, 602.19, 602.20, 602.22, and 602.24 for a period of time,
as determined by the agency annually, not to exceed three years unless the agency determines there is good cause to extend the period of time, and if—

(1) The agency and the institution or program can show that the circumstances requiring the period of noncompliance are beyond the institution's or program's control, such as—

   (i) A natural disaster or other catastrophic event significantly impacting an institution's or program's operations;

   (ii) Accepting students from another institution that is implementing a teach-out or closing;

   (iii) Significant and documented local or national economic changes, such as an economic recession or closure of a large local employer;

   (iv) Changes relating to State licensure requirements;

   (v) The normal application of the agency's standards creates an undue hardship on students; or

   (vi) Instructors who do not meet the agency's typical faculty standards, but who are otherwise qualified by education or work experience, to teach courses within a dual or concurrent enrollment program, as defined in 20 U.S.C. 7801, or career and technical education courses;

(2) The grant of the period of noncompliance is approved by the agency's decision-making body;

(3) The agency projects that the institution or program has the resources necessary to achieve compliance with the standard, policy, or procedure postponed within the time allotted; and

(4) The institution or program demonstrates to the satisfaction of the agency that the period of noncompliance will not—

   (i) Contribute to the cost of the program to the student without the student's consent;

   (ii) Create any undue hardship on, or harm to, students; or

   (iii) Compromise the program's academic quality.

Narrative:
The Accreditation Commission has provided good cause extensions in accordance with Department regulation 602.20(a), as well as due to the COVID-19 national emergency, as permitted by the Department’s COVID-19 regulatory flexibilities dated March 17, 2020 and Federal Register notice dated April 3, 2020. To the extent that the Accreditation Commission grants good cause extensions pursuant to 602.18, we will consider the factors outlined in 602.18.

As per the AARTS Handbook, page 51 [Exhibit 1]:

The Commission may grant an institution found not to be in compliance with its standards, up to two years to bring itself into compliance.

The Accreditation Commission has yet to consider whether to extend this period to the three year limit now allowed by 602.18(d).

Exhibit 46 is a sample good cause extension occasioned by the Covid-19 circumstances that the Accreditation Commission approved.

Good cause extensions must be approved by the Accreditation Commission [Exhibit 47].

Page 16 of the Handbook [Exhibit 1] reads:

Good cause extensions will not cause any increase of cost to the students without the students consent, will not create any undue harm to students and will not compromise the programs academic quality.

Documentation:
Handbook, p. 16, 51_ [Exhibit 1]
Sample Good Cause Extension [Exhibit 46]
Excerpt of Accreditation Commission Good Cause Extension Approval [Exhibit 47]

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Analyst Worksheet- Narrative

**Analyst Review Status:**

Meets the requirements of this section

**Analyst Remarks to Narrative:**

The agency states in its narrative that it has yet to consider whether to adopt the extended period of non-compliance as described at section 602.18(d). The agency further states that institutions have up to two years to come into compliance with the agency’s standards unless granted a period of good cause by the Commission. The agency provided an example of a period of good cause granted by the Commission; however, this action is based on the agency’s standards related to section 602.20(a) where it will be discussed further.

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**Analyst Worksheet - Response**

**Analyst Review Status:**

Not Reviewed

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**Criteria: 602.19(a)**

**Description of Criteria**

(a) The agency must reevaluate, at regularly established intervals, the institutions or programs it has accredited or preaccredited.

**Narrative:**

Page 34 of the Handbook [Exhibit 1] reads:

The accreditation status of a school is valid for a period up to ten (10) years in the case of a school deemed exemplary. The usual period of accreditation is seven years.
Prior to the end of this period, the school must submit another self-study in conjunction with another comprehensive site visit; Subsequent to this visit, a favorable decision must be rendered by the Commission in order for the school to retain its accreditation status.

This is further clarified on page 49:

The Accreditation Commission is empowered to grant or deny a petition for recognition or for renewal of recognition, to award a status with conditions, to award accreditation status for up to ten years, candidate status for up to five years, and correspondent status for up to two years.

With the addition of the following note:

37. Clarification: The usual period of recognition is seven years. A school judged to be exemplary can be awarded up to ten years, while a school which is a year late in submitting an acceptable Self Study and audit in conjunction with a comprehensive site visit, will ordinarily be awarded three years of recognition.

Documentation:
Handbook, p. 34, 49 [Exhibit 1]

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Analyst Worksheet- Narrative

Analyst Review Status:

Meets the requirements of this section

Analyst Remarks to Narrative:

Section III.(f) of the agency’s Handbook states that accredited institutions seeking renewal of recognition must be reevaluated before the end of the accreditation period, which can last a maximum of ten years for an institution judged to be exemplary by the Accreditation Commission. Otherwise, the typical period of accreditation is seven years [Exhibit 1].
As discussed elsewhere, preaccreditation can only be granted for a maximum period of five years total in any combination of the agency’s two preaccreditation categories. In addition, the decision letter submitted with the petition supports that the agency follows its reevaluation process, which includes a self-study and an on-site evaluation [Exhibits 38-40]. Lastly, Department staff reviewed numerous examples, including for three institutions selected by staff for the on-site file review conducted July 2022. Each example demonstrated the agency reevaluates the institutions it accredits or preaccredits at regularly established intervals.

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**Analyst Review Status:**

Does not meet the requirements of this section

**Staff Determination:**

The agency does not meet the requirements of this section. The agency must submit additional information and documentation that demonstrates it consistently reevaluates, at regularly established intervals, the institutions or programs it accredits or preaccredits.

**Analyst Remarks to Response**

The agency was found in compliance with this criterion in the draft as discussed above. However, additional information received during the final analysis for section 602.25(f) raised concerns relevant to this section.

The agency wrote in its narrative to 602.25(f):

“Since May 30, 2018 there were several instances of schools whose accreditation status lapsed because the documentation necessary for renewal of recognition was either late or insufficient. This action is taken by the Commission, with right of appeal. The schools is given 30 days to lodge an appeal (as per Exhibit 63). Subsequently schools have 14 days before an appeal panel is selected. In every one of the four situations the satisfactory documents were submitted and the termination was declared moot.”

In the draft analysis, Department staff requested additional information from the
agency describing under what policy or authority the Commission found its original determination to terminate the four institution's accreditation “moot.” The agency responded that its Handbook states “The Accreditation Commission can, at its discretion, rescind an adverse action in circumstances where it becomes evident that an Appeal Board would rule to reverse.” The agency did not provide additional information or documentation to demonstrate how this policy was applied to the four institutions described above. Department staff discussed the issue with the agency in a telephone conversation on 4/27/23. Based on that call, the agency provided additional information and provided a written timeline for the four schools whose accreditation lapsed [Exhibit 51]. In each case, the agency notes the institution's accreditation lapsed on a specific date. The next status is “dropped with right of appeal,” which occurred 2-4 weeks after the lapse date. Based on the agency's narrative and manual [Exhibit 1, page 14] this appears to be an official action taken by the Commission and subject to appeal. Three of the four schools were then sent a “moot letter” presumably because the institution submitted the satisfactory documents as stated by the agency above. The fourth institution submitted an official appeal prior to the agency sending a “moot letter.” Department staff notes this fourth institution, “School C” had its accreditation extended due to COVID. However, Department staff wants the agency to clearly understand that in all cases, once an institution's accreditation lapses, the institution is no longer accredited. It is not an official action by the decision making body nor is it one subject to appeal because it is not an adverse action (see section 602.25(f) for further discussion). Furthermore, an institution who lets its accreditation lapse cannot have that accreditation reinstated by the Commission, as the agency describes in a footnote on page 14 of its manual, without first applying for accreditation. Reinstating the accreditation status of an institution after it lapsed because the institution submitted the documentation late is an extension of accreditation beyond the agency's normal timeline and therefore demonstrates that the agency does not reevaluate, at regularly established intervals, the institutions or programs it has accredited or preaccredited.

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Criteria: 602.19(b)

Description of Criteria

(b) The agency must demonstrate it has, and effectively applies, monitoring and evaluation approaches that enable the agency to identify problems with an institution's or program's
continued compliance with agency standards and that take into account institutional or program strengths and stability. These approaches must include periodic reports, and collection and analysis of key data and indicators, identified by the agency, including, but not limited to, fiscal information and measures of student achievement, consistent with the provisions of §602.16(g). This provision does not require institutions or programs to provide annual reports on each specific accreditation criterion.

Narrative:

Pages 99-104 of the Handbook [Exhibit 1] describes in complete detail the characteristics of the AARTS monitoring initiative. Briefly, schools submit on an annual basis information regarding students, finances, changes in staff, in policies, and procedures as per the Institutional Survey [Exhibit 48]. This survey is reviewed by staff for completeness and summarized with findings for the Monitoring/Oversight/Compliance Report [Exhibit 49]. Parallel to this collection of information, there is a program of onsite visits described in detail in the Monitoring Visit Protocol [Exhibit 50]. Included in this activity are annual visits to candidate and correspondent status schools, the follow up visits within 22 months of an accreditation action, the visit to schools scheduled two years prior to the lapsed date of their accreditation, as well as "within 6 months visits to additional locations."

As appropriate, relevant information, particularly about student achievement, and findings gathered from the monitoring visits are also entered in the Monitoring/Oversight/Compliance document. This latter document is in turn shared with site visitors prior to a formal compliance site visit and with members of the Accreditation Commission prior to their consideration of a petition for renewal of recognition.

Analysis of the financials submitted are carried out by Mr. David Singer, CPA who consults on this matter with the organization.

What was a description of an experimental intensive monitoring system eleven years ago has become an integral part of AARTS operations. Both the surveys and the physical presence of a monitoring specialist at each school each year is well established and to a great extent viewed as helpful by AARTS institutions. We are well aware that our monitoring initiative is burdensome to institutions. It is burdensome to AARTS as well, with a significant part of our budget devoted to continued oversight and interaction with schools.

We believe there is no better way to detect problems at an institution then to have someone physically visit the school at least once a year. Changes in enrollment, in the physical plant, in the quality of the program, in the focus and mission of the school, and a host of other features, will all come to the attention as part of this kind of direct oversight.
Interestingly, a school whose documents are late or which seemingly cannot arrange at a mutually convenient time for a monitoring visit, comes to special notice of the Director who will then make some personal inquiries.

The Commission recognizes that the ability to devote such close attention is a luxury, possible only because of the relatively small size of our Association. We are aiming to visit every school every year and had made significant progress in this direction until it was disrupted by the period between March 2020 and April 2021.

For the foreseeable future we do not expect the size of the Association to grow precipitously and that the policies, procedures and implementation which have proven so effective and helpful will not change.

Documentation:
Handbook, pages 99-104 [Exhibit 1]
Institutional Survey [Exhibit 48]
Monitoring/Oversight/Compliance Report [Exhibit 49]
Monitoring Visit Protocol [Exhibit 50]

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Analyst Worksheet- Narrative

**Analyst Review Status:**

Does not meet the requirements of this section

**Staff Determination:**

The agency must provide additional narrative and supporting documentation that demonstrates it reviews and approves the information collected as part of its annual monitoring and takes appropriate action to remedy deficiencies, as applicable for all
accredited institutions.

Analyst Remarks to Narrative:

Section V(e), Monitoring, of the agency’s handbook addresses the requirements of this criterion [Exhibit 1]. AARTS sends a letter each year requesting information related to student lists, financial data, and a completed Institutional Survey. The Institutional Survey captures changes that might have a material impact on the functioning of the institution or its compliance with AARTS’ standards, including standard 0, outcomes [Exhibit 48]. Preceding an upcoming site visit, the information received from the institution related to the above items is compiled into a Monitoring/Oversight/Compliance report of the institution [Exhibit 49] for the benefit of the site visiting team. Section V(e) of the agency’s handbook also states that the agency has adopted a goal to visit every institution annually as part of its monitoring plan. However, the agency stated to Department staff during the on-site file review conducted July 2022 that not all institutions are visited every year, especially during the COVID pandemic. When the agency does conduct a periodic visit to an institution, the focus of the visit is on standards relating to financial, administrative, and educational compliance with the agency’s standards with a special focus on student achievement [Exhibit 50]. Specific to student achievement, the agency explores student character growth, intellectual development, and acquisition of scholarship skills. The agency asks about senior class activity to include publications and cap stone exercises. The agency also examines the latest data available upon which the institution’s quantitative measures are based. The agency will meet with students to ascertain student achievement with respect to learning. The agency also notes that it consults with a CPA who assists in the annual review of financials submitted by institutions.

Department staff reviewed 7 institutions’ annual monitoring documentation at the on-site file review. Each file contained the Institutional Survey Instrument, faculty resumes, students lists, financial information and the institution’s most recent catalog. Each folder also contained a letter from AARTS’ CPA confirming he reviewed the financial information. However, there was no evidence in the file that the agency reviewed or acted upon the information in the Institutional Survey or other information collected as part of the annual monitoring process. In addition, large sections of the Institutional Survey were blank. The agency advised Department staff that blank responses indicates there has been no change from the preceding year. In the absence of any clear guidance or instruction from the agency to institutions, Department staff encourages the agency to instruct its institutions to answer every question, even if it is just a statement by the institution that there have been no
changes in each area. Lastly, the agency stated at the file review that the Commission would only review those annual monitoring reports that demonstrate significant concerns or areas of non-compliance with the agency’s standards; however, as noted above, without documentation of such review it is unclear how the agency takes appropriate action to remedy deficiencies, as applicable.

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Response:

We will hire an additional staff member to carry out the recommended steps. Henceforth, institutions will be instructed to answer every question even when there have been no changes (Exhibit 81).

Finally, we include a sample copy of a M/O/C (Exhibit 67) which was prepared for members of a site visiting team. This document, based on the Institutional Survey, highlights findings which direct site visitors to issues needing attention during the site visit.

**Exhibit:**

Exhibit 81: Monitoring Documents Memo

Exhibit 67: Sample MOC

**Analyst Worksheet - Response**

**Analyst Review Status:**

Does not meet the requirements of this section

**Staff Determination:**

The agency does not meet the requirements of this section. The agency must demonstrate it reviews and approves the information collected as part of its annual monitoring and takes appropriate action to remedy deficiencies, as applicable for all accredited institutions.
In response to the draft analysis, the agency states it will hire an additional person to “carry out the recommended steps.” It is not clear what steps to which the agency refers; however, Department staff notes that the draft analysis requested the agency “demonstrates it reviews and approves the information collected as part of its annual monitoring and takes appropriate action to remedy deficiencies, as applicable for all accredited institutions.” The agency provided documentation that it has provided guidance to its accredited institutions informing them they must answer all questions on the annual survey [Exhibit 81]. The agency also provided an example of a Monitoring/Oversight/Compliance (M/O/C) report, which incorporates information from the annual institutional survey and distributed to a site team prior to a visit. As discussed in the draft analysis the M/O/C report is only prepared for those schools undergoing a site visit and therefore only demonstrates review of its annual monitoring for schools the agency intends to visit. The agency must provide additional narrative and supporting documentation that demonstrates it reviews and approves the information collected as part of its annual monitoring and takes appropriate action to remedy deficiencies for all accredited institutions, as applicable.

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**Criteria: 602.19(c)**

**Description of Criteria**

(c) Each agency must monitor overall growth of the institutions or programs it accredits and, at least annually, collect head-count enrollment data from those institutions or programs.

**Narrative:**

Page 13 of the Institutional Survey [Exhibit 48] asks for the current headcount and enrollment which is recorded in a space adjacent to the previous year's enrollment. This information makes it possible to immediately address the concerns of 602.19(c).

**Documentation:**

Institutional Survey, p. 13 [Exhibit 48]
As discussed above, the agency requires institutions to annually submit an Institutional Survey. The survey requests annual headcount information under the General Oversight section on page 13. The survey lists the total enrollment number on record with the agency for undergraduate and graduate populations for the previous year and requires the institution to report annual headcount for the current year [Exhibit 48]. As noted in the previous section, Department staff reviewed the information collected as part of the agency’s annual monitoring report at the on-site file review. The Institutional Survey and the student lists reviewed by Department staff capture annual headcount information as required by this criterion.

Criteria: 602.19(d)

(d) Institutional accrediting agencies must monitor the growth of programs at institutions experiencing significant enrollment growth, as reasonably defined by the agency.

Narrative:

As noted above, the data submitted in the Institutional Survey, page 13, [Exhibit 48],

Documentation:
Institutional Survey, p.13 [Exhibit 48]
Handbook, p. 73 [Exhibit 1]

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Analyst Worksheet- Narrative

**Analyst Review Status:**
Meets the requirements of this section

**Analyst Remarks to Narrative:**

Section IV(k)(i) of the agency’s handbook addresses significant growth. Specifically, the policy states that enrollment growth of 25% or higher constitutes significant growth. As discussed above, enrollment headcount information is collected each year as part of the Institutional Survey. Growth above 25% results in a clarifying conversation by Commission staff with the school to ascertain any special circumstances and if the growth is a trend or a one-time occurrence. The conversation also focuses on whether the growth might cause the school to be out of compliance with AARTS’ standards. If it is determined the growth will be ongoing then the institution is placed on the Commission’s agenda to determine whether the institution needs an informal visit, follow up report, or a comprehensive visit [Exhibit 1]. The agency stated to Department staff at the on-site review conducted during July 2022 and confirmed via a review of its files that it has no instances during the recognition period of institutions meeting the agency’s significant growth policy. Department staff further confirmed that none of the seven institutions reviewed as part of the file review had significant growth (i.e. over 25%) year over year.

**List of Document(s) Uploaded by Analyst - Narrative**
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**Analyst Worksheet - Response**
Criteria: 602.20(a)

Description of Criteria

(a) If the agency's review of an institution or program under any standard indicates that the institution or program is not in compliance with that standard, the agency must—

(1) Follow its written policy for notifying the institution or program of the finding of noncompliance;

(2) Provide the institution or program with a written timeline for coming into compliance that is reasonable, as determined by the agency's decision-making body, based on the nature of the finding, the stated mission, and educational objectives of the institution or program. The timeline may include intermediate checkpoints on the way to full compliance and must not exceed the lesser of four years or 150 percent of the—

   (i) Length of the program in the case of a programmatic accrediting agency; or

   (ii) Length of the longest program at the institution in the case of an institutional accrediting agency;

(3) Follow its written policies and procedures for granting a good cause extension that may exceed the standard timeframe described in paragraph (a)(2) of this section when such an extension is determined by the agency to be warranted; and

(4) Have a written policy to evaluate and approve or disapprove monitoring or compliance reports it requires, provide ongoing monitoring, if warranted, and evaluate an institution's or program's progress in resolving the finding of noncompliance.

Narrative:

602.20(a)(1)

The visiting team report contains within it all findings related to non-compliance with a standard and is shared with the institution both prior to Accreditation action, as well as referred to as integral to the decision letter.

Documentation:
Handbook, pp. 45-46, 49-50 [Exhibit 1]
602.20(a)(2)

Institutions are always granted up to two years to address findings and recommendations as included in the visiting team report, except for matters relating to safety. The Accreditation Commission has required institutions to act within much shorter times in matters relating to safety.

The Accreditation Commission has yet to consider whether to extend this period to the four year limit now allowed by 602.20(a)(2)(ii).

602.20(a)(3)

Where the Commission has concluded that there is good cause,

The Commission may grant an institution found not to be in compliance with its standards, up to two years to bring itself into compliance. The Commission must take adverse action against an institution that does not bring itself into compliance within this period of time, unless the Commission extends, for good cause, the period for achieving compliance.

(Handbook, page 51, [Exhibit 1])

Good cause circumstances outlined in the Handbook are listed on page 16 of the Handbook.

Documentation:

Handbook, pp. 16, 51 [Exhibit 1]

602.20(a)(4)

Page 51 in the Handbook [Exhibit 1] reads:

- The Commission will evaluate and approve or disapprove monitoring or compliance reports it requires, provide ongoing monitoring, if warranted, and evaluate an institution's progress in resolving the finding of noncompliance.

Documentation:

Handbook, p. 51 [Exhibit 1]
AARTS enforcement timelines and actions are primarily governed by Sections III(m), Due Process, of its Handbook [Exhibit 1]. Section III(m) states that the Commission will provide a detailed written report specifying any deficiencies identified at an institution reviewed by the agency. Section III(m) further states that the Commission may grant an institution found out of compliance with its standards a period of up to two years to bring itself into compliance. Department staff notes that the maximum timeframe for programs to come into compliance is stricter than those now allowed by this criterion, which became effective July 1, 2020. Nevertheless, the timeframes remain in compliance with the Department’s regulation. If the institution does not bring itself into compliance within the maximum two-year period, the Commission may extend for good cause the period for achieving compliance, per Section II(d) of the agency’s Handbook. The policy states that the Commission will not extend the two-year period to come into compliance under ordinary circumstances; however, under rare and exceptional circumstances the Commission may grant an extension for good cause for a period of no longer than six months. Further, under rare circumstances, the Commission may grant an additional six-month extension for good cause plus an additional period lasting until the next Accreditation Commission meeting. The agency’s policy lists some of the conditions that may warrant a good cause extension on page 16 of its Handbook. The agency monitors institutions on good cause to ensure compliance with the standards. Section III(m) states that the Commission will evaluate and approve or disapprove monitoring or compliance reports it requires, provide ongoing monitoring, if warranted, and evaluate an institution’s progress in resolving the finding of noncompliance. The agency did not provide any examples documenting the application of its procedures under this criterion. This is further discussed in the next section, 602.20(b-d).
**Criteria: 602.20(b-d)**

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<td>(b) Notwithstanding paragraph (a) of this section, the agency must have a policy for taking an immediate adverse action, and take such action, when the agency has determined that such action is warranted.</td>
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<td>(c) If the institution or program does not bring itself into compliance within the period specified in paragraph (a) of this section, the agency must take adverse action against the institution or program, but may maintain the institution's or program's accreditation or preaccreditation until the institution or program has had reasonable time to complete the activities in its teach-out plan or to fulfill the obligations of any teach-out agreement to assist students in transferring or completing their programs.</td>
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<td>(d) An agency that accredits institutions may limit the adverse or other action to particular programs that are offered by the institution or to particular additional locations of an institution, without necessarily taking action against the entire institution and all of its programs, provided the noncompliance was limited to that particular program or location.</td>
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**Narrative:**

602.20(b)

Page 15 in the Handbook [Exhibit 1] reads:

If circumstances warrant, the Commission is free to initiate immediate adverse action against the school. Similarly, if the Commission feels the institution can bring itself into compliance within two years, it may grant the school up to two years to do so.

If the school does not bring itself into compliance within this time, the Commission will take immediate adverse action. The Commission may also, under the circumstances noted below, grant an extension for good cause.

**Documentation:**

Handbook, p. 15 [Exhibit 1]

602.20(c)
No change in accreditation status shall take place pending disposition of the appeal. Similarly, a school subject to an adverse action will retain its accreditation or preaccreditation status until the school has had reasonable time to complete the activities in its teach-out plan or to fulfill its obligations of a teach-out agreement.

Documentation:
Handbook, p. 52 [Exhibit 1]

602.20(d)
Page 51 in the Handbook [Exhibit 1] reads:

Adverse actions relating to noncompliance at a specific location can be limited to that location alone.

Documentation:
Handbook, p. 51 [Exhibit 1]

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Analyst Worksheet- Narrative

**Analyst Review Status:**

Does not meet the requirements of this section

**Staff Determination:**

The agency must provide a list of institutions or programs against which the agency has taken a negative action during the recognition period, if applicable, and if so, the action taken, the date the action was taken, communication with the institution or program, including the written timeline for coming into compliance, and any resolution or subsequent final action.

**Analyst Remarks to Narrative:**
The agency defines adverse action as “the denial, withdrawal, revocation, or termination of accreditation and preaccreditation, and is initiated after the institutional appeal, if any, is complete” [Exhibit 1, page 15]. Section III(m) of the agency’s Handbook states that the Commission must take an adverse action against an institution that does not bring itself into compliance with the agency’s standard(s) within the maximum period discussed in section 602.20(a) unless the agency extends the period for good cause. The policy further states that any adverse action shall be accompanied by a written decision letter that sets forth the action and reasons for the action, including specific deficiencies identified at the institution. The agency’s policy specifies that an institution will retain its accreditation or preaccreditation status until the institution has had reasonable time to complete the activities in its teach-out plan or to fulfill its obligations in a teach-out agreement. Lastly, adverse actions relating to non-compliance at a specific location may be limited to that location alone.

Department staff notes the agency did not provide a full list of institutions or programs against which the agency has taken an adverse or negative action during the recognition period as required by Accreditation Handbook. The agency stated to Department staff at the on-site file review conducted during July 2022 that it has not taken any negative or adverse actions during the recognition period; however, the agency must definitively state so in its response to the draft analysis. As discussed in section 602.18(d), the agency provided an example of an institution given a one-year period of good cause. However, as noted above the agency stated it has not taken any negative actions during the recognition period. Further, the documentation accompanying the good cause [Exhibits 46 and 47] does not indicate it was actually a good cause extension as Commission meeting minutes state the institution remains in compliance with AARTS standards. The agency must clarify this situation and reconfirm whether it has taken any enforcement actions against its accredited institutions.

List of Document(s) Uploaded by Analyst - Narrative

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Response:

The AARTS Accreditation Commission did not take any negative or adverse actions during the recognition period. We do not view a good cause extension of recognition as a negative action. Rather it is usually a recognition of an institution fully compliant with AARTS standards which has come across a situation deserving of a period of good cause.
Analyst Remarks to Response

In response to the draft analysis the agency attests it has not taken any negative or adverse actions as described by this criterion and its own Handbook. The extension of good cause granted to the institution in exhibits 46 and 47 in section 602.18(d) was not due to non-compliance with the agency's standards. Rather, it was a one year extension granted to the institution's accredited status due to the impact of the COVID-19 pandemic and allowed under Departmental guidance “RE: Information for Accrediting Agencies Regarding Temporary Flexibilities Provided to Coronavirus Impacted Institutions or Accrediting Agencies.” [Exhibit 55]

List of Document(s) Uploaded by Analyst - Response

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Criteria: 602.20(e)

Description of Criteria

(e) All adverse actions taken under this subpart are subject to the arbitration requirements in 20 U.S.C. 1099b(e).

Note: 20 U.S.C. 1099b(e) Initial Arbitration Rule. – The Secretary may not recognize the accreditation of any institution of higher education unless the institution of higher education agrees to submit any dispute involving the final denial, withdrawal, or termination of accreditation to initial arbitration prior to any other legal action.

Narrative:

Page 55 in the Handbook [Exhibit 1] reads:

AARTS accredited institutions agree to submit any dispute involving the final denial, withdrawal or termination of accreditation to initial arbitration prior to any other legal action.

Documentation:
Handbook, p. 55 [Exhibit 1]
The agency must state whether any of its accredited institutions has engaged in initial arbitration and provide supporting documentation, as applicable.

**Analyst Remarks to Narrative:**

Section III(m) of the agency’s Handbook states that after the outcome of an appeal AARTS accredited institutions agree to submit any dispute involving the final denial, withdrawal, or termination of accreditation to initial arbitration prior to any other legal action. Although the agency’s policy is compliant with this criterion it did not indicate if any AARTS accredited institutions participated in arbitration or provide supporting documentation, as applicable.

**List of Document(s) Uploaded by Analyst - Narrative**

No files uploaded

Response:

None of the AARTS accredited institutions has engaged in initial arbitration.

**Analyst Worksheet - Response**

**Analyst Review Status:**

Meets the requirements of this section

**Analyst Remarks to Response**

In response to the draft analysis the agency attests that none of its accredited institutions engaged in initial arbitration during the current recognition period.
Criteria: 602.20(f-g)

Description of Criteria

(f) An agency is not responsible for enforcing requirements in 34 CFR 668.14, 668.15, 668.16, 668.41, or 668.46, but if, in the course of an agency’s work, it identifies instances or potential instances of noncompliance with any of these requirements, it must notify the Department.

(g) The Secretary may not require an agency to take action against an institution or program that does not participate in any title IV, HEA or other Federal program as a result of a requirement specified in this part.

Narrative:

602.20(f)

If in the course of the Accreditation Commission’s interaction with the school it identifies potential instances of noncompliance with 668.14 (Program Participation Agreement) it will notify the Department.

With respect to 668.15 (Factors of Financial Responsibility), although the Accreditation Commission is focused on financial responsibility and stability (as per Standard C ‘Finance’) the issues which are reviewed are not congruent with the elements of concern in 668.15. Should instances of noncompliance with the Department’s requirements come to the attention of the Commission notification will be sent to the Department.

With respect to 668.16 (Standards of Administrative Capability), the Accreditation Commission has standards relating to administrative capability (Standard I ‘Records and Recordkeeping’) but the focus is once again is not congruent with the requirements of the Department with respect to Title IV programs. Should instances of noncompliance with the Department’s requirements come to the attention of the Commission notification will be sent to the Department.

If in the course of the Accreditation Commission’s interaction with the school it identifies potential instances of noncompliance with 668.41 (Reporting and Disclosure of Information) it will notify the Department.

With respect to 668.46 (Institutional Security Policies and Crime Statistics), although
the Accreditation Commission is increasingly focused on safety and security, the specific concerns are not congruent with those mentioned in 668.46. At the same time, should instances of noncompliance with the Department’s requirements come to the attention of the Commission notification will be sent to the Department.

602.20(g)

All AARTS institutions participate in Title IV or other federal programs. Should there be a school which does not participate in any Title IV, HEA or other federal program the Accreditation Commission will not take action against such a school as a result of a requirements specified in 602.20(f).

**Document(s) for this Section**

No files uploaded

Analyst Worksheet- Narrative

**Analyst Review Status:**

Does not meet the requirements of this section

**Staff Determination:**

The agency must provide its policy demonstrating it would report any instances or potential instances of non-compliance with Parts 34 CFR 668 to the Department. The agency must submit further narrative indicating whether it has had cause to notify the Department of non-compliance with parts 34 CFR 668 and supporting documentation, as applicable.

**Analyst Remarks to Narrative:**

With respect to 602.20(g) the agency notes as it has elsewhere in the petition that all its accredited institutions participate in title IV, HEA funding and therefore 602.20(g) does not apply.

As it relates to 602.20(f), the agency states it would report any instances or potential instances of non-compliance with 34 CFR 668.14, 668.15, 668.16, 668.41, or 668.46 to the Department should it come to the attention of the Commission. However, the agency did not provide its policy to substantiate its narrative. In addition, the agency did not state whether it identified any instances of potential non-compliance with the listed regulations in 34 CFR 668 during the recognition period or provide supporting documentation demonstrating this information was reported to the Department, as
applicable.

Response:

Please see Handbook language (page 67):

*Should the Commission identify instances or potential instances of non compliance with 34 CFR 668.14, 668.15, 668.16, 668.41, or 668.46, it will notify the Department of Education.*

AARTS did not identify any instances of potential non-compliance with Department regulations during the recognition period.

Exhibit:

Exhibit 64: Updated Handbook, Page 67

Analyst Worksheet - Response

**Analyst Review Status:**

Meets the requirements of this section

**Analyst Remarks to Response**

In response to the draft analysis, the agency provided its policy demonstrating it would report any instances or potential instances of non-compliance with Parts 34 CFR 668 to the Department. In addition, the agency attests it did not identify any instances of potential non-compliance with Department regulations during the recognition period.

List of Document(s) Uploaded by Analyst - Response

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(a) The agency must maintain a comprehensive systematic program of review that involves all relevant constituencies and that demonstrates that its standards are adequate to evaluate the quality of the education or training provided by the institutions and programs it accredits and relevant to the educational or training needs of students.

(b) The agency determines the specific procedures it follows in evaluating its standards, but the agency must ensure that its program of review--

(1) Is comprehensive;

(2) Occurs at regular, yet reasonable, intervals or on an ongoing basis;

(3) Examines each of the agency's standards and the standards as a whole; and

(4) Involves all of the agency's relevant constituencies in the review and affords them a meaningful opportunity to provide input into the review.

Narrative:

There are two fundamental elements to our structured review of standards. First and foremost there is the Comprehensive (communitywide) Standards Conference which is held every five years. The last one was held on June 18, 2017, and we are submitting a complete package illustrating the process.

A letter dated May 26, 2017 [Exhibit 51] and an email to all institutions June 6, 2017 [Exhibit 52] reminding them to reach out to all communities of interest as we understand them. An attendance sheet is enclosed as Exhibit 53 (there were 7 additional sheets of signatures of participants).

The outcome of the meeting is described in the following paragraph:

The meeting had two components: there was a public review of every element of every standard within the AARTS Handbook and a much more intense discussion of the question as to whether AARTS would entertain a digital Self Study for at least some of the Standards. The audience was divided and there was sufficient opposition to prevent any formal recommendation from going forward.

At a subsequent discussion of the Accreditation Commission, the members of the Commission took note of the opposition and for the time being the proposal was tabled.
Another aspect of our review of standards is described in the Handbook [Exhibit 1] on pages 46, and reads, in part

Members of the institution’s academic community will be asked to complete our reliability/validity/relevance instrument. These responses will be tabulated with an eye to detecting the need for change in existing standards, and to make recommendations as necessary. The review of criteria and standards is a continuous one; the results of this ongoing process are placed before the membership at least once every five years for comprehensive reassessment and action.

All changes must take place in accordance with our published bylaws, and this means notice, comments, and meetings. But none of this can happen without the frank assessment of our standards that we hope you will provide.

Another element of our review of standards is the Reliability/Validity/Relevance Survey instrument, a section of which is included in the, Site Visitors Manual, pp.93-97 [Exhibit 3].

The survey instrument is distributed to schools immediately after a site visit, when schools are most highly attuned to changes or modifications that need to be made. The document is designed to gather input from nine separate categories: Administration, Faculty, Staff, Students, Alumni, Parents, Community Leaders, Board Members, and Site Visitors.

Each year’s data is gathered, and scored for presentation to the summer meeting of the Accreditation Commission. This enables members of the Commission to determine which elements of the Standards are viewed by the school communities as having the lowest reliability (i.e. can they be observed accurately), validity (i.e. are they important for teaching and learning) and relevance (i.e. do these elements have any relevance to a well-functioning postsecondary institution).

Discussion follows and recommendations are made for change, as appropriate. These changes are then sent for comment to all accredited institutions and non accredited institutions. The proposed changes are on the agenda of the next Annual Meeting for discussion and recommendation.

Only after this review process is complete does the Accreditation Commission take action to adopt.

Note: This is not a scientific survey, nor is it intended to be. Rather it provides a useful indicator of the thinking of the community.

The Accreditation Commission does not take precipitous action with respect to the standards; before anything is made permanent. The membership of the Association
(acting at the Annual Meeting) is invited to submit comments, modifications and suggestions.

A redline version of the change to our Standards is appended as Exhibit 54.


Documentation:
Handbook, pp. 46 [Exhibit 1]
Site Visitors Manual, p. 93-97 [Exhibit 3]
Memo to All Institutions Re Standards Conference 2017 [Exhibit 51]
June 6, 2017 Email to All Institutions [Exhibit 52]
Signature Sheet of Standards Conference 2017 [Exhibit 53]
Markup of Standards Change [Exhibit 54]

### Document(s) for this Section

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Analyst Worksheet- Narrative

**Analyst Review Status:**

Meets the requirements of this section

**Analyst Remarks to Narrative:**
AARTS’ narrative and Handbook describe a two-pronged approach to ensure that its systematic review of standards is regular and comprehensive [Exhibit 1, Section III(d)]. First, the agency utilizes its Reliability/Validity/Relevance Survey instrument for continuous evaluation of its standards as well as to inform the agency’s Comprehensive Standards Conference, which is held every five years. Page 46 of the Handbook states that the Reliability/Validity/Relevance Survey instrument is distributed to institutions and site team visitors after each site visit. Site visitors comment on the standards used to evaluate the institution including any standards the administration or faculty thought invalid or inappropriate. Members of the institution’s academic community complete the same survey and responses are tabulated to determine any changes that need to be made to existing standards. The agency included the survey instrument, which is found in its Site Visitor’s Manual [Exhibit 3].

Secondly, the agency embarks on a Comprehensive Standards Conference every five years. The most recent one occurred in June 2017. Previous comprehensive review of standards occurred in 2002, 2007, and 2012. Prior to the conference, the agency notifies communities of interest to include school administrators, faculty, staff, students, alumni, parents, community leaders, board members, and site visitors. The agency provided a narrative description of its most recent comprehensive review highlighting those areas that generated the most discussion. Any changes made by the Commission are subject to comments, modifications, and suggestions from the communities of interest prior to becoming final.

To demonstrate compliance with this criterion the agency provided the notification it sends to communities of interest prior to the Comprehensive Standards Conference [Exhibits 51 and 53] as well as a sign in sheet demonstrating a variety of interested community members attended the conference [Exhibit 53].

List of Document(s) Uploaded by Analyst - Narrative
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Analyst Worksheet - Response

Analyst Review Status:
Not Reviewed
Criteria: 602.21(c-d)

Description of Criteria

(c) If the agency determines, at any point during its systematic program of review, that it needs to make changes to its standards, the agency must initiate action within 12 months to make the changes and must complete that action within a reasonable period of time.

(d) Before finalizing any changes to its standards, the agency must--

   (1) Provide notice to all of the agency's relevant constituencies, and other parties who have made their interest known to the agency, of the changes the agency proposes to make;

   (2) Give the constituencies and other interested parties adequate opportunity to comment on the proposed changes; and

   (3) Take into account and be responsive to any comments on the proposed changes submitted timely by the relevant constituencies and other interested parties.

Narrative:

The Handbook [Exhibit 1] pages 30 and 31 has language which reads

Consistent, too, with the regulations is the requirement that the Accreditation Commission initiate action within 12 months to make changes to the standards if it is determined that such changes are needed. Actions regarding the changes are completed within a reasonable period of time.

Before finalizing any changes to AARTS standards, notice is provided to all institutions, and to other parties who have made known their interest in such proposed changes.

Constituencies and other interested parties are provided adequate opportunity to comment on the proposed changes, and the Association takes into account and is responsive to timely comments on the proposed changes submitted by them.

The Handbook [Exhibit 1], p.6 describes another initiative, the Public Advisory Council, intended to gather public input and comments.

Documentation:
Handbook, p. 6, pp.30-31 [Exhibit 1]
Analyst Agency's Exhibit

Exhibit Title File Name Comments Comments

Exhibit 1 - Handbook 2021 Exhibit 1 - Handbook 2021.pdf - -

Analyst Worksheet- Narrative

Analyst Review Status:

Meets the requirements of this section

Analyst Remarks to Narrative:

Section III(d) of the agency’s Handbook states that the agency will initiate action within 12 months to make changes to the standards if it is determined that changes are necessary. The Handbook also states that changes are completed within a reasonable period of time. Prior to finalizing any changes to AARTS standards, notice is provided to all institutions, and to other parties who have made known their interest in the proposed changes. Lastly, Section III(d) states constituencies and other interested parties are provided adequate opportunity to comment on the proposed changes, and the Association considers and is responsive to timely comments on the proposed changes [Exhibit 1].

To demonstrate compliance with this criterion the agency submitted redlined version of its most recent revision of its standards in section 602.21(a-b) [Exhibit 54].

For the on-site file review conducted July 2022 the agency provided supplemental documentation required by the Accreditation Handbook. The documentation demonstrated the agency initiated action to make changes within 12 months of the changes being identified and completed the action within a reasonable time. In addition, the agency completed those changes while meeting the requirements of section 602.21(d). Specifically, the agency provided a July 10, 2017, letter to all institutions summarizing the discussion and proposed changes to its standards that emanated from the Comprehensive Standards Conference. In addition, the agency provided minutes from its October 17, 2017, Association Annual Meeting further summarizing the changes. Lastly, the agency provided the meeting minutes from its October 22, 2017 Accreditation Commission meeting where the proposed changes were adopted by the Commission.
Analyst Worksheet - Response

Analyst Review Status:
Not Reviewed

Criteria: 602.22(a)(1)(i)

Description of Criteria

(a)

(1) If the agency accredits institutions, it must maintain adequate substantive change policies that ensure that any substantive change, as defined in this section, after the agency has accredited or preaccredited the institution does not adversely affect the capacity of the institution to continue to meet the agency's standards. The agency meets this requirement if—

(i) The agency requires the institution to obtain the agency's approval of the substantive change before the agency includes the change in the scope of accreditation or preaccreditation it previously granted to the institution; and

Narrative:

Preliminary

The Accreditation Commission maintains adequate substantive change policies that ensure that any substantive change to the educational mission, program, or programs of an accredited or preaccredited institution does not adversely affect the capacity of the institution to continue to meet AARTS standards.

• The Commission requires schools to obtain its approval of a substantive change before it includes the change in the scope of accreditation or preaccreditation previously granted. An approval of a substantive change results in a formal change to the institution’s scope of accreditation.
• The Commission will respond to a written request for a substantive change within sixty (60) days.
• All substantive change decisions are made prospectively, and all approved changes are recorded in Commission minutes.

To help schools seeking approval of a Substantive Change we have prepared a
“Substantive Change Approval Protocol.” This document, which is also incorporated in the Handbook (pages 77-91) [Exhibit 1], is organized around the Department’s Guidelines.

Applying for Approval of a Substantive Change (602.22)

Guiding Principle: The Accreditation Commission must be satisfied that the proposed change does not adversely affect the institution’s ability to continue to meet AARTS standards.

The onus is on the applicant institution to establish this, providing information and documentation as necessary for this purpose. The following discussion will provide guidance and procedures to enable schools to gauge the requirements facing them.

The Process Begins

The process begins with a request from the institution seeking approval for a substantive change. Staff will respond and advise the school regarding the submission of information and documentation as appropriate. The institution’s submission along with staff gathered data will enable the Accreditation Commission to determine whether or not this substantive change will not adversely affect the capacity of the school to continue to meet AARTS standards.

For certain substantive changes the Commission expects that applicant schools will briefly address each standard. What follows is an example of how a school might respond to this request, keeping in mind that they are not submitting a Self Study, but rather indicating the need and ability to carry out a substantive change.

Standard A: Mission

The school should submit a statement indicating that the institutional mission hasn’t changed, and a brief explanation why the proposed substantive change is consistent with the school’s mission.

Standard B: Organization and Administration

The school should demonstrate that it has the administrative capacity to undertake this new initiative. Who will be responsible for each task? How will the school’s ongoing activities be affected?

Standard C: Finance

There must be evidence that the school’s fiscal stability will not be compromised. A letter from the school’s accountant is extremely helpful in this regard. What are the
expected new revenues and expenditures?

Standard D: Physical Plant, Materials and Equipment

A description of the facility which will house students (if the substantive change involves study abroad, additional locations, contractual agreement …) will suffice. The proposed location will usually be visited by an AARTS visitor.

Standard E: Library

Do students have access to sufficient library resources? Briefly explain. An answer such as, “Our additional location is close to the Library of _____. This school has invited our students to use their library” would suffice.

Standard F: Program

The applicant school must show there will not be a loss of educational effectiveness. Often it is sufficient to describe the educational program, and to mention who will be teaching, and who will be monitoring student progress.

Standard G: Faculty

Submit Faculty Vitae. Will the Rosh Yeshiva’s attention be diverted from the main campus as a result of this substantive change?

Standard H: Students and Student Services

Address questions related to Health and Safety. For example, what arrangements are in place to provide medical services for students?

Standard I: Records and Record Keeping

This will be carefully reviewed at the main campus. Provide evidence that the increased burden is anticipated, and staff is able to handle this. The kind of response that would suffice here might be “We recognize that there would be a need to maintain a complete set of academic records for students studying abroad. Mr. _____, of our office, has adapted our software for this purpose which has now been tested extensively, and which we are happy to demonstrate.”

Standard L: Outcomes

What monitoring and educational assessment measures were instituted to ensure successful outcomes? Details are important here.
The Commission will discuss the complete application at its next meeting, keeping in mind (as must the institution) the special conditions for each substantive change, as follows.

Documentation:
Handbook, pp. 77-91 [Exhibit 1]
List of Substantive Changes Since 2018 [Exhibit 55]

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Analyst Worksheet- Narrative

**Analyst Review Status:**

Does not meet the requirements of this section

**Staff Determination:**

The agency must update its written substantive change procedures to make it clear that the procedures also apply to institutions holding preaccreditation or “candidate” status with AARTS.

**Analyst Remarks to Narrative:**

Section V, Special Procedures, of the agency’s Handbook partially addresses approval of substantive change requests from institutions the agency accredits [Exhibit 1]. Section V(a) states that the goal of the Accreditation Commission is to ensure that substantive changes at accredited institutions does not adversely impact the capacity of the institution to meet the agency’s standards. Specific to this criterion, Section V.(a) states that the Commission requires institutions to obtain the agency’s approval of the substantive change before the agency includes the change in the scope of accreditation previously granted to the institution. Any approval of a substantive change results in a formal change to the institution’s scope of recognition. Sections V.1 and 2 state that institutions are expected to request approval of a substantive change. Staff responds and advises the institution as appropriate regarding the submission of information and documentation. Institutions submit documentation
detailing how the substantive change might impact the institution’s compliance with each of the agency’s standards based on guiding questions from the agency. The policy further states the Commission will respond to a written substantive change request within 60 days and that all substantive change decisions are made solely by the Accreditation Commission.

Although the agency’s substantive change policy and procedure contains language that generally conforms to the requirements of this criterion, it does not appear to apply to institutions preaccredited by the agency, which it calls “candidate” institutions. As discussed in section 602.16(a)(2), the agency preaccredits institutions for a period of up to 5 years. 602.22(a)(1)(i) states that agencies must have substantive change policies that apply to both accredited and preaccredited institutions; however, it does not appear that the words “preaccredited” or “candidate” appear in the agency’s substantive change policy and procedure nor did the agency discuss in its narrative or provide supporting documentation to demonstrate its substantive change procedures apply to preaccredited institutions. Nevertheless, the agency provided a list of substantive change requests for the current recognition period and Department staff note that three of the institutions currently hold a preaccredited or “candidate” status with the agency [Exhibit 55]. Therefore, it appears the agency applies its substantive change procedures to preaccredited institutions even though its policy does not include the words preaccredited or candidate status.

Lastly, the agency included examples of its review and approval of the types of substantive changes listed in sections 602.22(a)(1)(ii)(A)-(K) in the relevant sections below. Department staff analysis and discussion of the approval of substantive change by type can be found in the appropriate sections below.

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AARTS has always made a distinction between schools newly accredited and those accredited for a second time. Schools newly accredited meet all standards but often have not reached the plateau of their development. We used the term ‘Candidate’ to highlight this to the public. At the same time these schools were reviewed in the same way as other accredited schools including a Self Study, a comprehensive site visit and satisfied all AARTS standards. They were always accredited.
Because ‘candidate’ as well as ‘correspondent’ are viewed as preaccredited we changed our nomenclature to describe newly recognized institutions as being in ‘Initial Recognition’ status. This too has created some confusion and we are now listing the schools as accredited with a separate sentence in the Handbook listing informing the public that the school has become recognized for the first time.

With respect to 602.22(a)(1)(i) we have modified existing language in the Handbook to read:

*The Accreditation Commission seeks to ensure that any substantive change to the educational mission, program, or programs of an institution in Accredited, Candidate, or Correspondent status does not adversely affect the capacity of the institution to continue to meet AARTS standards.*

Exhibit:

Exhibit 64: Updated Handbook, page 77

**Analyst Worksheet - Response**

**Analyst Review Status:**

Meets the requirements of this section

**Analyst Remarks to Response**

In response to the draft analysis the agency provided additional background regarding its accredited vs. preaccredited statuses, which is further discussed in section 602.23(f). For purposes of this criterion, the agency satisfies the concerns in the draft analysis by updating its Handbook to clarify its substantive change procedures apply to institutions preaccredited by AARTS.

**List of Document(s) Uploaded by Analyst - Response**

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Criteria: 602.22(a)(1)(ii)(A-F)

Description of Criteria
(ii) The agency’s definition of substantive change covers high-impact, high-risk changes, including at least the following:

(A) Any substantial change in the established mission or objectives of the institution or its programs.

(B) Any change in the legal status, form of control, or ownership of the institution.

(C) The addition of programs that represent a significant departure from the existing offerings or educational programs, or method of delivery, from those that were offered or used when the agency last evaluated the institution.

(D) The addition of graduate programs by an institution that previously offered only undergraduate programs or certificates.

(E) A change in the way an institution measures student progress, including whether the institution measures progress in clock hours or credit-hours, semesters, trimesters, or quarters, or uses time-based or non-time-based methods.

(F) A substantial increase in the number of clock hours or credit hours awarded, or an increase in the level of credential awarded, for successful completion of one or more programs.

Narrative:

602.22(a)(1)(ii)

The definition of a substantive change includes all of the cited changes, (A) – (K). We have, for convenience, added the Handbook discussion for each kind of substantive change.

Documentation:
Handbook, pp. 79-88 [Exhibit 1]

602.22(a)(1)(ii)(A)

To examine an application for a substantial change in the institution’s mission or objectives, the Commission requires a clearly stated explanation of the reason for this change, and a discussion of how this change will affect the school’s operation, and its compliance with AARTS Standards B through L.

Upon receipt of this application, the Chairman of the Commission will direct staff to review applicable documents, engage in an onsite conversation with administration officials and faculty at the applicant school, and prepare materials for distribution to
the members of the Commission. The application will be placed on the agenda of the next meeting of the Commission.

The Commission is prepared to approve such a substantive change, provided the mission or objectives remain within the parameters defined in the Handbook and the school continues to remain in compliance with all AARTS standards.

Documentation:
Handbook, pp. 79-80 [Exhibit 1]
Change in Mission Approval [Exhibit 56]

602.22(a)(ii)(B)

An application for a substantive change of this kind will be sent to the legal counsel of the Association for an assessment, prior to any further action by the Commission (other than a formal response). In addition to a clearly stated explanation of the reason for this change, a discussion of how this change will affect the school’s operation, and its compliance with AARTS Standards A through L, the applicant will be asked to provide substantive opinion letters from its legal and accounting professionals.

Upon receipt of this material, the Chairman will appoint a three person subcommittee to examine, in conjunction with staff, all aspects of this application, including implications for AARTS recognition by the US Department of Education and CHEA.

The Commission is prepared to discuss and act upon a formal recommendation submitted by this Subcommittee. Applicants are advised to review the “General Criteria” statement in the Handbook (p.7) – “The school shall be legally incorporated as a non-profit institution …”.

The Commission will arrange for a site visit within six months of any change of ownership resulting in a change of control.

Documentation:
Handbook, p. 80 [Exhibit 1]

602.22(a)(ii)(C)

Note: There is a long-standing AARTS policy against accredited schools offering educational programs which do not fit into the narrow scope of AARTS accreditation.

There is, in addition, a long-standing policy against offering coursework through Distance Education.
Schools contemplating such an offering should be advised that such a change in policy will involve discussion with the Executive Committee, notice to the community at large, with invitation and opportunity to comment, before a policy change will come before the Commission for consideration.

With this understanding, applicants are welcome to submit a request for a substantive change accompanied by a clearly stated explanation of the reason for this change, and a discussion of how this change will affect the school’s operation, and its compliance with AARTS Standards A through L.

While the Commission will respond to such an application within 60 days, and act expeditiously to begin the review process, applicants should be aware of the fact that approval of a new policy, should it be forthcoming is likely to take at least a year.

Documentation:
Handbook, pp. 80-81 [Exhibit 1]
Two Tracks Approval [Exhibit 57]

602.22(a)(1)(ii)(D)

Institutions seeking to add an accredited graduate program will be directed to the following:

[Due to lack of room, please refer to Handbook pages 81-84.]

Documentation:
Handbook, pp. 81-84 [Exhibit 1]

602.22(a)(1)(ii)(E)

AARTS accredited institutions must offer their programs in credit hours. Until recently, all school arranged their studies around two terms per year. Of late a number expanded their study years to include the summer as well, in a three terms per year sequence.

The Commission treated change from two terms to three terms as a substantive change requiring a school to address all the elements noted in the section “The Process Begins” above.

Documentation:
Handbook, p. 84 [Exhibit 1]
Change to Three Semesters Approval [Exhibit 58]

602.22(a)(1)(ii)(F)
Applicants are expected to submit a clearly stated explanation of the reason for a substantial increase in the number of credit hours awarded, and a discussion of how this change will affect the school’s operation and its compliance with AARTS Standards A through L. The application will be responded to promptly and, at the discretion of the Chairman, a member of staff or a Commission member (or members) will be asked to meet with school administrators and faculty to explore the reason for the change. The results of such conversations, along with the written application, will be presented to the Accreditation Commission for consideration at its next meeting.

In general accredited schools are aware that the number of credits awarded must be consistent with usual practice in conventional colleges and universities.

The Commission has never received a request to increase the level of the credential awarded for successful completion of the program offered at an AARTS accredited school.

Such a request would be treated as a substantive change.

Documentation:
Handbook, p. 84 [Exhibit 1]

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Analyst Worksheet- Narrative

**Analyst Review Status:**

Does not meet the requirements of this section

**Staff Determination:**
The agency must state whether it has approved substantive change requests under 602.22(a)(ii)(B) and (D) and provide examples of each type, as applicable.

**Analyst Remarks to Narrative:**

Section V.3 of the agency’s Handbook lists the types of substantive changes and include those required by 34 CFR 602.22(a)(1)(ii)(A-F) [Exhibit 1]. The agency provided copies of substantive change reviews (application, correspondence, and decision letter) for requests made under 34 CFR 602.22(a)(1)(ii)(A), (C), and (E) during the current recognition period [Exhibits 56-58]. The agency states it has never received a request from an institution to increase the level of credential awarded for successful completion of the program as described at 34 CFR 602.22(a)(1)(ii)(F). Department staff notes that the request made under 34 CFR 602.22(a)(ii)(A) was for a change in mission. It appears agency staff visited the institution and determined that the change did not rise to an actual substantive change to the institution’s mission or objections; however, the change was presented to the Commission who voted to authorize “AARTS staff to issue a substantive change should the need arise as a result of a new mission and its implementation.” Department staff reminds the agency that a substantial change in established mission or objectives of the institution must be approved by the Commission and cannot be approved by agency staff [see 34 CFR 602.22(a)(2)(i)]. Therefore, should the institution subject to Exhibit 56 meet the threshold established by 34 CFR 602.22(a)(1)(ii)(A) it must be presented to the Commission for approval.

The agency did not state or provide supporting documentation to demonstrate it reviewed any substantive change requests made under 602.22(a)(1)(ii)(B) or (D) during the current recognition period. Department staff notes that it does not appear the agency received requests related to 602.22(a)(1)(ii)(B) or (D) based on the list of requests received during the recognition period [Exhibit 55 in section 602.22(a)(1)(i)]; however, the agency must definitively state so in its response to the draft analysis.

Lastly, Department staff reviewed several additional examples of substantive change requests under 34 CFR 602.22(a)(1)(ii)(E) at the on-site file review conducted July 2022 and confirmed the agency approved the request according to its policy and these regulations.
Response:

602.22(a)(1)(ii)(B)

During the recognition period, there were no substantive change requests pertaining to schools that had a change in the legal status, form of control, or ownership.

602.22(a)(1)(ii)(D)

During the recognition period, there were no substantive change requests pertaining to schools that added graduate programs that previously were offered only as undergraduate programs or certificates.

**Analyst Worksheet - Response**

**Analyst Review Status:**

Meets the requirements of this section

**Analyst Remarks to Response**

In response to the draft analysis the agency attests there were no substantive change requests under 602.22(a)(ii)(B) and (D) during the current recognition period.

**List of Document(s) Uploaded by Analyst - Response**

No file uploaded

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**Criteria: 602.22(a)(1)(ii)(G-H)**

**Description of Criteria**

(G) The acquisition of any other institution or any program or location of another institution.

(H) The addition of a permanent location at a site at which the institution is conducting a teach-out for students of another institution that has ceased operating before all students have completed their program of study.

**Narrative:**
This too would be viewed as a substantive change. The applicant school would have to follow the steps outlined in “The Process Begins.” Before the request is brought to the Accreditation Commission the acquiring school will have to demonstrate that its administrative structure (Standard B) and Finances (Standard C) are strong enough to assimilate this change.

In the case of an acquisition of another institution, the applicant would have to present opinion letters regarding this change from its accountant and its lawyer.

This material will be sent to the legal counsel of the Association for an assessment, prior to any further action by the Commission (other than a formal response). In addition to a clearly stated explanation of the reason for this change, and a discussion of how this change will affect the school’s operation, and its compliance with AARTS Standards A through L, the applicant will be asked to provide substantive opinion letters from its legal and accounting professionals.

Upon receipt of this material, the Chairman will appoint a three person subcommittee to examine in conjunction with staff all aspects of this application, including implications for AARTS recognition by the US Department of Education and CHEA.

The Commission is prepared to discuss and act upon a formal recommendation submitted by this subcommittee.

Documentation:
Handbook, p. 85 [Exhibit 1]

In addition to a clearly stated explanation of the reason for this substantive change, and a discussion of how this change will affect the school’s operation, and its compliance with AARTS Standards A through L, the school should provide justification for adding a permanent location, when the teach-out activity is intended to be a temporary one. If, in the opinion of the Chairman, the explanation is a reasonable one, the additional location application will be examined under the same condition as all other additional location applications. Otherwise, further review by staff will take place, preliminary to a discussion by the Commission as a whole.

Documentation:
Handbook, p. 85 [Exhibit 1]
Analyst Worksheet - Narrative

Analyst Review Status:

Does not meet the requirements of this section

Staff Determination:

The agency must state whether it has approved substantive change requests made under 602.22(a)(ii)(G)-(H) and provide examples of each type, as applicable.

Analyst Remarks to Narrative:

Section V.3 of the agency’s Handbook lists the types of substantive changes and include those required by 602.22(a)(1)(ii)(G-H) [Exhibit 1]. The agency did not state or provide supporting documentation to demonstrate it reviewed any substantive change requests made under 602.22(a)(1)(ii)(G-H) during the current recognition period. Department staff notes that it does not appear the agency received requests related to 602.22(a)(1)(ii)(G-H) based on the list of requests received during the recognition period [Exhibit 55 in section 602.22(a)(1)(i)]; however, the agency must definitively state so in its response to the draft analysis.

List of Document(s) Uploaded by Analyst - Narrative

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Response:

602.22(a)(1)(ii)(G)

During the recognition period, there were no substantive change requests pertaining to schools that acquired another institution or any program or location.

602.22(a)(1)(ii)(H)

During the recognition period there were no substantive requests by schools to add a permanent location at a site at which the institution is conducting a teach-out for
students of another institution that has ceased operating before all students have completed their program of study.

**Analyst Worksheet - Response**

**Analyst Review Status:**

Meets the requirements of this section

**Analyst Remarks to Response**

In response to the draft analysis the agency attests there were no substantive change requests under 602.22(a)(ii)(G)-(H) during the current period of recognition.

**List of Document(s) Uploaded by Analyst - Response**

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**Criteria: 602.22(a)(1)(ii)(I)**

**Description of Criteria**

(I) The addition of a new location or branch campus, except as provided in paragraph (c) of this section. The agency's review must include assessment of the institution’s fiscal and administrative capability to operate the location or branch campus, the regular evaluation of locations, and verification of the following:

1. Academic control is clearly identified by the institution.
2. The institution has adequate faculty, facilities, resources, and academic and student support systems in place.
3. The institution is financially stable.
4. The institution had engaged in long-range planning for expansion.

**Narrative:**

**As per 600.2:**

Additional location: A facility that is geographically apart from the main campus of the institution and at which the institution offers at least 50 percent of a program and
may qualify as a branch campus.

Branch campus: An additional location of an institution that is geographically apart and independent of the main campus of the institution. The Secretary considers a location of an institution to be independent of the main campus if the location –

(1) Is permanent in nature;
(2) Offers courses in educational programs leading to a degree, certificate, or other recognized educational credential;
(3) Has its own faculty and administrative or supervisory organization; and
(4) Has its own budgetary and hiring authority.

It has not been usual for AARTS accredited schools to add new locations, and any application for such additional locations is recognized as a substantive change and examined very carefully.

An application for approval of an additional location should include a clearly stated explanation of the reason for this change, and a discussion of how this change will affect the school’s operation, and its compliance with AARTS standards A through L.

Particular emphasis should be placed on standards B (Organization and Administration) and C (Finance) to help establish that the school has the fiscal and administrative capacity to operate the additional location.

This application will be reviewed by staff and if judged to be responsive, a site visit by a single person will take place to inspect the site and discuss with location officials Standards D (Physical Plant, Materials and Equipment), E (Library), F (Educational Program), G (Faculty), and H (Student and Student Services) in addition to Standards B and C.

A report based on the submitted material and on the visit will be prepared for the Accreditation Commission for action at its next meeting.

Schools considering establishing additional locations are advised to review the “Monitoring Visit Protocol.” This document describes the organization’s policies regarding site visits, with special focus on additional locations.

The Accreditation Commission has never approved any Branch Campus. Conversations are currently taking place with a school which wants to establish a Branch Campus. The Commission views such an initiative as a substantive change calling for the same care and caution as for additional locations.

In addition, a school seeking to establish a branch campus must apply for a substantive change and describes the educational program to be offered at the Branch
Campus and the expected revenues and expenditures and cash flow at the Branch Campus. As is the case for additional locations, the Commission will visit a new Branch Campus no later than six months after establishing the Branch Campus.

The policies currently in place address the Department’s concerns regarding the institution’s fiscal and administrative capability to operate an additional location, the evaluation of locations, and verification of the four elements (1) – (4) mentioned above. AARTS schools engage in long range planning, although usually not in the formal, documented fashion one sees in conventional colleges and universities.

Documentation:
- Handbook, pp. 85-87 [Exhibit 1]
- Additional Location Approval [Exhibit 59]
- List of Additional Locations Opened Since 2018 [Exhibit 60]

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Analyst Worksheet- Narrative

**Analyst Review Status:**

Does not meet the requirements of this section

**Staff Determination:**

The agency must provide further narrative and supporting documentation to substantiate how it verifies academic control is clearly identified by the institution as part of its review of substantive change requests for additional locations, or inform the Department if it has not had to apply this policy since the regulation came into effect on July 1, 2020.

**Analyst Remarks to Narrative:**

Section V.3 of the agency’s Handbook lists the types of substantive changes and
includes that the approval of an additional location is based on verification by the agency that the institution has the fiscal and administrative capacity to operate the location or branch campus, including all elements as required by 602.22(a)(1)(ii)(I)(1-4) [Exhibit 1, page 85]. The agency defines additional location and branch campus in accordance with the Department’s definitions found at 34 C.F.R. 600.2. The agency provided a list of eight additional locations approved by the agency during the current recognition period [Exhibit 60]. In addition, the agency included an example of a full review of the approval of an additional location to include the application, correspondence, and decision letter [Exhibit 59]. The name of the institution and key information necessary for review by Department staff were redacted; however, Department staff reviewed the file for this institution as well as four additional location substantive change requests submitted during the current recognition period at the on-site file review conducted July 2022. Each file contained the application, follow up correspondence, site visit report, Commission meeting minutes, and decision letter. In addition, each file contained documentation to substantiate the assessment of the institution's fiscal and administrative capability to operate the location. Further, the agency verified the elements found at 602.22(a)(1)(ii)(I)(2)-(4); however, it was not apparent how the agency verified academic control is clearly identified by the institution [602.22(a)(1)(ii)(I)(1)] in any of the examples reviewed in the petition or at the on-site file review.

**List of Document(s) Uploaded by Analyst - Narrative**

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**Response:**

Prior to the formal process of approving an Additional Location there is always a conversation with senior officials at the host institution as to the proposed academic structure at the Additional Location. Often there is an actual visit to ensure that the physical facilities are suitable as well. On several occasions the sponsoring institution was advised against going ahead without making changes in its proposed plans.

The Additional Location, in operation, is scheduled for an annual monitoring visit at which point the academic control structure is confirmed.

**Exhibit:**

Exhibit 77: Academic Control
Analyst Worksheet - Response

Analyst Review Status:

Does not meet the requirements of this section

Staff Determination:

The agency does not meet the requirements of this section. The agency must provide additional narrative and supporting documentation to substantiate how it verifies academic control is clearly identified by the institution as part of its review of substantive change requests for additional locations.

Analyst Remarks to Response

In response to the draft analysis the agency states that prior to it approving an additional location there is always a conversation with the institution to discuss the academic structure of the host institution and additional location(s). Once the additional location is established the agency schedules an annual monitoring visit that, in part, verifies academic control. The agency submitted an additional exhibit of an institution that applied to establish an additional location [Exhibit 77].

It is still not apparent how the agency verifies academic control is clearly identified by the institution [602.22(a)(1)(ii)(I)(1)]. Department staff did not find that the agency has a procedure that specifies how and when academic control is verified and the agency did not submit one in its response. Exhibit 77 recounts conversations the institution held with AARTS and a narrative on how the additional location will meet AARTS’ standards. Much of the discussion deals with administration and resources. Although there is discussion of the academic structure of the program(s) to be offered at the additional location the institution does not clearly identify academic control nor does the documentation substantiate how AARTS verified academic control.

List of Document(s) Uploaded by Analyst - Response

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Criteria: 602.22(a)(1)(ii)(J-K)

Description of Criteria
(J) Entering into a written arrangement under 34 CFR 668.5 under which an institution or organization not certified to participate in the title IV, HEA programs offers more than 25 and up to 50 percent of one or more of the accredited institution's educational programs.

(K) Addition of each direct assessment program.

Narrative:

The Commission is prepared to entertain, and to approve, Contractual Agreements in which regularly registered students in the home institution are enabled to study at a host institution in the United States or abroad.

Applicants should be prepared to explain why this study is of benefit to students, and to ensure that the numbers of students permitted to do so is carefully monitored. The Commission will expect to receive data regarding the return of students to the home school after the end of 25% of the program, and their performance in comparison to students who remain in the home institution for this period of time.

Contractual agreements whose conditions have not changed need not be approved annually.

Institutions sending students to non accredited schools located abroad should consult the Study Abroad Protocol. Institutions sending students to non accredited schools located in the United States should consult the Contractual Agreement Protocol.

Engaging in either is a substantive change requiring Accreditation Commission approval.

Documentation:
Handbook, pp. 87-88 [Exhibit 1]

602.22(a)(1)(ii)(K)
Not applicable.

**Document(s) for this Section**

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Analyst Worksheet- Narrative
Staff Determination:

The agency must state whether it has approved substantive change requests made under 602.22(a)(ii)(J) and provide examples, as applicable.

Analyst Remarks to Narrative:

Section V.3 of the agency’s Handbook lists the types of substantive changes and includes arrangements with other institutions or organizations as required by 602.22(a)(1)(ii)(J) [Exhibit 1]. AARTS does not accredit direct assessment programs and therefore 602.22(a)(1)(ii)(K) does not apply. Specific to 602.22(a)(1)(ii)(J), the agency expects institutions to furnish data after the student has returned to the home institution including data on their performance in comparison to students who remain at the home institution for their studies. The agency’s policy lists two types of contractual arrangements made under this policy to include students studying at a host institution abroad or in the United States. Institutions who wish to allow students to study abroad are directed to consult the agency’s “Study Abroad Protocol” and those wishing to study at a host institution in the United States that is not certified to participate in title IV, HEA programs are to consult the agency’s “Contractual Agreement Protocol” [Exhibit 1, pg. 103].

The agency did not state or provide supporting documentation to demonstrate it reviewed any substantive change requests made under 602.22(a)(1)(ii)(J) during the current recognition period. Department staff notes that it does not appear the agency received requests related to 602.22(a)(1)(ii)(j) based on the list of requests received during the recognition period [Exhibit 55 in section 602.22(a)(1)(i)]; however, the agency must definitively state so in its response to the draft analysis.

List of Document(s) Uploaded by Analyst - Narrative

No files uploaded

Response:

602.22(a)(1)(ii)(J-K)

Inadvertently our list of Substantive Change Requests since 2018 did not include Contractual or Consortium Agreements. An amended list is enclosed together with sample documentation to illustrate the process.
Exhibit:

Exhibit 78: List of Contractual and Consortium Agreements
Exhibit 79: Sample Contractual and Consortium Agreement Approval

Analyst Worksheet - Response

Analyst Review Status:

Meets the requirements of this section

Analyst Remarks to Response

In response to the draft analysis the agency submitted a list of institutions that entered into contractual arrangements [Exhibit 12] as well as an example of a specific arrangement AARTS approved in 2021 [Exhibit 13]. However, it is not clear from either exhibit if any of the arrangements are written arrangement under 34 CFR 668.5 under which an institution or organization not certified to participate in the title IV, HEA programs offers more than 25 and up to 50 percent of one or more of the accredited institution's educational programs. The names of all the institutions in Exhibit 12 are redacted and the roster contains no additional information including the percentage of program offered. Nor does the exhibit list when or if the arrangement was approved by AARTS. In addition, the specific example provided for in Exhibit 13 speaks of an arrangement approved under a “study abroad waiver” but it is not clear what constitutes a “study abroad waiver.”

Department staff discussed the aforementioned exhibits with the agency over e-mail and phone the week of March 27th, 2023. The agency clarified in those discussions and follow up via e-mail that it did not receive or approve any substantive change applications for arrangements with other institutions or organizations as described by 602.22(a)(1)(ii)(J). The list of institutions in Exhibit 12 are arrangements reviewed during a previous recognition period. In addition, the “waiver” was not for a substantive change application related to contractual agreements, but rather a waiver for an institution to send year one undergraduates to study abroad at a previously approved contractual arrangement. The agency attested to these facts in two emails, which state: “As per our conversation I am writing to tell you that in the current recognition period we did not have any substantive change examples relating to Contractual Agreements as per 602.22(a)(1)(ii)(J). The reference to first year students ordinarily not participating in Study Abroad or in Contractual/Consortium Agreements is in our Study Abroad and Contractual Agreement Protocols (attached). Both Protocols are referenced in the Handbook on page 88. [Exhibit 46] and ”There
were no Substantive Change actions with regards to Contractual or Consortium Agreements during the current recognition period. [Exhibit 49].

**List of Document(s) Uploaded by Analyst - Response**

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**Criteria: 602.22(a)(2)(i-ii)**

**Description of Criteria**

(2)

(i) For substantive changes under only paragraph (a)(1)(ii)(C), (E), (F), (H), or (J) of this section, the agency's decision-making body may designate agency senior staff to approve or disapprove the request in a timely, fair, and equitable manner; and

(ii) In the case of a request under paragraph (a)(1)(ii)(J) of this section, the agency must make a final decision within 90 days of receipt of a materially complete request, unless the agency or its staff determine significant circumstances related to the substantive change require a review by the agency's decision-making body to occur within 180 days.

**Narrative:**

The Accreditation Commission recognizes that it may designate to senior staff the authority to approve or disapprove the following substantive change applications:

C: Addition of programs
E: Credit hours; terms
F: Increase in credits needed; credential
H: Additional location; Teach out
J: Contractual agreement; Study abroad

Decisions must be rendered in a timely, fair, equitable manner.

Decisions regarding Study Abroad or Contractual Agreement requests must be completed within 90 days of receipt of a materially complete request. Special circumstances may require Commission review within 180 days.

**Documentation:**
Staff Determination:

The agency must revise its policies related to the approval procedures for substantive changes to clearly state which substantive changes are approved by the Commission and which are approved by agency staff and under what conditions, as applicable. In addition, the agency must submit examples of substantive changes detailed at 602.22(a)(2)(ii)(J) to demonstrate the decision timelines required by this criterion, as applicable.

Analyst Remarks to Narrative:

The agency states in its narrative that the Accreditation Commission may designate senior staff the authority to approve or disapprove substantive change applications made under (a)(1)(ii)(C), (E), (F), (H), or (J) of this section. In addition, the agency states that decisions made under 602.22(a)(1)(ii)(J) of this section will be completed within 90 days of a materially complete request or within 180 days if there are special circumstances; however, the agency did not provide supporting documentation demonstrating application of its policy.

It is unclear who has the authority to approve substantive change requests for AARTS accredited or preaccredited institutions. Section V.(a) of the agency’s handbook states that the Commission will respond to a written request for substantive change within 60 days and all substantive change decisions are made solely by the Accreditation Commission and recorded in the Commission minutes. Section V.2. states that the Commission will discuss complete substantive change applications at its next meeting. However, section V.4 states that there are exceptions. The first exception gives clear authority for senior staff to approve or disapprove a request to restructure...
the school year from two to three terms. The second exception states “The Commission is prepared to consider designating staff to approve or disapprove substantive change requests relating to” applications made under (a)(1)(ii)(C), (E), (F), (H), or (J) of this section. It is not clear to Department staff what “prepared to consider” means when designating staff to approve or disapprove substantive change requests. It appears that AARTS staff are approving requests made under (a)(1)(ii)(E) of this section and the Commission approves all other substantive change request. However, the agency’s policy and procedures must clearly reflect who has the authority to approve or deny substantive change requests from its accredited or preaccredited institutions.

List of Document(s) Uploaded by Analyst - Narrative

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Response:

To clarify, we have made the following change to the Handbook, page 88:

4. Timely Response and Decision

Decisions must be rendered in a timely, fair, equitable manner. The Accreditation Commission approves all Substantive Change requests except for a request to change the institution’s calendar from two terms to three terms. Senior staff is authorized to evaluate and approve such requests.

As a rule, the Commission approves all Substantive Change requests.

There are Substantive Changes which entail satisfying documentation and description but contain no evaluative aspects. To enable such changes to take place between Accreditation Commission formal meetings, language had been inserted to make it possible for staff to approve such changes. This language has been removed and has been replaced by the newly approved language above.

Exhibit 69 demonstrates the decision timelines of a Substantive Change.
Exhibit:

Exhibit 64: Updated Handbook, Page 88
Exhibit 69: Substantive Change Decision Timeline

**Analyst Worksheet - Response**

**Analyst Review Status:**

Meets the requirements of this section

**Analyst Remarks to Response**

In response to the draft analysis the agency updated its policy related to substantive changes [Exhibit 14]. The new language in the Handbook is concise and clearly states that the Commission approves all substantive changes except that senior staff are authorized to approve changes made under 602.22(a)(1)(ii)(F) and allowed under this section. As noted in the previous section, the agency did not approve any substantive change applications made under section 602.22(a)(1)(ii)(J).

**List of Document(s) Uploaded by Analyst - Response**

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**Criteria: 602.22(b)**

Description of Criteria

(b) Institutions that have been placed on probation or equivalent status, have been subject to negative action by the agency over the prior three academic years, or are under a provisional certification, as provided in 34 CFR 668.13, must receive prior approval for the following additional changes (all other institutions must report these changes within 30 days to their accrediting agency):

1. A change in an existing program's method of delivery.

2. An aggregate change of 25 percent or more of the clock hours, credit hours, or content of a program since the agency's most recent accreditation review.
(3) The development of customized pathways or abbreviated or modified courses or programs to—

(i) Accommodate and recognize a student’s existing knowledge, such as knowledge attained through employment or military service; and

(ii) Close competency gaps between demonstrated prior knowledge or competency and the full requirements of a particular course or program.

(4) Entering into a written arrangement under 34 CFR 668.5 under which an institution or organization not certified to participate in the title IV, HEA programs offers up to 25 percent of one or more of the accredited institution's educational programs.

Narrative:

602.22(b)(1)

This section is not applicable since all AARTS accredited institutions (not just those placed on probation) must receive Accreditation Commission approval of any change in a program’s method of delivery.

602.22(b)(2)

This section is not applicable since all AARTS accredited institutions (not just those placed on probation) must receive Accreditation Commission approval for any change 25 percent or more of the credit hours or content of a program.

602.22(b)(3)

Schools must receive Accreditation Commission approval of any new approach to accommodate and recognize a student’s existing knowledge or to ‘close competency gaps between demonstrated prior knowledge or competency and full requirements of a particular course or program.’

All AARTS schools use a traditional extensive oral examination to evaluate a student’s level and accomplishment and thereby enable a student to transfer seamlessly into an ongoing program at the school.

AARTS schools similarly take a common approach to helping a student close competency gaps. The development of any alternative pathway would require Accreditation Commission approval.
602.22(b)(4)

All schools entering a contractual agreement with a non-accredited institution must receive approval of the Accreditation Commission.

Documentation:
Handbook, pp. 87-88 [Exhibit 1]

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Analyst Worksheet- Narrative

**Analyst Review Status:**
Meets the requirements of this section

**Analyst Remarks to Narrative:**

Section V.6 of the agency’s handbook restates this regulation in its entirety. In addition, the agency states in its narrative that all AARTS accredited institutions must receive prior approval for any substantive change including those listed in the criterion regardless of their status under 602.22(b). The agency does not have a policy that allows institutions to simply report the changes listed at 602.22(b)(1)-(4) and a review of substantive change requests submitted in the petition and for the on-site file review demonstrated that institutions reported the changes for prior approval.

**List of Document(s) Uploaded by Analyst - Narrative**

No files uploaded

**Analyst Worksheet - Response**

**Analyst Review Status:**
Not Reviewed

Criteria: 602.22(c-d)
Description of Criteria

(c) Institutions that have successfully completed at least one cycle of accreditation and have received agency approval for the addition of at least two additional locations as provided in paragraph (a)(1)(ii)(I) of this section, and that have not been placed on probation or equivalent status or been subject to a negative action by the agency over the prior three academic years, and that are not under a provisional certification, as provided in 34 CFR 668.13, need not apply for agency approval of subsequent additions of locations, and must report these changes to the accrediting agency within 30 days, if the institution has met criteria established by the agency indicating sufficient capacity to add additional locations without individual prior approvals, including, at a minimum, satisfactory evidence of a system to ensure quality across a distributed enterprise that includes—

1. Clearly identified academic control;
2. Regular evaluation of the locations;
3. Adequate faculty, facilities, resources, and academic and student support systems;
4. Financial stability; and
5. Long-range planning for expansion.

(d) The agency must have an effective mechanism for conducting, at reasonable intervals, visits to a representative sample of additional locations approved under paragraphs (a)(1)(ii)(H) and (I) of this section.

Narrative:

602.22(c)

This section does not apply to all AARTS accredited institutions since all proposed additions of locations must be approved by the Accreditation Commission.

To reiterate, all AARTS institutions without exception must receive prior approval before adding any additional locations.

602.22(d)

As noted in the Monitoring Protocol, AARTS has a goal of visiting every institution and every additional location annually.

Documentation:
Handbook, p. 100 [Exhibit 1]
The agency states in its narrative that 602.22(c) and (d) do not apply because the agency’s policy is that all additional locations must be approved by the Accreditation Commission and that the agency will visit every site. This is expressly stated in the agency’s handbook on pages 90 and 91 [Exhibit 1]. A review of substantive change requests at the on-site file review conducted July 2022 demonstrated the agency visited all sites prior to approving the additional locations.

Criteria: 602.22(e)

(e) The agency may determine the procedures it uses to grant prior approval of the substantive change. However, these procedures must specify an effective date, on which the change is included in the program’s or institution’s grant of accreditation or preaccreditation. The date of prior approval must not pre-date either an earlier agency denial of the substantive change, or the agency’s formal acceptance of the application for the substantive change for inclusion in the program’s or institution’s grant of accreditation or preaccreditation. An agency may designate the date of a change in ownership as the
effective date of its approval of that substantive change if the accreditation decision is made within 30 days of the change in ownership. Except as provided in paragraphs (d) and (f) of this section, an agency may require a visit before granting such an approval.

Narrative:

The Association of Advanced Rabbinical and Talmudic Schools does not grant approval of substantive change prior to action by the Commission.

Analytic Remarks to Narrative:

The agency states in its narrative that it does not grant approval of a substantive change prior to action by the Commission. The agency requires that any substantive change be submitted and approved before that change can be included in the institution’s grant of accreditation [Exhibit 1]. In addition, as the sample substantive change approval letters demonstrate, AARTS designates the effective date as the date of the letter [Exhibits 56-58 in section 602.22(a)(1)(ii)(A-F)].

List of Document(s) Uploaded by Analyst - Narrative

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Criteria: 602.22(f)(1)

(f) Except as provided in paragraph (c) of this section, if the agency’s accreditation of an institution enables the institution to seek eligibility to participate in title IV, HEA programs, the agency's procedures for the approval of an additional location that is not a branch
campus where at least 50 percent of an educational program is offered must include—

(1) A visit, within six months, to each additional location the institution establishes, if the institution—

(i) Has a total of three or fewer additional locations;

(ii) Has not demonstrated, to the agency’s satisfaction, that the additional location is meeting all of the agency’s standards that apply to that additional location; or

(iii) Has been placed on warning, probation, or show cause by the agency or is subject to some limitation by the agency on its accreditation or preaccreditation status;

Narrative:

The protocol describing the process for establishing an additional location is included in the Handbook (pages 85-87) Exhibit 1.

The Accreditation Commission will ensure that a monitoring visit takes place within six months of a schools establishing an additional location; all accredited schools which have additional locations have fewer than three.

Any institution seeking approval of an additional location must demonstrate to the satisfaction of the Accreditation Commission that it meets all of the AARTS standards that apply to the proposed additional location.

Documentation:
Handbook, pp. 85-87 [Exhibit 1]
Handbook, p. 91 [Exhibit 1]

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Analyst Worksheet- Narrative

**Analyst Review Status:**

Meets the requirements of this section
The agency states in its narrative that all AARTS accredited institutions have fewer than three locations. As noted previously, the agency’s substantive change policy requires a site visit to all additional location within 6 months of the new location being established [Exhibit 1, page 91]. Further, the goal of the site visit is to ensure that the additional location is meeting all the agency’s standards [Exhibit 1, pages 85-87]. Department staff confirmed during the on-site file review conducted July 2022 that each site was visited by the agency within six months as required by this criterion.

**List of Document(s) Uploaded by Analyst - Narrative**

No files uploaded

**Analyst Worksheet - Response**

**Analyst Review Status:**

Not Reviewed

**Criteria: 602.22(f)(2)**

**Description of Criteria**

(2) A mechanism for conducting, at reasonable intervals, visits to a representative sample of additional locations of institutions that operate more than three additional locations; and

**Narrative:**

As noted above, the AARTS ongoing monitoring protocol includes the goal of visiting every additional location annually.

**Documentation:**

Handbook, p. 100 [Exhibit 1]

**Document(s) for this Section**

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As noted in the previous section, the agency states all its accredited institutions have fewer than 3+ additional locations.

**List of Document(s) Uploaded by Analyst - Narrative**

No files uploaded

**Analyst Worksheet - Response**

**Analyst Review Status:**
Not Reviewed

**Criteria: 602.22(f)(3)**

Description of Criteria

(3) A mechanism, which may, at the agency's discretion, include visits to additional locations, for ensuring that accredited and preaccredited institutions that experience rapid growth in the number of additional locations maintain education quality.

**Narrative:**

Once again, this is not applicable since there has never been ‘rapid growth in the number of additional locations’ nor is there any indication that this will take place in the future. The nature of Rabbinic and Talmudic education is a highly personalized master to student approach to learning and just as the optimal enrollment for an institution is small, so too does our community of schools recognize that detailed careful oversight and involvement is necessary for a successful additional location to operate with educational quality.
Should circumstances change in the more distant future the Accreditation Commission is prepared to adopt the necessary modifications to remain in strict compliance with the Department of Education regulations.

**Document(s) for this Section**

No files uploaded

Analyst Worksheet- Narrative

**Analyst Review Status:**

Does not meet the requirements of this section

**Staff Determination:**

The agency must develop a policy that meets the requirements of this criterion.

**Analyst Remarks to Narrative:**

The agency states in its narrative that this section does not apply because there has never been rapid growth in the number of additional locations at one of its accredited institutions. In addition, due to the nature of its accredited institutions the agency does not expect there to be rapid growth in the future. Department staff notes that the agency endeavors to conduct annual visits to each of its accredited institutions, including additional locations as stated in previous sections. Nevertheless, even if the agency has not encountered a situation in which one of its accredited or preaccredited institutions experienced rapid growth in the number of additional locations this criterion requires all recognized accrediting agencies to develop a policy that ensures should rapid growth occur in the future, the agency has a mechanism, which may, at the agency's discretion, include visits to additional locations to ensure the institutions maintain educational quality.

**List of Document(s) Uploaded by Analyst - Narrative**

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Response:

In response, we have modified the Handbook to read:

*Page 73:*

This discussion applies to additional locations as well as to the home institution and is intended to ensure that educational quality is maintained.
Information also flows to the Commission office as a result of the extensive on site presence which is targeted for every school, and for every additional location, every year.

Exhibit:

Exhibit 64: Updated Handbook, Pages 73, 99

**Analyst Worksheet - Response**

**Analyst Review Status:**

Meets the requirements of this section

**Analyst Remarks to Response**

In response to the draft analysis the agency added clarifying language to its policies related to monitoring and growth to specify that educational quality is monitored at every additional location every year [Exhibit 16]. As noted in the draft analysis, the agency states it has never had one of its accredited institutions experience rapid growth in the number of additional locations.

**List of Document(s) Uploaded by Analyst - Response**

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**Criteria: 602.22(g)**

**Description of Criteria**

(g) The purpose of the visits described in paragraph (f) of this section is to verify that the additional location has the personnel, facilities, and resources the institution claimed it had in its application to the agency for approval of the additional location.
As in the Monitoring Protocol, the instructions to the visitor and to the institution read: “In general, a visit to an additional location should verify that the additional location has the personnel, facilities, and resources the institution claimed it had in its application for approval of the site.”

Section V.3 of the agency’s handbook states that additional locations as described at 602.22(f), as applicable, must meet all the agency’s standards and have the personnel, facilities, and resources claimed by the institution in its application. These criteria are verified by a site visitor as described on pages 86 and 91 of the handbook. In addition, the agency’s monitoring visit protocol provides further detail on how the agency verifies these elements [Exhibit 50]. The agency’s decision letter included in Exhibit 59 states that the Commission verified the institution’s fiscal and administrative capacity to operate the additional location [Exhibit 59, section 602.22(a)(1)(ii)(I)]. Department staff reviewed the file for Exhibit 59 as well as additional examples of substantive change requests to add locations at the on-site file review conducted July 2022. The site visit reports reviewed confirmed that the additional location had the personnel, facilities, and resources the institution claimed it had in its application to the agency for approval of the additional location.
Criteria: 602.22(h)

Description of Criteria

(h) The agency's substantive change policy must define when the changes made or proposed by an institution are or would be sufficiently extensive to require the agency to conduct a new comprehensive evaluation of that institution.

Narrative:

As a general rule, the Accreditation Commission requires a comprehensive evaluation (with self study, certified audit, site visit) of the school, should a proposed substantive change

- Adversely affect compliance with AARTS standards
- Change the fundamental nature of the school, its control, or functioning
- Challenge the administrative or fiscal capacity of the school

There are other circumstances as well. Unusual changes in faculty, excessive growth, significantly different kind of student body reported in a monitoring visit or concern over a lack of progress at a school in probation status might result in a decision to require a comprehensive evaluation.

The Commission reserves the right to act should other circumstances warrant a new comprehensive site visit.

Documentation:
Handbook, p. 91 [Exhibit 1]

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Analyst Worksheet- Narrative
Analyst Review Status:

Does not meet the requirements of this section

Staff Determination:

The agency must provide further narrative and documentation to demonstrate its application of its new evaluation procedure, as applicable.

Analyst Remarks to Narrative:

The agency’s Handbook states that the Accreditation Commission requires a comprehensive evaluation of the institution if a proposed substantive change adversely affects compliance with AARTS standards; changes the fundamental nature of the institution, its control, or functioning; or challenges the administrative or fiscal capacity of the institution. The new evaluation would include a self-study, certified audit and site visit of the institution. [Exhibit 1, page 91]. The agency notes in its narrative and it is stated in the Handbook that the Commission reserves the right require a new comprehensive evaluation should other circumstances warrant a new site visit. The agency did not state in its narrative if the Commission has required a new comprehensive evaluation under this criterion or provide supporting documentation.

List of Document(s) Uploaded by Analyst - Narrative

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Response:

602.22(h)

The Commission has not been presented with a substantive change requiring a new comprehensive evaluation of the institution to determine if the proposed substantive change adversely affects compliance with AARTS standards.

Analyst Worksheet - Response

Analyst Review Status:

Meets the requirements of this section

Analyst Remarks to Response

In response to the draft analysis the agency attests it has not had a substantive change
request that triggered a new comprehensive evaluation as described in this section during the current period of recognition.

List of Document(s) Uploaded by Analyst - Response

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Criteria: 602.23(a)

Description of Criteria

(a) The agency must maintain and make available to the public written materials describing--

(1) Each type of accreditation and preaccreditation it grants;

(2) The procedures that institutions or programs must follow in applying for accreditation, preaccreditation, or substantive changes and the sequencing of those steps relative to any applications or decisions required by States or the Department relative to the agency's preaccreditation, accreditation, or substantive change decisions;

(3) The standards and procedures it uses to determine whether to grant, reaffirm, reinstate, restrict, deny, revoke, terminate, or take any other action related to each type of accreditation and preaccreditation that the agency grants;

(4) The institutions and programs that the agency currently accredits or preaccredits and, for each institution and program, the year the agency will next review or reconsider it for accreditation or preaccreditation; and

(5) A list of the names, academic and professional qualifications, and relevant employment and organizational affiliations of—

   (i) The members of the agency's policy and decision-making bodies; and

   (ii) The agency's principal administrative staff.

Narrative:

602.23(a)(1)

The Handbook [Exhibit 1] is a public document which addresses all the requirements
of this regulation as follows:

Pages 11-13 lists the accreditation and preaccreditation statuses granted by the Commission, and discusses characteristics of each.

There will be a proposal to have every AARTS accredited school include in its catalog/bulletin a notice to the effect that the public can request the Handbook by contacting the organization by email or by regular mail/phone number. Similarly, along with every public notice published by AARTS, there will be a note to the effect that the AARTS Handbook can be requested.

Documentation:
Handbook, pp. 11-13 [Exhibit 1]

602.23(a)(2)

a. Applying for Accreditation or Preaccreditation

Pages 18-37 of the Handbook [Exhibit 1] explains what a school must do to initiate the process, describes the standards and the need for a self study and self study report.

Whereas candidate status schools follow procedures precisely as for accreditation status schools, Handbook, pages 18-19, institutions applying for correspondent status are directed to pages 36-37 of the Handbook, "For Schools Seeking Correspondent Status."

The Accreditation Manual [Exhibit 2] has proven to be extremely helpful to schools seeking recognition.

b. Change in Established Mission or Objectives

Pages 79-80 of the Handbook gives the same information for schools seeking to change their established mission or objectives.

c. Change in Legal Status, Formal Control or Ownership

Page 80 of the Handbook gives the same information for schools seeking to change their legal status, formal control or ownership.

d. Programs that Represent a Departure

Pages 80-81 of the Handbook gives the same information for schools seeking programs that represent a departure.
e. The Addition of a Graduate Program

Pages 81-84 of the Handbook gives the same information for schools seeking to add a graduate program.

f. Changes in Credit Hours, Credential

Page 84 of the Handbook gives the same information for schools seeking a change in their credit hours, credentials.

g. Acquisition of any other Institution

Page 85 of the Handbook gives the same information for schools seeking to acquire any other institution.

h. Addition of Another Location (‘Teach-out’)

Page 85 of the Handbook gives the same information for schools seeking to add another location.

i. Location or Branch Campus

Page 85-87 of the Handbook gives the same information for schools seeking to add a location or branch campus.

j. Contractual Agreements

Pages 87-88 of the Handbook gives the same information for schools seeking to enter into a contractual agreement.

Documentation:
Handbook, pp. 18-37, 79-88 [Exhibit 1]
Accreditation Manual [Exhibit 2]

602.23(a)(3)

The standards of the Association are listed in the Handbook, pages 21-29; actions with respect to each type of accreditation and preaccreditation:

Granting or reaffirming accreditation involves, as noted, the submission of application for status or renewal of recognition, submitting a complete self-study, undergoing an on-site review, the preparation of a visiting team report, and a decision by the
Accreditation Commission at a formal meeting. This process is described in complete detail in the Handbook on pages 18-34 and pages 49-50. The procedures for an institution seeking correspondent status are described on pages 36-37.

Reinstatement refers to institutions which have been subject to sanctions such as probation, suspension or revocation of accreditation. As noted in the Handbook (pages 13-15), the Accreditation Commission can impose private probation, public probation or suspension for a period up to the expiration of the institution’s accredited status and may impose conditions for this period. The Accreditation Commission can determine whether to remove or extend the sanction or to impose other sanctions. An institution whose accreditation has been revoked may apply for accreditation after one year following the date of revocation.

Denial of accreditation takes place in conjunction with an application for initial recognition or renewal of recognition. Such denial follows a determination by the Accreditation Commission that the institution failed to meet published standards. In such a case the schools usually would turn to the appeals procedure to revisit this decision. Institutions are offered the ability to appeal actions such as refusal to grant initial accreditation, refusal to grant renewal of recognition and so forth.

Restriction relates to conditions imposed by the Accreditation Commission on a school subject to probation. It also would apply to a school under suspension if suspension is imposed.

Revocation refers to an institution being dropped from the list of accredited institutions. As noted in the Handbook on page 14, revocation of accreditation is taken if public probation has not resulted in the appropriate corrective actions. It is also invoked if there is any indication of a lapse of ethical practices as described on page 62-63.

As noted, all adverse actions, including denial, probation, suspension, or revocation may be appealed. The appeal procedure is outlined in the Handbook on pages 51-55.

Documentation:
602.23(a)(4)

The Handbook (pages 110-135) [Exhibit 1] lists the institutions that are currently accredited by the Association and date by which the Commission will review the current accreditation or preaccreditation status. The Commission also issues an updated list of accredited institutions after each Accreditation Commission meeting. On page 68 under the title of “Publication of List,” the Handbook reads:
The Commission maintains, and makes available to the public upon request, a list of AARTS accredited institutions containing information relevant to affiliation status: address of the institution, governance, the name of the chief executive officer, the date of initial accreditation, the date of the most recent final action, the year the schools will be reviewed for accreditation or preaccreditation, and the degrees offered.

Documentation:
Handbook, pp. 68, 110-135 [Exhibit 1]

602.23(a)(5)(i)

The members of the Accreditation Commission are listed in the Handbook [Exhibit 1] on pages 105 and 106; each is identified by academic/professional qualifications and relevant employment/organizational affiliations – as appropriate.

Documentation:
Handbook, 105-106 [Exhibit __]

602.23(a)(5)(ii)

This information relating to the Accreditation Commission principal administrative staff is on page 106 of the Handbook [Exhibit 1]. Further details regarding the academic and professional qualifications and relevant employment and organizational affiliations of the principal administrative staff are maintained in the Commissioner’s office and are available to the public on request.

Documentation:
Handbook, pp. 106 [Exhibit 1]

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Analyst Worksheet- Narrative

Analyst Review Status:
Staff Determination:

The agency must provide examples of public notices included in its accredited institutions’ catalogs/bulletins as well as the agency’s notices that inform the public that the AARTS Handbook can be requested. In addition, the agency must provide examples demonstrating it provided the requested information to the public, as applicable.

Analyst Remarks to Narrative:

AARTS maintains a comprehensive Handbook that contains all the elements described at 602.23(a)(1)-(5). The agency states in its narrative that the information is available to the public upon request. The agency notifies the public of the availability of the Handbook through a note included in every public notice it publishes informing the public it can request a copy of the Handbook. Likewise, AARTS endeavors to have every accredited institution include a notice in its catalog/bulletin that informs the public they can request a copy of the Handbook by contacting AARTS via telephone or e-mail. AARTS did not provide examples of the notices informing the public of the availability of the Handbook, nor did it provide examples of requests of the Handbook from the public and the agency’s subsequent responses to demonstrate availability of the written materials to the public, as applicable.

List of Document(s) Uploaded by Analyst - Narrative

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Response:

Exhibit 70 is an example of a notice informing the public of the availability of the Handbook

Exhibit 71 is an example of an Institution’s catalog informing the public that the AARTS Handbook can be requested.

Exhibit 72 includes examples of Handbook’s sent in response to public requests.
In response to the draft analysis the agency provided documentation demonstrating that the AARTS Handbook can be requested as part of the public notices included in its accredited institutions’ catalogs/bulletins [Exhibit 71] as well as the agency’s notices that inform the public of the Commission actions [Exhibit 70]. In addition, the agency provided an example demonstrating it provided the requested information to the public upon request [Exhibit 72].

Criteria: 602.23(b)

(b) In providing public notice that an institution or program subject to its jurisdiction is being considered for accreditation or preaccreditation, the agency must provide an opportunity for third-party comment concerning the institution’s or program’s qualifications for accreditation or preaccreditation. At the agency’s discretion, third-party comment may be received either in writing or at a public hearing, or both.

Narrative:

The Handbook [Exhibit 1, page 49) reads:

At least 21 days before the Accreditation Commission meeting at which an institution’s petition is to be discussed, the public will be invited to comment, in writing, concerning the institution’s qualification for AARTS recognition.
Page 68 of the Handbook reads as follows:

The Commission provides an opportunity for third party comment, in writing, concerning a school’s qualification for accreditation or preaccreditation status.

Documentation:
Handbook, pp. 49, 68 [Exhibit 1]

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Analyst Worksheet- Narrative

**Analyst Review Status:**

Does not meet the requirements of this section

**Staff Determination:**

The agency must provide examples of its solicitation of third-party comments as well as a review of comments received by the agency, as applicable.

**Analyst Remarks to Narrative:**

Page 49 of the agency’s Handbook states that the public will be invited to submit written comments regarding the institution’s qualifications for AARTS accreditation 21 days prior to a Commission meeting at which an institution’s petition will be discussed. The agency did not provide any examples demonstrating application of this policy in the petition. Further, the agency stated to Department staff during the on-site file review it has no examples of 3rd party comments; however, it must definitively state so in its response to the draft analysis.

**List of Document(s) Uploaded by Analyst - Narrative**

No files uploaded

Response:
Examples of Public Notice published in newspapers reaching the public are appended. There have not been any third party comments.

Exhibit:

Exhibit 73: Public Notices

Analyst Worksheet - Response

Analyst Review Status:

Meets the requirements of this section

Analyst Remarks to Response

In response to the draft analysis the agency provided an example of its solicitation of third-party comments for institutions to be considered at a January 2022 Commission meeting [Exhibit 20]. The agency also attests it has not received any third party comments for review.

List of Document(s) Uploaded by Analyst - Response

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Criteria: 602.23(c)

Description of Criteria

(c) The accrediting agency must--

(1) Review in a timely, fair, and equitable manner any complaint it receives against an accredited institution or program that is related to the agency’s standards or procedures. The agency may not complete its review and make a decision regarding a complaint unless, in accordance with published procedures, it ensures that the institution or program has sufficient opportunity to provide a response to the complaint;

(2) Take follow-up action, as necessary, including enforcement action, if necessary, based on the results of its review; and
(3) Review in a timely, fair, and equitable manner, and apply unbiased judgment to, any complaints against itself and take follow-up action, as appropriate, based on the results of its review.

Narrative:

Pages 58-60 of the Handbook [Exhibit 1] outline an orderly and fair complaint procedure. This policy is designed to ensure that people with complaints are aware of how to submit complaints and that the complaints are examined against the agency’s standards and criteria. Furthermore, the Handbook ensures that the complaint will be resolved in a timely, fair, and equitable manner. A timeline has been established to this effect.

It is gratifying to note that the Accreditation Commission has, in about almost forty years of operation, received but one complaint against an accredited school; this complaint and its resolution was discussed in our 2007 petition.

A complaint against the Commission which is dated August 30, 2012 but which came to the office on Monday September 3 (Labor Day, the day after the Annual Meeting, September 2) and was responded to within ten days and has been resolved.

Documentation:
Handbook, pp. 58-60 [Exhibit 1]

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Analyst Worksheet- Narrative

**Analyst Review Status:**
Meets the requirements of this section

**Analyst Remarks to Narrative:**

The agency’s policies and procedures related to complaints against accredited institutions or against the agency itself are found on pages 58-60 of its Handbook. The policy requires institutions to have a student complaint policy, maintain a record of student complaints, and annually inform the Commission of complaints. Institutions must inform students of their opportunity to file a complaint and how to
file a complaint with AARTS. Site visitors verify an institution’s complaint policy and review all records of student complaints received by the institution. The policy requires the Accreditation Commission to review in a timely, fair, and equitable manner any complaint against an accredited institution related to AARTS standards or procedures. The policy specifies that any complaint received by AARTS will be sent to the institution’s chief executive officer for comment. The CEO should respond within 10 business days. If the issue is not resolved within 30 days a formal Accreditation Commission subcommittee will be established. The subcommittee will make findings of fact and submit a recommendation to the Commission within 60 days. The complainant and the institution's CEO are then given an additional opportunity to comment. The policy states the Commission will take any necessary follow up action as necessary, including enforcement action, based on the results of its review.

Likewise, the policy states that the Commission will receive and review any complaints against itself. Upon receipt, an initial response is sent within 10 days. If the matter cannot be initially resolved, a three-person independent panel will be established within 30 days. The panel issues a written report to the Accreditation Commission for a final decision and action at the next Commission meeting.

The agency notes it has not received a complaint against one of its accredited institutions since 2007 and has not received a complaint against itself since 2012.

List of Document(s) Uploaded by Analyst - Narrative

No files uploaded

Analyst Worksheet - Response

Analyst Review Status:

Not Reviewed

Criteria: 602.23(d)

Description of Criteria

(d) If an institution or program elects to make a public disclosure of its accreditation or
preaccreditation status, the agency must ensure that the institution or program discloses that status accurately, including the specific academic or instructional programs covered by that status and the name and contact information for the agency.

Narrative:

The Handbook, page 57, has a discussion entitled “Reference to Accreditation” which outlines the kind of public disclosure a school can make. The language specifies that the notice by an institution must disclose the specific program covered by the status, as well as the contact information of the Accreditation Commission.

AARTS accredited schools have to the best of our knowledge, always complied with this policy.

Documentation:
Handbook, p. 57 [Exhibit 1]

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Analyst Worksheet- Narrative

**Analyst Review Status:**

Does not meet the requirements of this section

**Staff Determination:**

The agency must provide examples that demonstrate institutions follow the agency’s written policy regarding public disclosure of accreditation status. The examples could include screenshots of its accredited institutions’ websites.

**Analyst Remarks to Narrative:**

The agency has clear written policies for institutions regarding public disclosure of its accreditation or preaccreditation status [Exhibit 1, page 57]. Furthermore, those policies require the institution to include the name, address and telephone number of AARTS and the specific programs covered by that status. The agency did not provide
any examples demonstrating application of its policy.

Exhibit 74 is an example taken from the website of one of our institutions publicly disclosing its accreditation information.

Exhibit:

Exhibit 74: Public Disclosure of Accreditation

In response to the draft analysis the agency provided an example from one of its accredited institutions demonstrating application of the agency's public disclosure of accreditation status policy [Exhibit 21].

Criteria: 602.23(e)

Description of Criteria

(e) The accrediting agency must provide for the public correction of incorrect or misleading information an accredited or preaccredited institution or program releases about--

(1) The accreditation or preaccreditation status of the institution or program;

(2) The contents of reports of on-site reviews; and
The agency's accrediting or preaccrediting actions with respect to the institution or program.

Narrative:

The Handbook, [Exhibit 1], page 57, contains language which provides for public correction of incorrect or misleading information released by an accredited or preaccredited school regarding the accreditation status, the visiting team report, and the actions taken with respect to the institution.

If an institution releases information that misrepresents or distorts any action by the accrediting body with respect to any aspect of the accreditation process, or the status of affiliation with the accrediting body, the chief executive officer of the institution will be notified and informed that corrective action must be taken. If the misrepresentation or distortion is not promptly corrected, the Commission may, at its discretion, release a public statement in such a form and content as is deemed necessary to provide the correct information.

The Commission is also empowered to take action to inform the public about incorrect or misleading statements made by an institution regarding its accreditation status or the contents of a visiting team report. Such action can include public notification in the press, as well as release of the entire contents of the visiting team report.

We have never had any occasion to take the steps indicated.

Documentation:
Handbook, p. 57 [Exhibit 1]

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Analyst Worksheet- Narrative

Analyst Review Status:

Meets the requirements of this section

Analyst Remarks to Narrative:
AARTS has a written policy that provides for the public correction of incorrect or misleading information an institution releases, including the categories described at 602.23(e)(1)-(3) [Exhibit 1, page 57]. The agency’s narrative and policy clearly state how AARTS ensures any incorrect or misleading information will be corrected. The agency states in its narrative in this section and the previous section that to the best of its knowledge institutions have complied with the policy and that AARTS has never had any occasion to take the enforcements steps described above.

### List of Document(s) Uploaded by Analyst - Narrative

No files uploaded

### Analyst Worksheet - Response

**Analyst Review Status:**

Not Reviewed

### Criteria: 602.23(f)

**Description of Criteria**

(f)

(1) If preaccreditation is offered—

(i) The agency’s preaccreditation policies must limit the status to institutions or programs that the agency has determined are likely to succeed in obtaining accreditation;

(ii) The agency must require all preaccredited institutions to have a teach-out plan, which must ensure students completing the teach-out would meet curricular requirements for professional licensure or certification, if any, and which must include a list of academic programs offered by the institution and the names of other institutions that offer similar programs and that could potentially enter into a teach-out agreement with the institution;

(iii) An agency that denies accreditation to an institution it has preaccredited may maintain the institution’s preaccreditation for currently enrolled students until the institution has had a reasonable time to complete the activities in its teach-out plan to assist students in transferring or completing their programs, but for no more than 120 days unless approved by the agency for good cause; and
(iv) The agency may not move an accredited institution or program from accredited to preaccredited status unless, following the loss of accreditation, the institution or program applies for initial accreditation and is awarded preaccreditation status under the new application. Institutions that participated in the title IV, HEA programs before the loss of accreditation are subject to the requirements of 34 CFR 600.11(c).

(2) All credits and degrees earned and issued by an institution or program holding preaccreditation from a nationally recognized agency are considered by the Secretary to be from an accredited institution or program.

Narrative:
On page 12 of the Handbook [Exhibit 1] there is a discussion of Candidate Status which makes it clear that we consider it to be an accreditation status. We use ‘preaccredited’ as a means of distinguishing it from a school which at one time would have been called “fully accredited.” Again, we use the term ‘preaccreditation’ to categorize a Candidate Status school as distinct from a (fully) accredited institution.

Our use of the word “preaccreditation” is related to nomenclature rather than to any operational distinction involving recognition, participation in Title IV, and the like. If there were any special requirement for preaccreditation institutions as distinct from accredited institutions we would not require our Candidate Status institutions to be treated any differently from accredited institutions. The designation then is one of convenience and good practice within our agency rather than a statement with operational implications.

Documentation:
Handbook, p. 12 [Exhibit 1]
The agency must inform the Department if its intent is to drop preaccreditation from its scope of recognition. If the agency would like to keep preaccreditation in its scope of recognition it must develop policies and procedures that meet all the requirements of this section.

**Analyst Remarks to Narrative:**

The agency states in its narrative that its use of the word “preaccreditation” is one of convenience and good practice and does not have an operational distinction involving recognition or participation in Title IV. The agency notes “If there were any special requirement for preaccreditation (sic) institutions as distinct from accredited institutions we would not require our Candidate Status institutions to be treated any differently from accredited institutions.”

Department staff note that for purposes of Title IV eligibility the definition of “preaccreditation” found at 34 CFR 600.2 states “the status of accreditation and public recognition that a nationally recognized accrediting agency grants to an institution or program for a limited period of time that signifies the agency has determined that the institution or program is progressing toward full accreditation and is likely to attain full accreditation before the expiration of that limited period of time (sometimes referred to as “candidacy”).” The agency’s own definition for its candidate institutions on page 12 of its Handbook meets the regulatory definition. AARTS candidate institutions are defined by the agency as those that are not yet fully compliant with the agency’s standards but are expected to be in full compliance within 5 years. Furthermore, the agency’s definition of candidate institutions states that “The requirements, although not as rigorous and all-inclusive as those for full accreditation, nevertheless indicate that a program of reasonable quality is in effect at the school.” This appears contrary to the following statement in the agency’s narrative: “If there were any special requirement for preaccreditation institutions as distinct from accredited institutions we would not require our Candidate Status institutions to be treated any differently from accredited institutions.” Lastly, Department staff notes that preaccreditation has long been part of the agency’s scope of recognition, which allows institutions preaccredited by AARTS to apply for eligibility to participate in title IV, HEA programs. If the agency wishes to drop preaccreditation from its scope of recognition with the U.S. Department of Education it may do so; however, all institutions holding preaccreditation (“Candidate or Correspondent”) status with the agency would lose access to Title IV, HEA funds.
If the agency wishes for preaccreditation to remain part of its scope of recognition, it must meet all the requirements of this section. The agency provided evidence of the review of institutions granted candidacy status in 602.16(a)(2) Preaccreditation Standards.

**List of Document(s) Uploaded by Analyst - Narrative**

No files uploaded

**Response:**

AARTS has always made a distinction between schools newly accredited and those accredited for a second time. Schools newly accredited meet all standards but often have not reached the plateau of their development. We used the term ‘Candidate’ to highlight this to the public. At the same time these schools were reviewed in the same way as other accredited schools including a Self Study, a comprehensive site visit and satisfied all AARTS standards. They were always accredited.

Because ‘candidate’ as well as ‘correspondent’ are viewed as preaccredited we changed our nomenclature to describe newly recognized institutions as being in ‘Initial Recognition’ status. This too has created some confusion and we are now listing the schools as accredited with a separate sentence in the Handbook listing informing the public that the school has become recognized for the first time.

With respect to 602.23(f) please note the discussion on page 12 of the Handbook which has been mildly modified to clarify that candidate refers to a preaccreditation status, consistent with the way it is understood by the Department of Education and by conventional colleges and universities.

**Exhibit:**

Exhibit 64: Updated Handbook, Page 12

**Analyst Worksheet - Response**

**Analyst Review Status:**

Meets the requirements of this section

**Analyst Remarks to Response**
In response to the draft analysis, the agency restates that despite the language in its Handbook, which meets the Department's definition of preaccreditation, the agency historically utilized candidate status for institutions in their first or “initial” period of accreditation. The agency modified the language in its handbook and now clearly states that both correspondence and candidate represent preaccreditation statuses. As discussed in the draft analysis, the agency provided evidence of its review of institutions granted candidate status during the recognition period. The agency did not grant "correspondence" status to institutions during the current recognition period. Furthermore, all institutions granted candidate status during the recognition period are now fully accredited.

Lastly, the agency updated section V. (b), Teach-out Plans and Agreements, of its Handbook and section I.a., Schools Which Must Submit a Teach-out Plan, now states preaccredited institutions must submit a teach out plan. Based on the agency’s response and explanation stating “With respect to 602.23(f) please note the discussion on page 12 of the Handbook which has been mildly modified to clarify that candidate refers to a preaccreditation status, consistent with the way it is understood by the Department of Education and by conventional colleges and universities”. Preaccreditation will remain within the agencies scope of recognition.

Criteria: 602.23(g)

Description of Criteria

(g) The agency may establish any additional operating procedures it deems appropriate. At the agency’s discretion, these may include unannounced inspections.

Narrative:

The standards, policies and procedures of the Association include all Department of Education requirements and in addition include requirements which are consistent with good practice and which are designed to ensure that accredited institutions are offering a quality program in an appropriate environment.
Staff Determination:

The agency must state whether it has established any additional operating procedures it deems appropriate, including unannounced inspection and provide supporting documentation demonstrating application of those procedures, as applicable.

Analyst Remarks to Narrative:

The agency states in its narrative that its standards, policies, and procedures are inclusive of all U.S Department of Education’s requirements and include additional requirements consistent with good practice and designed to ensure accredited institutions are offering a quality program in an appropriate environment. The agency did not provide page numbers within the agency’s standards, policies, and procedures manual(s) that describe the agency’s polices related to the requirement of this section, including whether or not the agency has a policy for unannounced inspections.

List of Document(s) Uploaded by Analyst - Narrative

No files uploaded

Response:

Please see Handbook, page 102, where it says:

*Unannounced visits are identical in nature to monitoring visits except, of course, they are not scheduled in advance.*

Exhibit:

Exhibit 64: Updated Handbook, Page 102

Analyst Worksheet - Response

Analyst Review Status:

Meets the requirements of this section

Analyst Remarks to Response

In response to the draft analysis the agency clarified that its policy related to
unannounced visits can be found in its Handbook on page 102 under the section “The Special Nature of Certain Visits,” which describes circumstances when the annual monitoring visit also serves a special purpose and may be unannounced [Exhibit 23].

Criteria: 602.24(a)

Description of Criteria

If the agency is an institutional accrediting agency and its accreditation or preaccreditation enables those institutions to obtain eligibility to participate in title IV, HEA programs, the agency must demonstrate that it has established and uses all of the following procedures:

(a) Branch campus.

The agency must require the institution to notify the agency if it plans to establish a branch campus and to submit a business plan for the branch campus that describes—

(1) The educational program to be offered at the branch campus; and

(2) The projected revenues and expenditures and cash flow at the branch campus.

Narrative:

The Accreditation Commission has never approved any Branch Campus. Conversations are currently taking place with a school which wants to establish a Branch Campus. The Commission views such an initiative as a substantive change calling for the same care and caution as for additional locations.

In addition, a school seeking to establish a branch campus must apply for a substantive change and describes the educational program to be offered at the Branch Campus and the expected revenues and expenditures and cash flow at the Branch Campus. As is the case for additional locations, the Commission will visit a new Branch Campus no later than six months after establishing the Branch Campus.

Documentation:
Handbook, p. 87 [Exhibit 1]
AARTS is an institutional accrediting agency whose accreditation enables institutions to obtain eligibility to participate in title IV, HEA programs and therefore must have and use the procedures found in section 602.24.

The agency states in its narrative that it has never approved a branch campus; however, it is currently working with an institution interested in establishing a branch campus. Nevertheless, the agency meets this requirement because its policies and procedures require the institution to notify the agency through its substantive change process if it plans to establish a branch campus. This process was discussed in-depth in section 602.22. The agency’s substantive change policy found on pages 86 and 87 of its Handbook defines a branch campus in accordance with the Department’s definition at 34 C.F.R. 600.2 [Exhibit 1]. The procedure requires an institution seeking to establish a branch campus to describe the educational program to be offered at the branch campus and the expected revenues and expenditures and cash flow at the branch campus as required by this criterion.
Criteria: 602.24(b)

Description of Criteria

(b) Site visits.

The agency must undertake a site visit to a new branch campus or following a change of ownership or control as soon as practicable, but no later than six months, after the establishment of that campus or the change of ownership or control.

Narrative:

Within six months of this change the Commission will arrange for a site visit of the institution that establishes a branch campus or that undergoes a change of ownership or control.

Documentation:

Handbook, p. 87 [Exhibit 1]

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Analyst Worksheet- Narrative

Analyst Review Status:

Does not meet the requirements of this section

Staff Determination:

The agency must submit documentation demonstrating it conducted a site visit following a change of ownership or control as soon as practicable but no later than six months after the change in ownership or control, as applicable.

Analyst Remarks to Narrative:

The agency’s substantive change procedures on pages 80 and 87 of its Handbook state that the agency will conduct a site visit to a new branch campus or following a change in ownership no later than six months after the establishment of the new branch campus or the change of ownership or control. As noted in the previous
section, the agency has never approved a branch campus and therefore no examples of site visits to a new branch campus exist. The agency did not state in its narrative if any of its institutions experienced a change in ownership or control during the recognition period nor did it provide any documentation demonstrating it conducted a site visit within six months as required by this criterion. The agency must state if any of its institutions have experienced a change in ownership or control during the current recognition period and provide documentation demonstrating implementation of its procedures related to this criterion.

List of Document(s) Uploaded by Analyst - Narrative

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Response:

No AARTS institution has experienced a change in ownership or control during the current recognition period.

Analyst Worksheet - Response

Analyst Review Status:

Meets the requirements of this section

Analyst Remarks to Response

In response to the draft analysis the agency attests no AARTS accredited institution had a change in ownership or control during the current period of recognition.

List of Document(s) Uploaded by Analyst - Response

No file uploaded

Criteria: 602.24(c)(1-2)

Description of Criteria

(c) Teach-out plans and agreements.

(1) The agency must require an institution it accredits to submit a teach-out plan as defined in 34 CFR 600.2 to the agency for approval upon the occurrence of any of the following events:
(i) For a nonprofit or proprietary institution, the Secretary notifies the agency of a determination by the institution's independent auditor expressing doubt about the institution's ability to operate as a going concern or indicating an adverse opinion or a finding of material weakness related to financial stability.

(ii) The agency acts to place the institution on probation or equivalent status.

(iii) The Secretary notifies the agency that the institution is participating in title IV, HEA programs under a provisional program participation agreement and the Secretary has required a teach-out plan as a condition of participation.

(2) The agency must require an institution it accredits or preaccredits to submit a teach-out plan and, if practicable, teach-out agreements (as defined in 34 CFR 600.2) to the agency for approval upon the occurrence of any of the following events:

(i) The Secretary notifies the agency that it has placed the institution on the reimbursement payment method under 34 CFR 668.162(c) or the heightened cash monitoring payment method requiring the Secretary's review of the institution's supporting documentation under 34 CFR 668.162(d)(2).

(ii) The Secretary notifies the agency that the Secretary has initiated an emergency action against an institution, in accordance with section 487(c)(1)(G) of the HEA, or an action to limit, suspend, or terminate an institution participating in any title IV, HEA program, in accordance with section 487(c)(1)(F) of the HEA.

(iii) The agency acts to withdraw, terminate, or suspend the accreditation or preaccreditation of the institution.

(iv) The institution notifies the agency that it intends to cease operations entirely or close a location that provides one hundred percent of at least one program, including if the location is being moved and is considered by the Secretary to be a closed school.

(v) A State licensing or authorizing agency notifies the agency that an institution's license or legal authorization to provide an educational program has been or will be revoked.

Narrative:

602.24(c)(1)

As per Handbook page 93:

Teach-out plans must be submitted to the Accreditation Commission for approval. (602.24(c)(1))
As per Handbook page 92, schools which must submit a teach-out plan include:

(b) An institution which is the subject of a report by the Secretary to the Commission regarding a determination by the school’s independent auditor that

(i) Expresses doubt about the institution’s ability to operate as a going concern.
(ii) Indicating an adverse opinion.
(iii) Indicating a finding of material weakness related to financial weakness (602.24(c)(1)(i)).

(c) A school placed on Probation (or Equivalent) by the Accreditation Commission (602.24(c)(1)(ii))

(d) A school which is participating in Title IV under Provisional Program Participation and the Secretary has required a teach-out plan (602.24(c)(1)(iii))

As per Handbook page 92, schools which must submit a teach-out plan include:

(a) An institution which is the subject of a report by the Secretary to the Commission that the school was placed on reimbursement payment under 668.162(c) (602.24(c)(2)(i))

(b) An institution which is the subject of a report by the Secretary to the Commission that the school was placed on heightened cash monitoring requiring the Secretary’s review of the school’s supporting documentation under 668.162(d)(2). (602.24(c)(2)(i))
As per Handbook page 92, schools which must submit a teach-out plan include:

(c) An institution which is the subject of a report by the Secretary to the Commission that the Secretary has initiated an emergency action against an institution in accordance with 487(c)(1)(G) of the HEA. (602.24(c)(2)(ii))

(d) An institution which is the subject of a report by the Secretary to the Commission that the Secretary has initiated an action to limit, suspend, or terminate an institution participating in any Title IV program in accordance with 487(c)(1)(F) of the HEA. (602.24(c)(2)(ii))

Documentation:
Handbook, p. 92 [Exhibit 1]
602.24(c)(2)(iii)

As per Handbook page 92, schools which must submit a teach-out plan include:

(e) A school subject to a ‘withdraw, terminate, or suspend’ accreditation action by the Accreditation Commission (602.24(c)(2)(iii))

Documentation:
Handbook, p. 92 [Exhibit 1]
602.24(c)(2)(iv)

As per Handbook page 93, schools which must submit a teach-out plan include:

(f) A school which notifies the Accreditation Commission that it intends to cease operations entirely or close a location that provides one hundred percent of at least one program, including if the location is being moved and is considered by the Secretary to be a closed school. (602.24(c)(2)(iv))

Documentation:
Handbook, p. 93 [Exhibit 1]
602.24(c)(2)(v)

As per Handbook page 93, schools which must submit a teach-out plan include:

(g) A school which has been notified by a State licensing or authorizing agency that its license or legal authorization to provide an educational program has been, or will be revoked. (602.24(c)(2)(v))

Documentation:
The agency must provide an example demonstrating review of a teach-out plan and a written teach-out agreement during the recognition period, if applicable.

**Analyst Remarks to Narrative:**

Section V.(b) of the agency’s Handbook specifies which AARTS accredited institutions must submit teach-out plans and agreements and is in accordance with the requirements of this criterion [Exhibit 1, page 92]. The agency did not state whether any of its accredited institutions had to submit a teach-out plan or written agreement during the recognition period nor did the agency provide any examples demonstrating a review of a teach-out plan or written agreement during the recognition period.

During the on-site file review conducted July 2022 the agency stated it was in the process of reviewing its first teach out plan. The agency must submit the teach-out plan and its review in response to the draft analysis.

The enclosed Teach-out plan [Exhibit 75] was reviewed by staff and subsequently sent to the members of the Accreditation Commission. The following language is taken from the minutes of the Accreditation Commission meeting of August 14, 2022:
d. Yeshiva

Yeshiva was placed on Heightened Cash Monitoring by the US Department of Education and as a result had to prepare a Teach-Out Plan which must have Accreditation Commission approval.

Staff reviewed this document against AARTS standards for a Teach-Out Plan and found that the plan is consistent with standards. Moved by Dr., seconded by Mr., to approve the Yeshiva Teach-Out plan. The motion carried unanimously.

No AARTS institution has been entered into a Teach-out agreement during this recognition period.

Exhibit:

Exhibit 75: Teach-out Plan

Analyst Worksheet - Response

Analyst Review Status:

Meets the requirements of this section

Analyst Remarks to Response

In response to the draft analysis the agency submitted the requested teach out plan [Exhibit 24], the Accreditation Commission's approval [Exhibit 50] and supplemental narrative that states “The school in question was put on Heightened Cash Monitoring because it neglected to inform the Department that its main campus had been moved. There was no change in the programs offered, nor were any students dislocated. In keeping with the ‘if practicable’ aspect of the regulation, this set of circumstances did not call for a Teach-out Agreement.” [Exhibit 49]. The documentation demonstrates the agency required and reviewed the teach out plan according to its own policies and the requirements of this criterion.

List of Document(s) Uploaded by Analyst - Response

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(3) The agency must evaluate the teach-out plan to ensure it includes a list of currently enrolled students, academic programs offered by the institution, and the names of other institutions that offer similar programs and that could potentially enter into a teach-out agreement with the institution.

Narrative:
As per Handbook page 93:

III. A Teach-out Plan Must Include:

(a) A list of currently enrolled students
(b) A detailed list of all courses leading to the degrees offered by the school
(c) Names of other Rabbinical and Talmudic schools offering similar programs and which could potentially enter into a teach-out agreement (602.24(c)(3))

Documentation:
Handbook, p. 93 [Exhibit 1]

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Analyst Worksheet- Narrative

**Analyst Review Status:**
Does not meet the requirements of this section

**Staff Determination:**

The agency must provide an example demonstrating review of a teach-out plan during the recognition period, if applicable.

**Analyst Remarks to Narrative:**

Section V.(b) of the agency’s Handbook specifies the elements required in teach-out
plans and covers all the elements required by this criterion [Exhibit 1, page 93]. The agency did not state whether it reviewed a teach-out plan during the recognition period nor did the agency provide an example demonstrating a review of a teach-out plan during the recognition period. As noted in the previous section, the agency stated during the on-site file review it is in the process of reviewing its first teach-out plan.

List of Document(s) Uploaded by Analyst - Narrative

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Response:

The enclosed Teach-out plan [Exhibit 75] was reviewed by staff and subsequently sent to the members of the Accreditation Commission. The following language is taken from the minutes of the Accreditation Commission meeting of August 14, 2022:

d. Yeshiva

Yeshiva was placed on Heightened Cash Monitoring by the US Department of Education and as a result had to prepare a Teach-Out Plan which must have Accreditation Commission approval.

Staff reviewed this document against AARTS standards for a Teach-Out Plan and found that the plan is consistent with standards. Moved by Dr. , seconded by Mr. , to approve the Yeshiva Teach-Out plan. The motion carried unanimously.

Exhibit:

Exhibit 75: Teach-out Plan

Analyst Worksheet - Response

Analyst Review Status:

Meets the requirements of this section

Analyst Remarks to Response

In response to the draft analysis the agency provided an example of a teach out plan
The teach-out plan contains the elements required by this criterion and the meeting minutes reflect the plan was reviewed by agency staff and approved by the decision making body.

Criteria: 602.24(c)(4)

Description of Criteria

(4) If the agency approves a teach-out plan that includes a program or institution that is accredited by another recognized accrediting agency, it must notify that accrediting agency of its approval.

Narrative:

AARTS does not permit its accredited schools to maintain accreditation by another recognized accrediting agency. Should the Accreditation Commission approve a teach-out plan that includes a school accredited by another recognized agency, the other accrediting agency will be notified of AARTS approval.

The agency must create and submit an approved policy that meets the requirements of this criterion.

The agency states in its narrative that it does not permit its accredited institutions to...
maintain accreditation by another recognized accrediting agency. The agency further states that in the event the Accreditation Commission approves a teach-out plan that includes an institution accredited by another recognized agency it will notify that agency of its approval. Department staff notes that the agency does not appear to have a policy that meets the requirements of this section. The agency did not cite a policy in its Handbook nor could Department staff locate one in the relevant sections, including Section V.(b). Furthermore, Department staff note that even if the agency does not recognize accreditation of its institutions by other recognized accreditors it must still have a policy of notifying other agencies as required by this criterion. Lastly, Department staff notes that considering the agency’s policy that it does not permit its accredited institutions to maintain accreditation by another recognized accrediting agency it may craft a policy that requires its accredited or preaccredited institutions to enter into teach-out agreements only with other AARTS accredited institutions.

List of Document(s) Uploaded by Analyst - Narrative

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Response:

In response, a change to the Handbook language (page 94) has been made to the effect that:

“AARTS accredited institutions can enter into teach-out agreements only with other AARTS accredited institutions”

This was approved by the membership at its Annual Meeting on February 19, 2023.

Exhibit:

Exhibit 64: Updated Handbook, Page 94

Analyst Worksheet - Response

Analyst Review Status:

Meets the requirements of this section

Analyst Remarks to Response
In response to the draft analysis, the agency modified its teach-out agreement policy to state that AARTS accredited institutions may only enter into teach-out agreements with other AARTS accredited institutions [Exhibit 40].

Criteria: 602.24(c)(5-6)

Description of Criteria

(5) The agency may require an institution it accredits or preaccredits to enter into a teach-out agreement as part of its teach-out plan.

(6) The agency must require a closing institution to include in its teach-out agreement—

   (i) A complete list of students currently enrolled in each program at the institution and the program requirements each student has completed;

   (ii) A plan to provide all potentially eligible students with information about how to obtain a closed school discharge and, if applicable, information on State refund policies;

   (iii) A record retention plan to be provided to all enrolled students that delineates the final disposition of teach-out records (e.g., student transcripts, billing, financial aid records);

   (iv) Information on the number and types of credits the teach-out institution is willing to accept prior to the student's enrollment; and

   (v) A clear statement to students of the tuition and fees of the educational program and the number and types of credits that will be accepted by the teach-out institution.

Narrative:

602.24(c)(5)

As per Handbook page 93:
IV. Schools Which Must Enter a Teach-out Agreement

(a) Institutions which are required to submit a teach-out plan under any of the circumstances described in V(b)(II)(a),(b),(c),(d),(e),(f),(g).
(b) Institutions which are required to submit a teach-out plan under any of the circumstances described in V(b)(I)(a),(b),(c),(d) and which are required to enter a teach-out agreement by the Accreditation Commission. (602.24(c)(5))

Documentation:
Handbook, p. 93 [Exhibit 1]

602.24(c)(6)

As per Handbook pages 93-94

V. A Teach-out Agreement Must Include:

(a) A complete list of students currently enrolled in each program at the institution and the program requirements each student has completed; (602.24(c)(6)(i))

(b) A plan to provide all potentially eligible students with information about how to obtain a closed school discharge and, if applicable, information on State refund policies; (602.24(c)(6)(ii))

(c) A record retention plan to be provided to all enrolled students that delineates the final disposition of teach-out records (e.g., student transcripts, billing, financial aid records); (602.24(c)(6)(iii))

(d) Information on the number and types of credits the teach-out institution is willing to accept prior to the student’s enrollment; (602.24(c)(6)(v))

(e) A clear statement to students of the tuition and fees of the educational program and the number and types of credits that will be accepted by the teach-out institution; (602.24(c)(6)(v))

Documentation:
Handbook, pp. 93-94 [Exhibit 1]
The agency requires institutions to submit a teach-out agreement if they meet any of the criteria listed under 602.24(c)(6). In addition, the agency requires a teach-out agreement if the institution is required to submit a teach-out plan under all the elements found under 602.24(c)(2). In addition, the agency requires a teach-out agreement if a teach-out plan is required under the elements covered by 602.24(c)(1) and if the Accreditation Commission requires a teach-out agreement.

(7) The agency must require an institution it accredits or preaccredits that enters into a teach-out agreement, either on its own or at the request of the agency, to submit that teachout agreement for approval. The agency may approve the teachout agreement only if the agreement meets the requirements of 34 CFR 600.2 and this section, is consistent with applicable standards and regulations, and provides for the equitable treatment of students being served by ensuring that the teachout institution—

(i) Has the necessary experience, resources, and support services to provide an
educational program that is of acceptable quality and reasonably similar in content, delivery modality, and scheduling to that provided by the institution that is ceasing operations either entirely or at one of its locations; however, while an option via an alternate method of delivery may be made available to students, such an option is not sufficient unless an option via the same method of delivery as the original educational program is also provided;

(ii) Has the capacity to carry out its mission and meet all obligations to existing students; and

(iii) Demonstrates that it—

(A) Can provide students access to the program and services without requiring them to move or travel for substantial distances or durations; and

(B) Will provide students with information about additional charges, if any.

(8) Irrespective of any teach-out plan or signed teach-out agreement, the agency must not permit an institution to serve as a teach-out institution under the following conditions:

(i) The institution is subject to the conditions in paragraph (c)(1) or (2) of this section.

(ii) The institution is under investigation, subject to an action, or being prosecuted for an issue related to academic quality, misrepresentation, fraud, or other severe matters by a law enforcement agency.

(9) The agency is permitted to waive requirements regarding the percentage of credits that must be earned by a student at the institution awarding the educational credential if the student is completing his or her program through a written teach-out agreement or transfer.

(10) The agency must require the institution to provide copies of all notifications from the institution related to the institution's closure or to teach-out options to ensure the information accurately represents students' ability to transfer credits and may require corrections.

Narrative:

602.24(c)(7)

As per Handbook page 94, a teach-out agreement must include:
(a) Approval by the Accreditation Commission; (602.24(c)(7))

Documentation:
Handbook, p. 94 [Exhibit 1]

602.24(c)(7)(i)

As per Handbook page 94, a teach-out agreement must include:

(b) Approval by the Accreditation Commission which ensures that the teach-out institution has the necessary experience, resources, and support services to provide an educational program that is of acceptable quality and reasonably similar in content, delivery modality, and scheduling to that provided by the institution that is ceasing operations either entirely or at one of its locations; (602.24(c)(7)(i))

Documentation:
Handbook, p. 94 [Exhibit 1]

602.24(c)(7)(ii)

As per Handbook page 94, a teach-out agreement must include:

(c) Approval by the Accreditation Commission which ensures the teach-out institution has the capacity to carry out its mission and meet all obligations to existing students; (602.24(c)(7)(ii))

Documentation:
Handbook, p. 94 [Exhibit 1]

602.24(c)(7)(iii)

As per Handbook page 94, a teach-out agreement must include:

(d) Approval by the Accreditation Commission which ensures the teach-out institution demonstrates that it can provide students access to the program and services without requiring them to move or travel for substantial distances or duration, and will provide students with information about additional charges, if any. (602.24(c)(7)(iii))

Documentation:
Handbook, p. 94 [Exhibit 1]

602.24(c)(8)

As per Handbook pages 94-95:
(a) Irrespective of any teach-out plan or signed teach-out agreement, the Commission must not permit an institution to serve as a teach-out institution under the following conditions: (602.24(c)(8))

(i) The institution is required to submit a teach-out plan.

(ii) The institution is under investigation, subject to an action, or being prosecuted for an issue related to academic quality, misrepresentation, fraud, or other severe matters by a law enforcement agency.

Documentation:
Handbook, pp. 94-95 [Exhibit 1]

602.24(c)(9)

As per Handbook page 95:

(b) The Commission is permitted to waive requirements regarding the percentage of credits that must be earned by a student at the institution awarding the educational credential if the student is completing his or her program through a written teach-out agreement or transfer. (602.24(c)(9))

Documentation:
Handbook, p. 95 [Exhibit 1]

602.24(c)(10)

As per Handbook page 95:

(c) The Commission must require the institution to provide copies of all notifications from the institution related to the institution's closure or to teach-out options to ensure the information accurately represents students' ability to transfer credits and may require corrections. (602.24(c)(10))

Documentation:
Handbook, p. 95 [Exhibit 1]
Analyst Worksheet - Narrative

Analyst Review Status:

Does not meet the requirements of this section

Staff Determination:

The agency must provide an example demonstrating review and approval of a teach-out agreement during the recognition period, if applicable.

Analyst Remarks to Narrative:

Section V.(b)(V) and (VI) of the agency’s Handbook [Exhibit I] addresses the requirements of this section in its entirety; however, the agency did not state if it has approved any teach out agreements during the current recognition period nor did it provide an example of its review and approval of a teach out agreement.

List of Document(s) Uploaded by Analyst - Narrative

No files uploaded

Response:

No Teach-out agreements were presented for consideration during the current recognition period.

Analyst Worksheet - Response

Analyst Review Status:

Meets the requirements of this section

Analyst Remarks to Response

As previously noted and attested to in this section by the agency, no teach-out agreements were submitted to the agency for approval during the current recognition period.

List of Document(s) Uploaded by Analyst - Response

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Criteria: 602.24(d)
Description of Criteria

(d) Closed institution. If an institution the agency accredits or preaccredits closes without a teach-out plan or agreement, the agency must work with the Department and the appropriate State agency, to the extent feasible, to assist students in finding reasonable opportunities to complete their education without additional charges.

Narrative:

As per Handbook page 95:

(d) If an institution the agency accredits or preaccredits closes without a teach-out plan or agreement, the agency must work with the Department and the appropriate State agency, to the extent feasible, to assist students in finding reasonable opportunities to complete their education without additional charges. (602.24(d))

Documentation:
Handbook, p. 95 [Exhibit 1]

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Analyst Worksheet- Narrative

**Analyst Review Status:**

Does not meet the requirements of this section

**Staff Determination:**

The agency must provide further narrative and supporting documentation demonstrating application of its policy related to this criterion, as applicable.

**Analyst Remarks to Narrative:**

Section V.(b)(VI) of the agency’s Handbook addresses the requirements of this section [Exhibit 1]. Specifically, V.(b)(VI)(d) states this regulation in its entirety. The agency did not state in its narrative or provide supporting documentation demonstrating implementation of its policy related to this criterion.
No AARTS institutions were closed during the current recognition period.

**Analyst Worksheet - Response**

**Analyst Review Status:**

Meets the requirements of this section

**Analyst Remarks to Response**

In response to the draft analysis the agency attests that no AARTS accredited institutions closed during the current recognition period and therefore it has not had cause to apply its policy related to this section.

**Criteria: 602.24(e)**

**Description of Criteria**

*(e) Transfer of credit policies.* The accrediting agency must confirm, as part of its review for initial accreditation or preaccreditation, or renewal of accreditation, that the institution has transfer of credit policies that—

1. Are publicly disclosed in accordance with § 668.43(a)(11); and
2. Include a statement of the criteria established by the institution regarding the transfer of credit earned at another institution of higher education.

(Note: This criterion requires an accrediting agency to confirm that an institution's teach-out policies are in conformance with §668.43(a)(11), which reads:

"A description of the transfer of credit policies established by the institution, which must include a statement of the institution's current transfer of credit policies that includes, at a minimum—

1. Any established criteria the institution uses regarding the transfer of credit..."
earned at another institution and any types of institutions or sources from which the institution will not accept credits;

(ii) A list of institutions with which the institution has established an articulation agreement; and

(iii) Written criteria used to evaluate and award credit for prior learning experience including, but not limited to, service in the armed forces, paid or unpaid employment, or other demonstrated competency or learning”)

Narrative:

The AARTS review of Transfer of Credit Policy begins with the following discussion in the Handbook page 56 [Exhibit 1]:

The Commission will confirm as part of its review for initial accreditation or renewal of accreditation, that the institution has transfer of credit policies that --

(1) Are publicly disclosed in accordance with 668.43 (a)(11) ; and includes
(2) A statement of the criteria established by the institution regarding the transfer of credit earned at another institution of higher education.

The Site Visitor’s Manual describes the manner in which a school’s implementation of its Transfer of credit policy is examined. Further details are in Section IV (k) Other Policies (sub heading iii) of this Handbook.

Following through to the Site Visitors Manual [Exhibit 3] which reads:

(b) Transfer of Credit Policies
Does the school have a formal transfer policy? Is it in compliance with Federal regulations?
668.43 (a)(11): “A description of the transfer of credit policies established by the institution which must include a statement of the institution’s current transfer of credit policies that includes, at a minimum-
(i) Any established criteria the institution uses regarding the transfer of credit earned at another institution; and
(ii) A list of institutions with which the institution has established an articulation agreement.”
How does the institution satisfy the “publicly disclosed”?
Did you review a sample of student transfers? Were they consistent with the school’s transfer of credit policy?
Does the school have an articulation agreement with other institutions?
Site visitors will, in the course of their visit, look at a sample transfer, if applicable to the school (not all AARTS schools can demonstrate transfers during a period of recognition). Site visitors will not make any special mention if all is in order and there are no findings.

Documentation:
Handbook, p.56_ [Exhibit 1]
Site Visitors Manual, p.64[Exhibit 3]

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Analyst Worksheet- Narrative

**Analyst Review Status:**

Does not meet the requirements of this section

**Staff Determination:**

The agency must update its policy to clarify that it also applies to institutions the agency preaccredits, as applicable. The agency must also update its policy to require an institution’s publicly disclosed transfer of credit policy include the written criteria described at 34 C.F.R. 668.43(a)(11)(iii).

**Analyst Remarks to Narrative:**

Section III.(b) of the agency’s Handbook partially addresses the requirements of this criterion [Exhibit 1]. The policy restates the regulation except that the agency’s policy does not state it applies to institutions the agency preaccredits nor does it require an institution’s public disclosure of its transfer of credit policy to include 34 C.F.R. 668.43(a)(11)(iii). Although the agency states in section 602.23(f) that it does not consider its preaccreditation status to be operationally meaningful, Department staff notes that preaccreditation has historically been part of the agency’s scope of recognition.
In addition, as noted throughout the petition, the agency applies many of its policies, including others required by 34 C.F.R. Part 602 to its preaccredited institutions. It is not clear why the agency would not apply its transfer of credit policy to institutions it preaccredits as required by this criterion. The agency also provided its Site Visitors Manual as Exhibit 3. The Manual instructs site visitors to confirm and verify the institution’s credit transfer policy in accordance with this criterion. In addition, the agency did not provide an example of its review of an institution’s transfer of credit policy in the petition; however, Department staff reviewed three examples of the agency’s review of transfer of credit policies as part of the agency’s Monitoring/Oversight/Compliance report and confirmed the agency review polices for the elements found at 602.24(e)(1) and (2).

List of Document(s) Uploaded by Analyst - Narrative

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Response:

The Handbook, page 56, was updated accordingly.

The Commission will confirm as part of its review for candidate and correspondent (i.e., preaccredited statuses), initial recognition or renewal of recognition, that the institution has transfer of credit policies that --

(1) Are publicly disclosed in accordance with 668.43 (a)(11); and includes

(2) A statement of the criteria established by the institution regarding the transfer of credit earned at another institution of higher education.

Exhibit:

Exhibit 64: Updated Handbook, Page 56

Analyst Worksheet - Response

Analyst Review Status:

Meets the requirements of this section

Analyst Remarks to Response
In response to the draft analysis, the agency updated its transfer of credit policy to conform to the requirements of this section [Exhibit 27]. The policy now specifies it applies to institutions preaccredited by the agency and must contain all the elements listed at §668.43(a)(11).

Criteria: 602.24(f)

(1) Adopt and apply the definitions of “branch campus” and “additional location” in 34 CFR 600.2;

(2) On the Secretary’s request, conform its designations of an institution’s branch campuses and additional locations with the Secretary’s if it learns its designations diverge; and

(3) Ensure that it does not accredit or preaccredit an institution comprising fewer than all of the programs, branch campuses, and locations of an institution as certified for title IV participation by the Secretary, except with notice to and permission from the Secretary.

Narrative:

602.24(f)(1)

The Accreditation Commission has formally adopted the definition of branch campus and additional location as in 34 CFR 600.2, specifically:

Additional location: A facility that is geographically apart from the main campus of the institution and at which the institution offers at least 50 percent of a program and may qualify as a branch campus.

Branch campus: An additional location of an institution that is geographically apart and independent of the main campus of the institution. The Secretary considers a location of an institution to be independent of the main campus if the location –
(1) Is permanent in nature;
(2) Offers courses in educational programs leading to a degree, certificate, or other recognized educational credential;
(3) Has its own faculty and administrative or supervisory organization; and
(4) Has its own budgetary and hiring authority.

Documentation:
Handbook, p. 86 [Exhibit 1]

602.24(f)(2)

The definitions of branch campus and additional location are consistent with the definitions in 600.2.

Documentation:
Handbook, p. 86 [Exhibit 1]

602.24(f)(3)
Not applicable.

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Analyst Worksheet- Narrative

**Analyst Review Status:**

Does not meet the requirements of this section

**Staff Determination:**

The agency must update its policy to meet 602.24(f)(2) of this section. Furthermore, the agency must clarify why it believes 602.24(f)(3) does not apply. In addition, the agency must provide a copy of the agency’s notice to the Secretary and the Secretary’s permission, if the agency has accredited or preaccredited an institution comprising fewer than all the programs, branch campuses, and locations of an institution as certified for title IV participation by the Secretary, or inform Department staff that no such situations have occurred.

**Analyst Remarks to Narrative:**
The agency has adopted the definitions of branch campus and additional locations in accordance with 34 C.F.R. 600.2 [Exhibit 1, page 86]. The agency responded to 602.24(f)(2) of this section to state that its definitions already conform with the Secretary’s. Department staff could not confirm that the agency has a policy to, on the Secretary’s request, conform its designations of an institution's branch campuses and additional locations with the Secretary's if it learns its designations diverge. Department staff notes that while the agency’s definitions currently conform to the Secretary’s it is possible in the future they may diverge and therefore the agency must have a policy to realign its definitions upon request by the Secretary.

The agency did not provide a copy of the agency’s notice to the Secretary or the Secretary’s permission, if the agency has accredited or preaccredited an institution comprising fewer than all the programs, branch campuses, and locations of an institution as certified for title IV participation by the Secretary. The agency states in its narrative that 602.24(f)(3) is “not applicable” without providing detail why it isn’t applicable. It is unclear to Department staff if it is not applicable because no examples exist, or if the agency believes this requirement does not apply to AARTS.

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Response:

In response, language was added to the Handbook (page 87) to the effect that:

*The Commission is prepared to realign its definition of Branch Campus and Additional Location to conform with the designation of the Secretary, upon request of the Secretary. The Commission will not accredit an institution comprising fewer than all the programs, branch campuses, and locations without the express permission of the Secretary.*

There have been no examples relating to this regulation.

**Exhibit:**

Exhibit 64: Updated Handbook, Page 87
Analyst Worksheet - Response

Analyst Review Status:

Meets the requirements of this section

Analyst Remarks to Response

In response to the draft analysis the agency updated its Handbook to meet sections 602.24(f)(2) and (3) of this section [Exhibit 28]. In addition, the agency attests it had no examples related to these criteria during the current period of recognition.

List of Document(s) Uploaded by Analyst - Response

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Criteria: 602.25(a-e)

Description of Criteria

The agency must demonstrate that the procedures it uses throughout the accrediting process satisfy due process. The agency meets this requirement if the agency does the following:

(a) Provides adequate written specification of its requirements, including clear standards, for an institution or program to be accredited or preaccredited.

(b) Uses procedures that afford an institution or program a reasonable period of time to comply with the agency’s requests for information and documents.

(c) Provides written specification of any deficiencies identified at the institution or program examined.

(d) Provides sufficient opportunity for a written response by an institution or program regarding any deficiencies identified by the agency, to be considered by the agency within a time frame determined by the agency, and before any adverse action is taken.

(e) Notifies the institution or program in writing of any adverse accrediting action or an action to place the institution or program on probation or show cause. The notice describes the basis for the action.

Narrative:

602.25(a)
Pages 18-37 of the Handbook [Exhibit 1] explain what a school must do to initiate the accreditation process, describe the standards and the need for a self study and self study report.

Whereas Candidate Status schools follow procedures precisely as for Accreditation Status schools, Handbook, pages 18-19, institutions applying for Correspondent Status are directed to page 36-37 of the Handbook, "For Schools Seeking Correspondent Status."

The Accreditation Manual [Exhibit 2] has proven to be extremely helpful to schools seeking recognition.

Documentation:
Handbook, pp. 18-37 [Exhibit 1]
Accreditation Manual [Exhibit 2]

602.25(b)

Page 53 of the Handbook [Exhibit 1] reads:

(a) A notice of appeal must be filed by the institution within thirty (30) days of receipt of a written decision of the Accreditation Commission. Within this thirty (30) day period:

(i) The school agrees to pay all costs associated with the appeal. The appellant school must pay $5,000, in advance.

(ii) The school will define, in writing, its specific grounds of appeal.

Page 51 of the Handbook [Exhibit 1] reads:

The Commission will afford an institution at least thirty (30) days to comply with any request for information and documents.

All other requests for information allow for a similar reasonable period of time for response.

Documentation:
Handbook, pp. 51, 53 [Exhibit 1]

602.25(c)
Page 51 of the Handbook, [Exhibit 1] reads:

The Commission will provide written specification of any deficiencies identified at an institution that has been reviewed.

The Commission will provide thirty (30) days for an institution to send a written response regarding any deficiencies identified. This response will be considered by the Commission within sixty (60) days of receipt of this response, and before any adverse action is taken.

Documentation:
Handbook, p.51 [Exhibit 1]
Sample Letter to School Being Dropped [Exhibit 61]

602.25(d)

Page 51 of the Handbook reads:

The Commission will provide thirty (30) days for an institution to send a written response regarding any deficiencies identified. This response will be considered by the Commission within sixty (60) days of receipt of this response, and before any adverse action is taken.

Documentation:
Handbook, p.51 [Exhibit 1]
Sample Written Response from School [Exhibit 62]

602.25(e)

Page 51 of the Handbook [Exhibit 1] reads:

Any adverse action taken by the Accreditation Commission shall be accompanied by a written decision of the Accreditation Commission setting forth the adverse action and the basis for the action, including specification of any deficiencies identified at the school in question. The written decision shall be sent to the institution and shall also inform the institution of its right to appeal any adverse action prior to the action becoming final. The institution must file a written notice of appeal within thirty (30) days of receipt of the written decision of the Accreditation Commission’s proposed adverse action.

Documentation:
Handbook, p.51 [Exhibit 1]
Sample Letter to School Being Dropped [Exhibit 61]
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**Analyst Worksheet- Narrative**

**Analyst Review Status:**

Meets the requirements of this section

**Analyst Remarks to Narrative:**

As previously noted, AARTS has demonstrated that its standards are clear and provide adequate written specification of the agency’s requirements for an institution to be accredited or preaccredited [Exhibits 1 and 3]. Section III.(m) of the agency’s Handbook addresses due process requirements [Exhibit 1]. Section III.(m) is detailed and meets the requirements of this criterion. The agency's policies afford programs sufficient time and opportunity to comply with its requests for information and documents. In addition, its policy provides sufficient opportunity for a written response by an institution regarding any deficiencies identified by the agency, to be considered by the agency within a time frame determined by the agency, and before any adverse action is taken. Furthermore, the agency’s policy requires it notify the institution in writing of any adverse accrediting action or an action to place the institution or program or show cause and the notice will describe the basis for the action.

To demonstrate compliance with this criterion the agency submitted a letter to an institution that lost AARTS accreditation [Exhibit 61] and a sample letter from a different institution requesting an appeal of an adverse action [Exhibit 62]. These examples demonstrate it meets the requirements of this section.
At the on-site file review conducted during July 2022, the agency confirmed it received no complaints during the current recognition period against the agency regarding due process violations, including any suits filed against the agency or any instances of arbitration to resolve such complaints.

### List of Document(s) Uploaded by Analyst - Narrative

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### Analyst Worksheet - Response

**Analyst Review Status:**
Not Reviewed

### Criteria: 602.25(f)

**Description of Criteria**

(f) Provides an opportunity, upon written request of an institution or program, for the institution or program to appeal any adverse action prior to the action becoming final.

1. The appeal must take place at a hearing before an appeals panel that--

   (i) May not include current members of the agency's decision-making body that took the initial adverse action;

   (ii) Is subject to a conflict of interest policy;

   (iii) Does not serve only an advisory or procedural role, and has and uses the authority to make the following decisions: To affirm, amend, or remand adverse actions of the original decision-making body; and

   (iv) Affirms, amends, or remands the adverse action. A decision to affirm or amend the adverse action is implemented by the appeals panel or by the original decision-making body, at the agency's option; however, in the event of a decision by the appeals panel to remand the adverse action to the original decision-making body for further consideration, the appeals panel must explain the basis for a decision that differs from that of the original decision-making body and the original decision-making body in a remand must act in a manner consistent with the appeals panel's decisions or instructions.

2. The agency must recognize the right of the institution or program to employ
counsel to represent the institution or program during its appeal, including to make any presentation that the agency permits the institution or program to make on its own during the appeal.

Narrative:

Page 51 of the Handbook reads:

Any adverse action taken by the Accreditation Commission shall be accompanied by a written decision of the Accreditation Commission setting forth the adverse action and the basis for the action, including specification of any deficiencies identified at the school in question. The written decision shall be sent to the institution and shall also inform the institution of its right to appeal any adverse action prior to the action becoming final. The institution must file a written notice of appeal within thirty (30) days of receipt of the written decision of the Accreditation Commission’s proposed adverse action.

Page 52 and 53 outline the characteristics of the AARTS Appeal Board:

(a) The Appeals Board may not include current members of the Accreditation Commission

(b) The Appeals Board members are subject to the AARTS Conflict of Interest policy as described in Section III(k)

On page 54 we read:

The Appeals Board may affirm, amend, or remand the adverse action. A decision to affirm or amend the adverse action is implemented by the Commission.

Finally, on page 55:

In a decision that is implemented by or remanded to the Commission, the latter must act in a manner consistent with the appeals panel’s decisions or instructions.

In a remand decision, the Commission is empowered to reaffirm an earlier decision that had been appealed by the institution, as well as to impose private probation or public probation, to extend private probation for an additional year, to revoke accreditation status, and to reinstate the school in a manner consistent with the Appeal Board’s decision or instruction. In a remand by the appeals panel to the Accreditation Commission for further consideration, the appeals panel must explain the basis of a
decision that differs from that of the Accreditation Commission. Pages 13-14 (Sanctions) are relevant here.

In the section entitled "Conduct of the Appeal" (page 54), the Handbook reads:

(a) The institution may employ counsel to represent the institution during its appeal. Counsel may make any presentation or statement that the Commission permits the institution to make on its own during the appeal.

Since May 30, 2018 there were several instances of schools whose accreditation status lapsed because the documentation necessary for renewal of recognition was either late or insufficient. This action is taken by the Commission, with right of appeal. The schools is given 30 days to lodge an appeal (as per Exhibit 63).

Subsequently schools have 14 days before an appeal panel is selected. In every one of the four situations the satisfactory documents were submitted and the termination was declared moot.

A complete appeal process which demonstrates all the elements requested took place in 2015-2016 [Exhibit 63] and which we include in the absence of any more recent event.

Documentation:

Handbook, pages 51-55 [Exhibit ___]
Sample Full Appeal [Exhibit 63]
The agency must provide further narrative and documentation to demonstrate how and under which policy it halts the appeal process to rescind a loss of accreditation.

**Analyst Remarks to Narrative:**

Section III.(m) of the agency’s Handbook addresses the requirements of this criterion. Specifically, the section “Initiating an Appeal” on pages 52-55 describes the agency’s appeal process in detail. The policy provides the opportunity for review of an adverse action taken by the Commissioners. The policy further describes what actions are eligible for an appeal and the grounds for an appeal. The policy requires a written notification of appeal be sent to agency within 30 calendar days of receipt of a written decision by the Commission. The policy also describes the appointment of the appeal committee and specifies that no member of the Accreditation Commission may serve on an appeal committee. All members of the appeal committee are subject to the agency’s conflict of interest policy as described in section III(k) of the agency’s Handbook. The policy specifies that the appellant institution has the right to employ counsel or other representation, including to make any presentation that the agency permits the institution or program to make on its own during the appeal. An appeal committee has the authority to affirm, amend, or remand the original decision back to the decision-making body. Decisions made by the appeal committee to affirm or amend are implemented by the Commission. Decisions to remand are sent back to the original decision-making body with an explanation for the basis of the decision that differs from the original decision-making body and the Accreditation Commission must act in a manner consistent with the appeal panel’s decisions or instructions.

The agency states in its narrative that there are no examples of an appeal during the current recognition period. The agency provided an example of an appeal that occurred in 2016. Although that example appears to have proceeded according to the agency’s policy in place at that time, Department staff note that the appeal did not occur under current regulation or the agency’s current policy. Lastly, the agency states there were several instances of institutions whose accreditation status lapsed because the institution failed to submit documentation necessary for the renewal of recognition. The agency notes this is an action with the right of appeal. The agency further states that in every case the satisfactory documents were submitted and the “termination was declared moot.” It is not clear if these institutions completed the appeal process nor under what authority the agency declared the termination of the institution’s accreditation “moot.” Department staff note that Section III.(m) of the agency’s Handbook contains a clause that states the “the Accreditation Commission can, at its discretion, rescind an adverse action in circumstances where it becomes evident during an Appeal Process that the Appeal Board will rule to reverse.” It is
unclear if this is the situation the agency refers to in its narrative. Department staff note that under regulations effective July 1, 2020, appeal board’s no longer have the authority to “reverse” the action of the original decision-making body.

**List of Document(s) Uploaded by Analyst - Narrative**

No files uploaded

Response:

The language in the Handbook (page 52) has been clarified to read:

*The Accreditation Commission can, at its discretion, rescind an adverse action in circumstances where it becomes evident that an Appeal Board would rule to reverse.*

**Exhibit:**

Exhibit 64: Updated Handbook, Page 52

**Analyst Worksheet - Response**

**Analyst Review Status:**

Does not meet the requirements of this section

**Staff Determination:**

The agency does not meet the requirements of this section. The agency must modify its policy on page 52 of its Handbook and remove any reference to an Appeals Board reversing the decision of the Accreditation Commission as that is not an action allowed under 602.25(f)(1)(iv). In addition, the agency must update its Handbook to clearly reflect that a lapse of accreditation is not subject to appeal.

**Analyst Remarks to Response**

In response to the draft analysis, the agency states it modified its Handbook, which now states the Accreditation Commission can rescind an adverse action in circumstances where it becomes evident that an Appeal Board would rule to reverse. Department staff notes that it is no longer permissible for an Appeal Board to reverse the decision of the Commission. Under the current version of regulation effective
July 1, 2020, an appeals board may only affirm, amend, or remand an adverse action. However, the regulation specifies that, in the event of a remand, the original decision-making body must act in a manner consistent with the appeals panel’s decisions or instructions. The agency’s policy should be consistent with 602.25(f)(1)(iv).

Department staff is also concerned about the application of this policy as it relates to the four situations described by the agency in the original petition [Exhibit 52]. Based on the agency's narrative it is not in compliance with the requirements of 602.19(a). Please see that section for further discussion. As it relates to this section, Department staff notes that a lapse of accreditation is not an adverse action and therefore is not subject to appeal currently allowed by the agency's policies. An adverse action is defined in 34 CFR Part 602.3 and means the "denial, withdrawal, suspension, revocation, or termination of accreditation or preaccreditation, or any comparable accrediting action an agency may take against an institution or program."

List of Document(s) Uploaded by Analyst - Response

No file uploaded

Criteria: 602.25(g)

Description of Criteria

(g) The agency notifies the institution or program in writing of the result of its appeal and the basis for that result.

Narrative:

As on page 54 of the Handbook, [Exhibit 1]:

(c) The Commission will notify the institution in writing of the result of its appeal, and the basis for that result.

Documentation:

Handbook, p.54 [Exhibit 1]
Section III.(m) of the agency’s Handbook addresses the requirements of this section. Specifically, the agency’s policy related to appeals states the Commission will notify the institution in writing of the result of its appeal, and the basis for that result. As stated in the previous section, the agency has not received an appeal during the current recognition period.

(1) The agency must provide for a process, in accordance with written procedures, through which an institution or program may, before the agency reaches a final adverse action decision, seek review of new financial information if all of the following conditions are met:  

(i) The financial information was unavailable to the institution or program until after the decision subject to appeal was made.
(ii) The financial information is significant and bears materially on the financial deficiencies identified by the agency. The criteria of significance and materiality are determined by the agency.

(iii) The only remaining deficiency cited by the agency in support of a final adverse action decision is the institution’s or program’s failure to meet an agency standard pertaining to finances.

(2) An institution or program may seek the review of new financial information described in paragraph (h)(1) of this section only once and any determination by the agency made with respect to that review does not provide a basis for an appeal.

Narrative:

As on page 54 of the Handbook [Exhibit 1],

(d) The Commission will, upon request, and before taking any final adverse action, review new financial information if the financial information is significant, bears materially on financial deficiencies, and if the only remaining deficiency cited in support of a final adverse action is the institution’s failure to meet Standard C: Finance.

This additional financial review must be completed within thirty (30) days of notification of the result of its appeal.

An institution may seek the review of new financial information described in this section only once, and any determination by the agency made with respect to that review does not provide a basis for an appeal.

The Commission has not had any occasion to implement this policy.

Documentation:

Handbook, p.54 [Exhibit 1]
Section III.(m) of the agency’s Handbook addresses the requirements of this criterion. Specifically, the section entitled “Conduct of an Appeal” states that the Commission “will, upon request, and before taking any final adverse action, review new financial information if the financial information is significant, bears materially on financial deficiencies, and if the only remaining deficiency cited in support of a final adverse action is the institution’s failure to meet Standard C: Finance.” The review of additional financial information must be reviewed within 30 days of notification of the result of an appeal and an institution may only seek review of new financial information once. The determination made by the agency with respect to the review of new financial information does not provide a basis for an appeal. The agency notes it has not had an occasion to implement this policy.
program.

(2) A decision to renew an institution’s or program’s accreditation or preaccreditation;

Narrative:

The concerns of the Secretary are addressed in the Handbook, page 66:

The Commission will provide written notice to the Secretary, the appropriate State licensing or authorizing agency, the appropriate accrediting agencies, and the public of

(1) A decision to award initial accreditation or preaccreditation to an institution or program.

(2) A decision to renew an institution’s or program’s accreditation or preaccreditation; no later than thirty days after making the decision.

Documentation:
Handbook, p. 66 [Exhibit 1]

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Analyst Worksheet- Narrative

**Analyst Review Status:**

Meets the requirements of this section

**Analyst Remarks to Narrative:**

The agency’s written notification policy found at section IV.(f) of its Handbook addresses the requirements of this criterion [Exhibit 1]. Specific to this criterion, the agency’s policy states that the Commission will provide written notice of a decision to award initial accreditation or preaccreditation to an institution or a decision to renew an institution’s accreditation or preaccreditation to all the entities listed in this section no later than 30 days after making the decision.
For the on-site file review conducted during July 2022, Department staff reviewed several examples of written notifications regarding the accreditation actions enumerated at 602.26(a)(1) and (2) and confirmed they were sent to the Secretary, the appropriate State licensing or authorizing agency, the appropriate accrediting agencies, and the public within 30 days after the agency made the decision. Department staff notes that the agency informs the public by posting notices in two community newspapers, "Hamodia" and "Yated Ne'eman."

Department staff also confirmed the agency is reporting decisions under this criterion to the Department’s Database of Accredited Postsecondary Institutions and Programs (DAPIP) system. The agency is reminded to continue using the Department’s DAPIP system to report notifications under this criterion in the future as the information is relied upon by Federal Student Aid, state agencies, other accreditors as well as students, families, employer, and taxpayers.

List of Document(s) Uploaded by Analyst - Narrative

No files uploaded

Analyst Worksheet - Response

Analyst Review Status:

Not Reviewed

Criteria: 602.26(b)

Description of Criteria

(b) Provides written notice of a final decision of a probation or equivalent status or an initiated adverse action to the Secretary, the appropriate State licensing or authorizing agency, and the appropriate accrediting agencies at the same time it notifies the institution or program of the decision and requires the institution or program to disclose such an action within seven business days of receipt to all current and prospective students;

Narrative:

The Handbook, page 66, reads:
The Commission will provide written notice to the Secretary, the appropriate State licensing or authorizing agency, and the appropriate accrediting agencies at the same time it notifies the institution or program of the decisions of -

(1) An initiated adverse action.

(2) A final decision to place an institution on probation or equivalent status.

The Commission requires institutions to disclose such actions to all current and prospective students within seven business days of receipt.

Documentation:
Handbook, p. 66 [Exhibit 1]

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Analyst Worksheet- Narrative

Analyst Review Status:
Meets the requirements of this section

Analyst Remarks to Narrative:

The agency’s written notification policy found at Section IV.(f) of its Handbook addresses the requirements of this criterion [Exhibit 1]. Specific to this criterion, the agency’s policy states that the Commission will provide written notice to the Secretary, the appropriate State licensing or authorizing agency, and the appropriate accrediting agencies at the same time it notifies the institution or program of the decisions of the actions enumerated in this section and requires institutions to disclose such actions to all current and prospective students within seven business days of receipt.

As previously noted, the agency has not issued probation or equivalent status or initiated adverse actions to any of its accredited institutions during the current recognition period and therefore has no examples of notifications meeting the requirements of this criterion.
Department staff confirmed the agency is reporting accrediting decisions to the Department’s Database of Accredited Postsecondary Institutions and Programs (DAPIP) system. The agency is reminded to continue using the Department’s DAPIP system to report notifications under this criterion in the future as the information is relied upon by Federal Student Aid, state agencies, other accreditors as well as students, families, employer, and taxpayers.

### List of Document(s) Uploaded by Analyst - Narrative

No files uploaded

### Analyst Worksheet - Response

**Analyst Review Status:**

Not Reviewed

### Criteria: 602.26(c)

**Description of Criteria**

(c) Provides written notice of the following types of decisions to the Secretary, the appropriate State licensing or authorizing agency, and the appropriate accrediting agencies at the same time it notifies the institution or program of the decision, but no later than 30 days after it reaches the decision:

1. A final decision to deny, withdraw, suspend, revoke, or terminate the accreditation or preaccreditation of an institution or program.

2. A final decision to take any other adverse action, as defined by the agency, not listed in paragraph (c)(1) of this section:

**Narrative:**

The Handbook, [Exhibit 1] page 66, reads:

The Commission will provide written notice to the Secretary, the appropriate State licensing or authorizing agency, and the appropriate accrediting agencies at the same time it notifies the institution or program of the decision, but no later than thirty days after it reaches the decision.
(1) A final decision to deny, withdraw, suspend, revoke, or terminate the accreditation or preaccreditation of an institution or program;

(2) A final decision to take any other adverse action, as defined in this Handbook, not listed in the paragraph immediately above.

Documentation:
Handbook, p. 66 [Exhibit 1]

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Analyst Worksheet- Narrative

**Analyst Review Status:**
Meets the requirements of this section

**Analyst Remarks to Narrative:**

The agency’s written notification policy found at section IV.(f) of its Handbook addresses the requirements of this criterion [Exhibit 1]. Specific to this criterion, the agency’s policy states that the Commission will provide written notice of the following decisions to the Secretary, the appropriate State licensing or authorizing agency, and the appropriate accrediting agencies at the same time it notifies the institution or program of the decision, but no later than 30 days after it reaches the decision: a final decision to deny, withdraw, suspend, revoke, or terminate the accreditation or preaccreditation of an institution or program; a final decision to take any other adverse action, as defined by the agency, not listed in paragraph (c)(1) of this section.

As previously noted, the agency has not issued any adverse actions to any of its accredited institutions during the current recognition period and therefore has no examples of notifications meeting the requirements of this criterion.

Department staff confirmed the agency is reporting accrediting decisions to the
Department’s Database of Accredited Postsecondary Institutions and Programs (DAPIP) system. The agency is reminded to continue using the Department’s DAPIP system to report notifications under this criterion in the future as the information is relied upon by Federal Student Aid, state agencies, other accreditors as well as students, families, employer, and taxpayers.

**List of Document(s) Uploaded by Analyst - Narrative**

No files uploaded

**Analyst Worksheet - Response**

**Analyst Review Status:**

Not Reviewed

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**Criteria: 602.26(d)**

**Description of Criteria**

(d) Provides written notice to the public of the decisions listed in paragraphs (b) and (c) of this section within one business day of its notice to the institution or program;

**Narrative:**

The Handbook, [Exhibit 1] pages 66-67, reads:

The Commission will provide written notice to the public within one business day of its notice to the institution of

(1) An initiated adverse action.

(2) A final decision to place an institution or program on probation or an equivalent status.

(3) A final decision to deny, withdraw, suspend, revoke, or terminate the accreditation or preaccreditation of an institution or program;

(4) A final decision to take any other adverse action, as defined in this Handbook, not listed in the paragraph immediately above.

The Commission will provide written notice to the public of the decisions made
above within one business day of its notice to the institution.

Documentation:
Handbook, pp. 66-67 [Exhibit 1]

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Analyst Worksheet- Narrative

**Analyst Review Status:**
Meets the requirements of this section

**Analyst Remarks to Narrative:**

The agency’s written notification policy found at section IV.(f) of its Handbook addresses the requirements of this criterion [Exhibit 1]. Specific to this criterion, the policy states that the Commission will notify the public within one business day of its notification to the institution of all actions enumerated in 602.26(b) and (c) of this section.

As previously noted, the agency took no actions as described at 602.26(b) and (c) of this section during the current recognition period and therefore has no examples to demonstrate application of its procedure. The agency’s primary means to notify the public is through posting notifications in two community newspapers, the "Hamodia" and "Yated Ne'eman."

Department staff also confirmed the agency is reporting decisions under this criterion to the Department’s Database of Accredited Postsecondary Institutions and Programs (DAPIP) system. The agency is reminded to continue using the Department’s DAPIP system to report notifications under this criterion in the future as the information is relied upon by Federal Student Aid, state agencies, other accreditors as well as students, families, employer, and taxpayers.

**List of Document(s) Uploaded by Analyst - Narrative**

No files uploaded
Criteria: 602.26(e)

Description of Criteria

(e) For any decision listed in paragraph (c) of this section, requires the institution or program to disclose the decision to current and prospective students within seven business days of receipt and makes available to the Secretary, the appropriate State licensing or authorizing agency, and the public, no later than 60 days after the decision, a brief statement summarizing the reasons for the agency's decision and the official comments that the affected institution or program may wish to make with regard to that decision, or evidence that the affected institution has been offered the opportunity to provide official comment;

Narrative:

This concern, too, is addressed in the Handbook [Exhibit 1] on page 67:

The Accreditation Commission requires any institution subject to a final decision to deny, withdraw, suspend, revoke, or terminate the school’s accreditation or a final decision to take any other adverse action as defined in the Handbook page ----to disclose this decision to current and prospective students within seven business days of receipt.

The Commission makes available to the Secretary, the appropriate State licensing or authorizing agency, and the public, no later than sixty days after the decision a brief statement summarizing the reasons for the Commission’s decision and official comment by the affected institution with regard to that decision. If the institution does not offer any comment, the Commission must provide evidence that the school was offered the opportunity to provide official comment.

Documentation:
Handbook, p. 67 [Exhibit 1]
Analyst Worksheet- Narrative

Analyst Review Status:

Meets the requirements of this section

Analyst Remarks to Narrative:

The agency’s written notification policy found at section IV.(f) of its Handbook addresses the requirements of this criterion [Exhibit 1]. As previously noted, the agency requires institutions to disclose to all current and prospective students within seven business days of receipt of any notification of Commission actions as described in section 602.26(c). Further, the agency’s policy requires it to make available to the Secretary, the appropriate State licensing or authorizing agency, and the public, a brief statement summarizing the reasons for the agency’s decision and the official comments that the affected institution or program may wish to make regarding that decision, or evidence that the affected institution has been offered the opportunity to provide official comment. The policy requires the brief summary to be submitted within 60 days. A footnote to the agency’s policy clarifies that the decision letter contains information to the institution informing it that it can submit a comment regarding an action to terminate its accreditation.

As previously noted, the agency has not issued any adverse actions to any of its accredited institutions during the current recognition period and therefore has no examples of notifications meeting the requirements of this criterion.

Department staff also confirmed the agency is reporting decisions under this criterion to the Department’s Database of Accredited Postsecondary Institutions and Programs (DAPIP) system. The agency is reminded to continue using the Department’s DAPIP system to report notifications under this criterion in the future as the information is relied upon by Federal Student Aid, state agencies, other accreditors as well as students, families, employer, and taxpayers.

List of Document(s) Uploaded by Analyst - Narrative

No files uploaded
Criteria: 602.26(f)

Description of Criteria

(f) Notifies the Secretary, the appropriate State licensing or authorizing agency, the appropriate accrediting agencies, and, upon request, the public if an accredited or preaccredited institution or program—

(1) Decides to withdraw voluntarily from accreditation or preaccreditation, within 10 business days of receiving notification from the institution or program that it is withdrawing voluntarily from accreditation or preaccreditation; or

(2) Lets its accreditation or preaccreditation lapse, within 10 business days of the date on which accreditation or preaccreditation lapses.

Narrative:

The concerns of the Secretary are addressed in the Handbook, [Exhibit 1] page 67:

The Commission notifies the Secretary, the appropriate State licensing or authorizing agency, the appropriate accrediting agencies, and, upon request, the public if an accredited or preaccredited institution —

(1) Decides to withdraw voluntarily from accreditation or preaccreditation, within 10 business days of receiving notification from the institution that it is withdrawing voluntarily from accreditation or preaccreditation; or

(2) Lets its accreditation or preaccreditation lapse, within 10 business days of the date on which accreditation or preaccreditation lapses.

Documentation:
Handbook, p. 67 [Exhibit 1]
The agency’s written notification policy found at section IV.(f) of its Handbook addresses the requirements of this criterion [Exhibit 1]. The policy clearly states that the Commission will notify the Secretary, the appropriate State licensing or authorizing agency, the appropriate accrediting agencies, and, upon request, the public if an accredited or preaccredited institution take the actions enumerated in 602.26(f)(1)-(2) of this section. The policy states it will notify the appropriate entities within 10 business days of receiving notification from the institution.

For the on-site file review conducted during July 2022, Department staff reviewed several examples of written notifications regarding the accreditation actions enumerated at 602.26(f)(1) and confirmed they were sent to the Secretary, the appropriate State licensing or authorizing agency, the appropriate accrediting agencies, and the public within 10 days of receiving notification from the institution or program that it is withdrawing voluntarily from accreditation or preaccreditation. Department staff notes that the agency informs the public by posting notices in two community newspapers, "Hamodia" and "Yated Ne'eman."

Department staff also confirmed the agency is reporting decisions under this criterion to the Department’s Database of Accredited Postsecondary Institutions and Programs (DAPIP) system. The agency is reminded to continue using the Department’s DAPIP system to report notifications under this criterion in the future as the information is relied upon by Federal Student Aid, state agencies, other accreditors as well as students, families, employer, and taxpayers.

List of Document(s) Uploaded by Analyst - Narrative

No files uploaded
Analyst Worksheet - Response

Analyst Review Status:

Does not meet the requirements of this section

Staff Determination:

The agency does not meet the requirements of this section. The agency must submit additional information and documentation that demonstrates it notifies the Secretary, the appropriate State licensing or authorizing agency, the appropriate accrediting agencies, and, upon request, the public if an accredited or preaccredited institution lets its accreditation or preaccreditation lapse, within 10 business days of the date on which accreditation or preaccreditation lapses.

Analyst Remarks to Response

Department staff initially found the agency in compliance with this criterion in the draft analysis based on the agency's narrative, Handbook, and on-site file review. However, based on new information received during the final analysis about institutions that allowed their accreditation to lapse during the current recognition period, Department staff is finding the agency in non-compliance with section 602.26(f)(2). As discussed in sections 602.19(a) and 602.25(f), the agency reports that four institutions allowed their accreditation to lapse during the recognition period. In each case, the agency declared the institution's lapsed accreditation status “moot” after the institution submitted missing documentation. As discussed in sections 602.19(a) and 602.25(f), the agency's policies related to institutions whose accreditation has lapsed are non-compliant with those sections.

Specific to section 602.26(f)(2), Department staff notes that the institution should have notified the Secretary, the appropriate State licensing or authorizing agency, the appropriate accrediting agencies, and, upon request, the public if an accredited or preaccredited institution lets its accreditation or preaccreditation lapse, within 10 business days of the date on which accreditation or preaccreditation lapses. The agency did not provide documentation in its petition or as part of the file review demonstrating compliance with section 602.26(f)(2) for the four institutions listed in Exhibit 53.

List of Document(s) Uploaded by Analyst - Response

No file uploaded
Criteria: 602.27 (a)(1-4)

Description of Criteria

(a) The agency must submit to the Department—

(1) A list, updated annually, of its accredited and preaccredited institutions and programs, which may be provided electronically;

(2) A summary of the agency's major accrediting activities during the previous year (an annual data summary), if requested by the Secretary to carry out the Secretary's responsibilities related to this part;

(3) Any proposed change in the agency's policies, procedures, or accreditation or preaccreditation standards that might alter its—

   (i) Scope of recognition, except as provided in paragraph (a)(4) of this section; or

   (ii) Compliance with the criteria for recognition;

(4) Notification that the agency has expanded its scope of recognition to include distance education or correspondence courses as provided in section 496(a)(4)(B)(i)(I) of the HEA. Such an expansion of scope is effective on the date the Department receives the notification;

Narrative:

The Handbook on page 65 provides that:

The Commission Will Submit

(1) A copy of any annual report it prepares;

(2) A copy, updated annually, of its directory of accredited and preaccredited institutions and programs;

(3) A summary of the major accrediting activities during the previous year (an annual data summary), if requested by the Secretary to carry out the Secretary's responsibilities.

(4) Any proposed change in AARTS policies, procedures, or accreditation standards that might alter its --

   (i) Scope of recognition, (except as provided in paragraph (5) which follows) or
(ii) Compliance with the criteria for recognition.

(5) Notification that AARTS has expanded its scope of recognition to include distance education or correspondence education as provided in section 496(a)(4)(B)(i)(1) of the HEA. Such an expansion of scope is effective on the date the Department receives the notification.

(6) The name of any institution or program it accredits that the Commission has reason to believe is failing to meet its Title IV, HEA program responsibilities or is engaged in fraud or abuse, along with the agency’s reasons for concern about the institution or program; and

(7) If the Secretary so requests information that may bear upon an accredited or preaccredited institution’s compliance with its Title IV, HEA program responsibilities, including the eligibility of the institution or program to participate in Title IV, HEA programs.

The Commission does not have a policy regarding notification to a school, of the Commission’s contact with the Department as in (6) and (7) above.

AARTS does not prepare an annual report. During the period under review.

(1) The Secretary did not request AARTS an annual data summary;

(2) There was not any proposed or actual expansion of AARTS' scope of recognition;

(3) AARTS did not have reason to believe that any institution that it accredits was failing to meet its Title IV HEA program responsibilities or was engaged in fraud or abuse;

(4) and the Secretary did not request information regarding an accredited or preaccredited institution's compliance with its Title IV, HEA program responsibilities.

The AARTS Accreditation Commission submits to the Department of Education an updated copy of its list of accredited and preaccredited institutions and programs. The current directory appears on pages 110-135 of the Handbook.

Documentation:
Handbook, p. 65, pp. 110-135 [Exhibit 1]
Analyst Worksheet- Narrative

**Analyst Review Status:**

Meets the requirements of this section

**Analyst Remarks to Narrative:**

Section IV.(e) of the agency’s handbook addresses the requirements of this criterion. The policy states the Commission will submit to the Department of Education all the information and documentation enumerated in 602.27(a)(1)-(4) of this section. The agency further states that the Commission does not prepare an annual report and none was requested by the Secretary during the recognition period. The agency attests in its narrative that there were no proposed or actual change in its scope of recognition, including related to distance education or correspondence courses. The agency’s primary source of notification of the list of accredited and preaccredited institutions is its Handbook. The list meeting the requirements of this section is found on pages 110-135 [Exhibit 1].

**List of Document(s) Uploaded by Analyst - Narrative**

No files uploaded

**Analyst Worksheet - Response**

**Analyst Review Status:**

Not Reviewed

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**Criteria: 602.27 (a)(5-6),(b)**

**Description of Criteria**

(5) The name of any institution or program it accredits that the agency has reason to believe is failing to meet its title IV, HEA program responsibilities or is engaged in fraud or abuse, along with the agency's reasons for concern about the institution or program; and
If the Secretary requests, information that may bear upon an accredited or preaccredited institution's compliance with its title IV, HEA program responsibilities, including the eligibility of the institution or program to participate in title IV, HEA programs.

(b) If an agency has a policy regarding notification to an institution or program of contact with the Department in accordance with paragraph (a)(5) or (6) of this section, it must provide for a case-by-case review of the circumstances surrounding the contact, and the need for the confidentiality of that contact. When the Department determines a compelling need for confidentiality, the agency must consider that contact confidential upon specific request of the Department.

Narrative:

Page 65 of the Handbook states:

The Commission does not have a policy regarding notification to a school, of the Commission’s contact with the Department as in (6) and (7) above.

Documentation:
Handbook, p. 65 [Exhibit 1]

Analyst Worksheet- Narrative

Analyst Review Status:
Meets the requirements of this section

Analyst Remarks to Narrative:

Section IV.(e) of the agency’s handbook also addresses the requirements of this criterion [Exhibit 1]. Specific to this criterion the agency’s policy states it will submit all the information and documentation enumerated in 602.27(a)(5)-(6) of this section.

In addition, the agency attests in its narrative that it has no reason to believe that any institution it accredits was failing to meet its title IV, HEA responsibilities or was engaged in fraud or abuse during the current recognition period. In addition, the agency states the Secretary did not request information regarding an accredited or preaccredited institution’s compliance with its title IV, HEA, program responsibilities. Lastly, the agency states that the Commission does not have a policy
regarding notification to an institution of the Commission’s contact with the Department as described in 602.27(a)(5) and (6) of this section.

**List of Document(s) Uploaded by Analyst - Narrative**

No files uploaded

**Analyst Worksheet - Response**

**Analyst Review Status:**

Not Reviewed

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**Criteria: 602.28 (a)**

**Description of Criteria**

(a) If the agency is an institutional accrediting agency, it may not accredit or preaccredit institutions that lack legal authorization under applicable State law to provide a program of education beyond the secondary level.

**Narrative:**

On page 7, the Handbook reads:

The Accreditation Commission will not grant accreditation or preaccreditation status to institutions that lack legal authorization under applicable state law to provide a program of education beyond the secondary level.

**Documentation:**

Handbook, p. 7 [Exhibit 1]

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**Document(s) for this Section**

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**Analyst Worksheet- Narrative**

**Analyst Review Status:**
Does not meet the requirements of this section

**Staff Determination:**

The agency must implement a process to ensure that it does not accredit or preaccredit institutions that lack legal authorization under applicable State law to provide a program of education beyond the secondary level and provide documentation demonstrating application of that process, as applicable. Furthermore, the agency must state whether it has had cause to act if an institution was not in compliance with State requirements, as applicable.

**Analyst Remarks to Narrative:**

Section II.(c) of the agency’s Handbook addresses the requirements of this criterion [Exhibit 1]. Specifically, the section “General Criteria” states that before applying for accreditation an institution shall be incorporated as a non-profit institution in the legal jurisdiction in which it operates; be licensed or chartered to operate as required by applicable state law; and in continuous existence as an institution of higher education for a period of two years. Furthermore, the section states that the Accreditation Commission will not grant accreditation or preaccreditation status to institutions that lack legal authorization under applicable state law to provide a program of education beyond the secondary level.

Although the agency’s policy is compliant with the requirements of this criterion it did not provide documentation to substantiate it verifies state authorization prior to granting initial or renewal of accreditation or preaccreditation. At the on-site file review conducted during July 2022, Department staff inquired about the agency’s process for verifying legal authorization under applicable State law to provide a program of education beyond the secondary level as part of the accreditation review process. The agency advised it has a check list it uses to ensure an institution has the proper legal authorization prior to granting initial accreditation or preaccreditation; however, it does not keep a copy of the authorization in the institution’s file. Furthermore, the agency advised it does not recheck legal authorization prior to granting an institution renewed accreditation. Lastly, the agency did not state whether it has taken any action if an institution was not in compliance with state requirements.

**List of Document(s) Uploaded by Analyst - Narrative**

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Response:
In response a question has been added to the Institutional Survey asking the schools to submit their State Authorization letter.

During the period of recognition there has not been any instance where an institution has not been in compliance with State requirements.

At the Annual Meeting of February 19, 2023 the membership unanimously approved a policy whereby every school’s file will contain a copy of the State Authorization.

Exhibit:

Exhibit 80: State Authorization in the Institutional Survey

**Analyst Worksheet - Response**

**Analyst Review Status:**

Does not meet the requirements of this section

**Staff Determination:**

The agency does not meet the requirements of this section. The agency must provide documentation that substantiates its new policy requiring state legal authorization be part of each institution’s file and that current state legal authorization is verified prior to any renewal of accreditation.

**Analyst Remarks to Response**

In response to the draft analysis the agency states there were no instances where an institution has not been in compliance with State requirements. In addition, the agency has modified its procedures to now require its accredited institutions to submit their state authorization letters each year and the agency will ensure every accredited institution has one on file. However, the agency did not provide any documentation to demonstrate application of its new policy nor did it provide documentation to substantiate its statement that there were no instances where an institution has not been in compliance with State requirements.

**List of Document(s) Uploaded by Analyst - Response**
Criteria: 602.28 (b)

Description of Criteria

(b) Except as provided in paragraph (c) of this section, the agency may not grant initial or renewed accreditation or preaccreditation to an institution, or a program offered by an institution, if the agency knows, or has reasonable cause to know, that the institution is the subject of--

(1) A pending or final action brought by a State agency to suspend, revoke, withdraw, or terminate the institution's legal authority to provide postsecondary education in the State;

(2) A decision by a recognized agency to deny accreditation or preaccreditation;

(3) A pending or final action brought by a recognized accrediting agency to suspend, revoke, withdraw, or terminate the institution's accreditation or preaccreditation; or

(4) Probation or an equivalent status imposed by a recognized agency.

Narrative:

On page 70, the Handbook reads:

Furthermore, the Commission will not accredit, preaccredit, or grant initial or renewed accreditation to a school that it knows or has reasonable cause to know is subject to:

A pending or final action brought by a State agency to suspend, revoke, withdraw, or terminate the institution’s legal authority to provide postsecondary education in the State.

We have not had any occasion to apply this provision.

Documentation:
Handbook, p. 70 [Exhibit 1]
Section IV.(i), Regards for Decisions of Other Bodies, of the agency’s Handbook addresses the requirements of this criterion [Exhibit 1]. Specifically, the section states that the agency will not grant initial or renewed accreditation or preaccreditation to an institution, if the agency knows, or has reasonable cause to know, that the institution is subject to the element found at 602.28(b)(1). The section further states that the Accreditation Commission will not recognize an institution which simultaneously possesses accreditation by another recognized accreditor, therefore the elements found at 602.28(b)(2)-(4) do not apply. Lastly, the agency states it has not had occasion to apply this provision.

**List of Document(s) Uploaded by Analyst - Narrative**

No files uploaded

**Analyst Worksheet - Response**

**Analyst Review Status:**

Not Reviewed

**Criteria: 602.28 (c)**

**Description of Criteria**

(c) The agency may grant accreditation or preaccreditation to an institution or program described in paragraph (b) of this section only if it provides to the Secretary, within 30 days of its action, a thorough and reasonable explanation, consistent with its standards, why the action of the other body does not preclude the agency’s grant of accreditation or preaccreditation.
The Handbook addresses this concern on page 70:

Should the Commission be prepared to accredit such an institution, it will first provide to the Secretary, within 30 days of its action, a thorough and reasonable explanation, based on its standards, why the action of the State agency does not preclude the Commission’s grant of accreditation.

We have not had any occasion to apply this provision.

**Document(s) for this Section**

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**Analyst Worksheet - Narrative**

**Analyst Review Status:**

Meets the requirements of this section

**Analyst Remarks to Narrative:**

Section IV.(i), Regard for Decisions of Other Bodies, of the agency’s Handbook addresses the requirements of this criterion [Exhibit 1]. Specifically, the section states that if the agency will grant accreditation or preaccreditation to an institution described in paragraph (a) of this section, it will first provide to the Secretary, within 30 days of its action, a thorough and reasonable explanation, based on its standards, why the action of the State agency does not preclude the Commission’s grant of accreditation. In addition, the agency states it has not had occasion to apply this provision.

**List of Document(s) Uploaded by Analyst - Narrative**

No files uploaded

**Analyst Worksheet - Response**

**Analyst Review Status:**

Not Reviewed
Criteria: 602.28 (d)

Description of Criteria

(d) If the agency learns that an institution it accredits or preaccredits, or an institution that offers a program it accredits or preaccredits, is the subject of an adverse action by another recognized accrediting agency or has been placed on probation or an equivalent status by another recognized agency, the agency must promptly review its accreditation or preaccreditation of the institution or program to determine if it should also take adverse action or place the institution or program on probation or show cause.

Narrative:

We don’t allow any of our accredited schools to be recognized by another agency.

Document(s) for this Section

No files uploaded

Analyst Worksheet- Narrative

Analyst Review Status:

Meets the requirements of this section

Analyst Remarks to Narrative:

As previously noted and stated by the agency in this section, the agency does not accredit institutions accredited by another accrediting agency [Exhibit 1, page 70].

List of Document(s) Uploaded by Analyst - Narrative

No files uploaded

Analyst Worksheet - Response

Analyst Review Status:

Not Reviewed

Criteria: 602.28 (e)
(e) The agency must, upon request, share with other appropriate recognized accrediting agencies and recognized State approval agencies information about the accreditation or preaccreditation status of an institution or program and any adverse actions it has taken against an accredited or preaccredited institution or program.

Narrative:

On page 71, the Handbook further reads:

The Commission will, upon request, share with other appropriate recognized accrediting agencies and recognized State approval agencies information about the accreditation or preaccreditation status of its institutions and any adverse actions it has taken against an accredited or preaccredited school.

The Accreditation Commission routinely informs states in which AARTS accredited schools are located, about all Accreditation Actions.

Documentation:
Handbook, p. 71 [Exhibit 1]

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Analyst Worksheet- Narrative

**Analyst Review Status:**

Does not meet the requirements of this section

**Staff Determination:**

The agency must provide examples of information sharing with recognized state approval agencies about the accreditation or preaccreditation status of an institution or program and any adverse actions it has taken against an accredited or preaccredited institution or program, as applicable.

**Analyst Remarks to Narrative:**
Section IV.(i), Regards for Decisions of Other Bodies, of the agency’s Handbook addresses the requirements of this criterion [Exhibit 1]. Specifically, the section states that “the Commission will, upon request, share with other appropriate recognized accrediting agencies and recognized State approval agencies information about the accreditation or preaccreditation status of its institutions and any adverse actions it has taken against an accredited or preaccredited school.” The agency further notes that it routinely informs states about all accreditation actions; however, the agency did not provide any examples of information sharing. Department staff notes that the agency has not taken any adverse actions during the current recognition period.

List of Document(s) Uploaded by Analyst - Narrative

No files uploaded

Response:

An example of a regular process is attached.

Exhibit:

Exhibit 76: Public Notice – State Agencies

Analyst Worksheet - Response

Analyst Review Status:

Meets the requirements of this section

Analyst Remarks to Response

In response to the draft analysis the agency provided an example of information sharing with other accrediting/approval bodies; however, the documentation is an example of the agency's public notice required under section 602.26. The agency clarified in an e-mail “There were no instances of recognized accrediting agencies or state approval agencies contacting AARTS during the current recognition period to request information about the accreditation or preaccreditation status of an institution or any adverse actions AARTS may have taken against one of its accredited or preaccredited institutions.” [Exhibit 49]

List of Document(s) Uploaded by Analyst - Response

No file uploaded
### 3rd Party Written Comments

There are no written comments uploaded for this Agency.

### 3rd Party Request for Oral Presentation

There are no oral comments uploaded for this Agency.