



Applied Sociology, Clinical Sociology, Engaged Public Sociology, Translational Sociology, Forensic Sociology, and Rural Sociology Programs in Sociological Practice

Accreditation Policies and Procedures

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Commission on the Accreditation of Programs in Applied and Clinical Sociology

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1.0 Introduction

1.1 The Commission on the Accreditation of Programs in Applied and Clinical Sociology (hereafter referred to as the Commission or CAPACS) was incorporated in the State of Michigan in 1995, as an independent accreditor of higher education programs in sociological practice worldwide by representatives of the Society for Applied Sociology and the Sociological Practice Association. Originally founded as The Commission on Applied and Clinical Sociology, the Commission changed its name in 2010, to convey its focus and work more accurately under Restated Articles of Incorporation. The Commission accredits programs in applied sociology, clinical sociology, engaged public sociology, translational sociology, forensic sociology, rural sociology (e.g., development and global), and other approaches of sociological practice and identity that may emerge consistent with the program curricula, education, training, and professional work recognized by the Commission. The Commission's mission is to develop, promote, and support quality sociological education and practice by establishing the standards for such programs, accrediting programs that demonstrate that they meet the standards, and monitoring accredited programs to ensure that they continue to meet the standards. The Commission was formally recognized as a nonprofit corporation, organized and operated as a tax exempt 'Business League' under Section 501(c)(6) of the Internal Revenue Code, or corresponding section of any future federal tax code, in a letter of determination by the IRS dated March 26, 1998. The IRS reaffirmed this recognition in a new letter of determination dated May 4, 2012, following the Commission's change in name.

1.2 The Commission conforms to the principles of equality, equal opportunity, and nondiscrimination with regard to race, color, ethnicity, religion, creed, gender, gender identity, sex, sexual orientation, age, national origin, disabilities, genetic status, and the marital status of faculty, staff, and students, especially in hirings, promotions, and admissions. In the United States, this includes all classifications governed under [Title VI](#) and [Title VII](#) of the Civil Rights Act of 1964, and other Federal laws including the Americans with Disabilities Act, and numerous state antidiscrimination laws, applying to non-religious, non-profit corporations. *In instances where the institution and/or State (domestic or foreign) does not recognize all classifications, the Commission will consider compliance on a case-by-case basis.*

1.3 In support of the above stated goals, the Commission has developed an accreditation review process. This review process involves five components: (1) a program self-study and report for review by an accreditation review committee (2) a site visit and report by a site visit team, inviting comment from the program, (3) an interim report on accreditation (without recommendation) by the accreditation review committee, also inviting comment from the Program, (4) a final report on accreditation (with recommendation) by the Commission, based upon all available evidence, and (5) an annual report to the Commission by the program following accreditation or

reaccreditation for the maintenance of the Program's accreditation status. A suggested timeline can be found in *Appendix A*.

- 1.4** Programs accredited by the Commission will be listed on the CAPACS website, and in "The Registry of Accredited Applied Sociology, Clinical Sociology, Engaged Public Sociology, Translational Sociology, Forensic Sociology, and Rural Sociology Programs in Sociological Practice" (hereafter referred to as the "Registry of Programs") at the Baccalaureate, Masters, and Doctoral Levels. The "Registry of Programs" is an unpublished document and part of the Commission's records. It is used for internal purposes only. The Commission authorizes only CAPACS accredited programs to download and use the Commission's "CAPACS Accredited" logo in their informational materials (hardcopy and digital formats), following the guidelines published on the CAPACS website. The Commission assumes no liability or obligation arising out of the misuse of the "CAPACS Accredited" logo by these programs and their host institutions. The Commission's logos are registered under domestic and international trademarks with the United States Patent and Trademark Office (USPTO).
- 1.5** Graduates from accredited programs will be listed in "The Registry of Graduates in Accredited Applied Sociology, Clinical Sociology, Engaged Public Sociology, Translational Sociology, Forensic Sociology, and Rural Sociology Programs in Sociological Practice" (hereafter referred to as the "Registry of Graduates") at the Baccalaureate, Masters, and Doctoral Levels. The "Registry of Graduates" is an unpublished document and part of the Commission's records. It is used for internal purposes only.
- 1.6** Deadlines for each step in the accreditation review process, including payment of specified fees, must be met by the applicant program (hereafter also referred to as the Program) for the Program to continue in the process.
- 1.7** Any member of the Commission who has a potential conflict of interest is expected to recuse her or himself (or themselves) from all actions in an accreditation review process. *The recusal shall be in accordance with the provisions of the Commission's "Conflict of Interest Policy and Disclosure Form", signed and dated by the member and filed with the Commission.*
- 1.8** Results of the accreditation review process will be released by official action of the Commission only. No individual member of the Commission, accreditation review committee member or chair, staff member or others involved in the process shall make any disclosure about individual program evaluations during or after the completion of the review process.
- 1.9** The documents (hardcopy or digital format) used by the applicant program for the accreditation process for applied sociology, clinical sociology, engaged public sociology, translational sociology, forensic sociology, and rural sociology programs in sociological practice programs are the:

 - a. Accreditation Application Form.
 - b. Standards at the Baccalaureate, Masters, or Doctoral Level.
 - c. Self-study Guidelines at the Baccalaureate, Masters, or Doctoral Level (for

- d. completing the Self-study Report).
 - d. Accreditation Policies and Procedures.
 - e. Accreditation Review Process Guidelines.
 - f. Annual Report Form (following initial accreditation).
- 1.10** Programs seeking initial accreditation or reaccreditation must provide complete and detailed documentation for use by the Commission in determining compliance with the Standards. The burden of proof rests with the Program.
- 1.11** In assessing each program for accreditation or reaccreditation, the Commission shall base its conclusions on:
- a. Compliance with the Standards.
 - b. Overall quality of the Program.
- 1.12** The Commission reserves the right to make accreditation determinations for individual programs based on a review of available evidence.
- 1.13** The Commission may grant departures from the Standards based upon written justification from the Program approved by the CAPACS Board of Directors.
- 1.14** The initial accreditation will be for a period of up to five (5) years. Accreditation may be *full* or *provisional*. A program that is not accredited will receive a determination of *accreditation denied* (see Section 8.3, in this document). Reaccreditation will be for a period of up to seven (7) years. Reaccreditation may be *full* or *probationary*. A program that is not re-accredited will receive a determination of *Accreditation Revoked* (see Sections 9.2 and 9.3, in this document).
- 1.15** An accredited program that requests the withdrawal of accreditation during an accreditation or reaccreditation period, chooses not to apply for reaccreditation, or fails to apply for reaccreditation in a timely manner shall be responsible for graduating the students it has accepted and are currently enrolled in the program. The Program shall continue to be accredited until it indicates that it has graduated all currently enrolled students in an Annual Report to the Commission. The period shall be determined by consensus of the Program and the Commission. Upon verification, the Commission shall withdraw the Program's accreditation (also see Sections 4.5, 9.5, and item 12 in Appendix A in this document; and Section VIII in the [Accreditation Review Process Guidelines](#)). The Program shall be responsible for the payment of annual continuation fees to the Commission through the agreed date of cessation.

2.0 Eligibility Requirements

- 2.1** Application for accreditation is open to baccalaureate, masters, and doctoral level programs in sociological practice, including applied sociology, clinical sociology, engaged public sociology, translational sociology, forensic sociology, rural sociology (e.g., development and global), and other approaches of sociological practice and identity that may emerge consistent with the program curricula, education, training, and professional work recognized by the Commission. Applicant Programs must meet

the Preconditions for Review as outlined in the Standards (See Section 1.0, in the Baccalaureate, Masters, and Doctoral Level Standards) and as documented in the initial application form.

3.0 Fees

3.1 The current fee schedule for U.S. programs is listed below. It is subject to periodic review.

Application Fee	\$ 100
Accreditation Fee	\$2,000
Annual Fee	\$ 500

The fee schedule for non-U.S. programs is scaled in accordance with [The World Bank Classification of Economies](#), and is arranged by the parties at the time of application at current exchange rates and valuations.

3.1.1 A non-refundable application fee is due upon submission of a Program's completed Accreditation Application Form. *This fee applies to an initial application only.*

3.1.2 A Program will pay a set accreditation fee at the time of submission of its self-study report. This fee will be divided as follows: (1) The first half of this fee covers the initial committee review of the self-study report; this portion of the fee is non-refundable; (2) The remaining half of the fee covers the site visit and final report; this portion is refundable if the Commission determines that a site visit cannot be scheduled within two (2) years of the date of submission of the self-study report. The review committee will make a recommendation to the Commission after its initial review on whether it believes a site visit can be scheduled within two years. If a site visit cannot be scheduled within two years, the review committee will make a recommendation to the Commission about whether to refund that half of the fee.

3.1.3 Other fees may be required.

3.1.4 Consistent with Section IV.G.3 of the [Accreditation Review Process Guidelines](#), the Program is responsible for reimbursing the Site Visit Team Members within two weeks of submission of an expense report.

3.1.5 The Program must pay accreditation, reaccreditation, and annual continuation fees between reaccreditations to the Commission in order to be listed on the CAPACS website and in *The Registry of Accredited Programs*.

4.0 Application for Accreditation or Reaccreditation

4.1 Application forms and other information related to the accreditation process are available from the Commission's Executive Office and the CAPACS website. Questions regarding the process should be directed to the Executive Office. Contact information

for the Commission's Executive Office can be found in the footer on the cover page of all Commission documents and on all web pages on the CAPACS website.

- 4.2** An application for accreditation or reaccreditation must be sent to the Commission's Executive Office to initiate the process. The Executive Office is the current Chair's office. The application form must contain original signatures of the chief academic officer, academic dean, department chair, and program director. A program description from the catalog and/or published brochure describing the program must accompany the application. The Program description may be hardcopy or digital format (e.g., MS Word document, PDF, or URL link on the website).
- 4.3** An Initial Application for Accreditation shall be valid for 18 months from the date of receipt of that Application. Failure to submit the self-study report during that time will result in the need to resubmit a new Initial Application to the Commission's Executive Office.
- 4.4** A Program may voluntarily withdraw from the initial accreditation review process at any time.
- 4.5** An accredited Program may choose not to apply for reaccreditation. If an accredited Program chooses not to apply for reaccreditation, the Commission will withdraw the Program's accreditation. *The Program shall be responsible for graduating the students it has accepted and are currently enrolled in the program. The Program shall continue to be accredited until it indicates it has graduated all currently enrolled students in an Annual Report to the Commission. The period shall be determined by consensus of the Program and the Commission. Upon verification, the Commission shall withdraw the Program's accreditation (also see Sections 1.15, 9.5, and item 12 in Appendix A in this document; and Section VIII in the [Accreditation Review Process Guidelines](#)). The Program shall be responsible for the payment of annual continuation fees to the Commission through the agreed date of cessation.*

5.0 Self-Study Report

- 5.1** Self-study Reports are required as part of the accreditation and reaccreditation process.
- 5.2** The Self-study Report must comply with the *Accreditation Review Process Guidelines*, and include full text narratives and supporting documentation for all required components.
- 5.3** Upon receipt of the Self-study Report, the Commission Chair will review the Report for completeness. Reports deemed "complete" will be sent to an Accreditation Review Committee appointed by the Chair and Vice-Chair of the Commission in consultation with the Executive Committee. The Commission Chair will return an incomplete Self-study Report to the Program Director with instructions for its proper completion and resubmission. This may result in possible delays. Refer to the *Accreditation Review Process Guidelines* for detailed information on the submission,

review, and acceptance process of the Self-study Report.

- 5.4** The Accreditation Review Committee reviews the Program’s Self-study Report for compliance with the Commission’s Standards at the degree level at which the program is applying. After the Self-study Report is accepted by the Accreditation review Committee, a site visit is scheduled. Programs will have up to two years from the time of submission of the self-study report to host the site visit. *Refer to Section 7.2, in this document, below, for information on scheduling and hosting a virtual site visit during an international crisis or pandemic.*
- 5.5** After two years, the Commission will determine whether the Program shall be required to submit an updated Self-Study Report, if circumstances warrant it (See Section 11.4, in this document).
- 6.0 Accreditation Review Committee**
- 6.1** The Chair and Vice-Chair of the Commission appoint the Accreditation Review Committee (hereafter referred to as the Committee), and designate the Committee Chair and Site Visit Team, in consultation with the Executive Committee.
- 6.2** The Committee shall consist of a chair plus four (4) additional members, totalling five members. Two (2) of the additional members shall serve as the Site Visit Team.
- 6.3** The Chair of the Committee serves as the primary contact with the Program.
- 6.4** Members of the Committee shall have appropriate training to carry out their responsibilities (See Section II A-C in the [Accreditation Review Process Guidelines](#) for additional information on the training, membership, roles, and responsibilities of the ARC Chair, Site Visitors, and Reviewers).
- 6.5** Persons affiliated with the Program, such as a faculty member or former faculty member, students or former students, external advisers, or others with potential conflicts of interest shall not serve on the Committee. *If any of these persons currently serve on the Commission, they shall be required to file a signed and dated “Conflict of Interest Policy and Disclosure Form”, as indicated in Section 1.7, in this document).*
- 6.6** The Accreditation Review Committee reviews the Self-study Report; conducts the pre-site visit screening; communicates deficiencies that may preclude a site visit to the Program; schedules the site visit; communicates findings in an interim report on accreditation, without recommendation, for comment by the Program; and writes a final report on accreditation, with recommendation, to the Commission. These activities will be conducted in accordance with the *Accreditation Review Process Guidelines*.

7.0 Site Visits

- 7.1** Site visits will be scheduled only during the following months: September, October, November, February, March, and April. *If the Commission determines that a program has valid reasons for requesting a different month for scheduling the site visit, it may grant an exception. An example would be to accommodate a nontraditional academic term or calendar year for a domestic or international program.*
- 7.2** Site Visits will be conducted in accordance with the *Accreditation Review Process Guidelines* and will be two to three days in duration. *During an international crisis such as the COVID-19 (Coronavirus) pandemic, the site visit will be conducted virtually using appropriate interactive technologies (e.g., teleconferences and videoconferences). In general, U.S. and other national guidance recommends that an abbreviated physical site visit should follow as soon as practicable to confirm that the information obtained during the virtual site visit complies with the standards of the accrediting commission or entity. CAPACS will consult program directors on “best practices” during the crisis and post guidance on the Commission’s website.*
- 7.3** The Program will be responsible for the expenses of the Site Visit Team.
- 7.4** The Site Visit Team will conduct an exit meeting with the Program Director and other departmental representatives, and institutional administrators. The exit meetings provide an overview of the strengths and weakness of the program, and review the subsequent steps in the accreditation review process. Before departing, the Site Visit Team will provide the Program with a site visit report that includes a summary of the program’s strengths and weaknesses and compliance with the standards. The Program will be invited to return comments, clarifications, and supplemental materials as requested.
- 7.5** The Site Visit Team will provide a copy of the Site Visit Report to the Chair of the Accreditation Review Committee, along with any additional comments, clarifications, and supplemental materials submitted by the Program after the site visit.

8.0 Accreditation Review Committee Report and Recommendation

- 8.1** The Accreditation Review Committee will examine all documents submitted in connection with the accreditation review process. This review includes the Site Visit Report, and any comments, clarifications, and supplemental materials submitted by the Program.
- 8.2** The Committee will prepare an interim report on accreditation, without recommendation, that will be sent to the Program for final comment and clarification.
- 8.3** Following the receipt of a response from the Program, the Committee will prepare a full report on accreditation to be sent to the Commission. This report will include a recommendation for one of the following accreditation statuses:

- ✓ **Full Accreditation:** a status granted to a Program when the available evidence indicates that an Applicant Program is in substantial compliance with all of the Standards of the Commission. Full accreditation is awarded for five (5) years.
- ✓ **Provisional Accreditation:** a status granted to a Program when an Applicant Program is in substantial compliance with the Standards of the Commission, and any deficiencies are such that they can be corrected within a short period of time. Provisional accreditation shall not exceed two (2) years. During that time, if the Program can correct the deficiencies, the Program will be awarded Full Accreditation for the remainder of the five (5) year accreditation period. If the deficiencies have not been corrected within the two (2) year period, the Program will no longer be accredited.
- ✓ **Accreditation Denied:** when the available evidence indicates that an applicant Program is in substantial non-compliance with the Standards of the Commission.

9.0 Reaccreditation Process

9.1 A Program will be notified one (1) year in advance of the need to apply for reaccreditation.

9.2 A Program seeking reaccreditation will undergo the same accreditation review process as specified in this document. Reaccreditation will be for a period of up to seven (7) years.

9.3 Following the receipt of a response from the Program, the Accreditation Review Committee will prepare a full report on accreditation to be sent to the Commission. The report will include a recommendation for one of the following reaccreditation statuses:

- ✓ **Full Reaccreditation:** a status granted to a Program when the available evidence indicates that an Applicant Program is in substantial compliance with all of the Standards of the Commission.
- ✓ **Probationary Reaccreditation:** a status granted to a Program when an accredited Program experiences changes that cause the Program to fall below substantial compliance of all the Standards of the Commission. Programs on probationary status will be given a maximum of two (2) years to correct the problems that have caused them to fall below Commission Standards. If the Program successfully remedies the deficiencies, the Program will be restored to Full Accreditation status. If the Program is unable to correct the deficiencies within the two (2) year period, the Program will no longer be accredited.
- ✓ **Accreditation Revoked:** when the available evidence indicates that an applicant Program is in substantial non-compliance with the Standards of the Commission.

- 9.4** If the Commission determines that a currently accredited program has valid reasons for requesting a delay in its scheduled review, the Commission may extend its accreditation for up to one (1) year.
- 9.5** If an accredited program chooses not to apply for reaccreditation, the Commission will withdraw the Program's accreditation. *The Program shall be responsible for graduating the students it has accepted and are currently enrolled in the program. The Program shall continue to be accredited until it indicates it has graduated all currently enrolled students in an Annual Report to the Commission. The period shall be determined by consensus of the Program and the Commission. Upon verification, the Commission shall withdraw the Program's accreditation (also see Sections 1.15, 4.5, and item 12 in Appendix A in this document; and Section VIII in the [Accreditation Review Process Guidelines](#). The Program shall be responsible for the payment of annual continuation fees to the Commission through the agreed date of cessation.*
- 10.0 Commission Final Report and Recommendation on Accreditation/Reaccreditation**
- 10.1** The Commission will review the final report and recommendation on accreditation of the Accreditation Review Committee and make a final determination on the accreditation/reaccreditation status of the Program.
- 10.2** The Program Director, the chief academic officer, and the president will be notified in writing of the Commission's determination and will receive a copy of the Commission's final report and recommendation on accreditation/reaccreditation. Reasons for *Provisional Accreditation, Probationary Accreditation, Accreditation Denied, and Accreditation Revoked* will be specified.
- 10.3** Only Programs receiving *Full Accreditation, Provisional Accreditation, or Probationary Reaccreditation* will be listed on the CAPACS website, and in the Commission's "Registry of Programs" at the baccalaureate, masters, and doctoral levels. Only these Programs are eligible to use the "CAPACS Accredited" logo in their informational materials (hardcopy and digital formats), registered under domestic and international trademarks with the United States Patent and Trademark Office (USPTO), following the guidelines published on the CAPACS website. *For additional information and disclaimers on the list and "Registry of Programs," and the approved use of the Commission's logos by accredited programs, please see Section 1.4, in this document.*
- 10.4** A Program receiving *Provisional Accreditation or Probationary Reaccreditation* will be permitted to correct deficiencies within a period specified by the Commission and submit evidence of compliance. At that time, the Commission will make a redetermination of the accreditation status of the Program.
- 11.0 Maintenance of Accreditation Status**
- 11.1** To maintain accreditation during the period approved by the Commission, and to

remain listed on the CAPACS Website and in the Commission’s “Registry of Programs,” the Program must pay the annual fee as specified by the Commission. Payment of the annual fee also is required to maintain the Program’s eligibility to use the “CAPACS Accredited” logo in its informational materials (hardcopy and digital formats), registered under domestic and international trademarks with the United States Patent and Trademark Office (USPTO), following the guidelines published on the CAPACS website. *For additional information and disclaimers on the list and “Registry of Programs,” and the approved use of the Commission’s logos by accredited programs, please see Section 1.4, in this document.*

11.2 An accredited Program must submit an annual report within two months of the end of the Program’s academic year to the Vice-Chair of the Commission for review. This report will specify continuities and changes in the Program’s implementation, including resources, faculty, administration, curriculum, goals, and learning outcomes. The annual report will become part of the Program’s permanent accreditation file. Continued accreditation is contingent upon maintaining the standards by which the program was most recently accredited and/or making progress towards removing deficiencies identified by the Commission. *Refer to Section VII in the [Accreditation Review Process Guidelines](#) for additional information on the requirements and deadlines for preparing and submitting the annual report.*

11.3 If the annual report is not received on time and/or does not receive formal acceptance, the Commission may decide to pursue further inquiry which may lead to probationary accreditation or a decision that the program’s accreditation be revoked. The Vice-Chair of the Commission will communicate the Commission’s findings to the Program.

11.4 If substantial changes occur, the Program shall notify the Commission of the nature of the changes. Substantial changes are defined as changes in the preconditions of program eligibility and/or the addition or deletion of a degree, major, or concentration. The Commission may require the Program to submit an updated Self-study Report to maintain its accredited status; a site visit also may be required. Based upon a review of the substantial changes and required information, the Commission may award *Full Reaccreditation*, grant *Probationary Reaccreditation*, or determine that the Program’s accreditation be revoked (*Accreditation Revoked*).

12.0 Appeal of Commission Determinations on Accreditation/Reaccreditation

12.1 The Program may appeal to the Commission’s final determination on accreditation or reaccreditation. Grounds for appeal are that the Commission’s final determination was clearly erroneous as to fact or interpretation of the Standards or that there was a procedural error in the accreditation/reaccreditation review process.

12.2 A Program initiating an appeal will retain its current accreditation status (See Section 8.3 or 9.3, in this document) until the appeal process is completed.

12.3 A Program wishing to appeal (hereafter referred to as the Appellant) must submit a

request for a hearing to the Commission Chair in writing within 30 days of notification of the Commission's final determination on accreditation/reaccreditation. The request shall state specifically the basis of the appeal and include an agreement to bear all costs as indicated, below, in Sections 12.10 and 12.11, of this document.

- 12.4** Within 30 days, the Commission Chair shall provide the Appellant with a list of six names of impartial persons (and brief biographical sketches) as potential members of the Appeals Panel (hereafter referred to as the Panel). Each of these persons shall have agreed that he or she (or they) is willing to serve on the Panel and have been enjoined from discussing the matter with anyone. Members of the Commission and the Program's Accreditation/Reaccreditation Review Committee are not eligible for panel selection.
- 12.5** The Appellant shall review the list of six (6) names and have an opportunity to strike no more than two (2) persons.
- 12.6** The Commission Chair will select three (3) persons from the remaining pool.
- 12.7** The three (3) persons selected will constitute the Appeals Panel. The Commission will notify the Panel members of their selection. Within thirty (30) days of notification, the Panel members will select one of their members to serve as Panel Chair and notify the Appellant and the Commission.
- 12.8** Within thirty (30) days of selection, the Panel Chair shall determine the date and the site of the hearing in conjunction with the Appellant and the Commission. The hearing may be conducted face-to-face at a designated site or virtually through an interactive videoconference as technologies permit. After consultation with the Commission Chair and the Appellant, the Panel Chair shall decide whether the hearing is open or closed and who will be in attendance. The Panel Chair shall then formally notify the Appellant and the Commission Chair of the date and location (physical or virtual) of the hearing at least 30 days in advance of the hearing. The hearing must be held within 90 days of the selection of the Panel Chair.
- 12.9** The Commission will provide each Panel member and the Appellant with:
- a. A copy of the appeal request stating the grounds for the appeal.
 - b. A copy of the Accreditation Self-Study Report.
 - c. A copy of the Site Visit Team Report.
 - d. A copy of the Accreditation/Reaccreditation Review Committee Report and Recommendation
 - e. A copy of the Commission's Final Report on Accreditation/Reaccreditation.
 - f. Copies of the Annual Reports, if applicable.
 - g. A copy of the published version of the Accreditation *Standards* used in the review process.
 - h. A copy of the published version of the Accreditation *Self-Study Guidelines* used for completing the Self-study Report.
 - i. A copy of the published version of the *Accreditation Policies and Procedures* used in the review process.

- j. A copy of the published version of the *Accreditation Review Process Guidelines* used in the review process.
 - k. Any relevant correspondence and documentation on file.
- 12.10** For face-to-face hearings at a designated site, the Appellant shall pay all travel expenses of the Panel members and all other costs associated with the hearing except the Commission's legal fees, if any.
- 12.11** At least two (2) weeks before the hearing, the Appellant may request in writing that a transcript of the hearing or a recording of the videoconference be made. The Appellant must pay for the transcript or applicable videorecording costs. If the Commission desires a transcript or video recording, the applicable costs will be shared equally.
- 12.12** The hearing must be conducted in the presence of all Panel members. The procedures must include the right of the Appellant and Commission to appear before the Panel, to be represented by counsel if so desired, to present oral and documentary evidence, to cross examine witnesses, and to present oral argument within the time limits prescribed by the Panel Chair.
- 12.13** The final decision of the Panel shall be based on all of the evidence presented.
- 12.14** Within thirty (30) days of the completion of the hearing, the Panel shall submit its decision and rationale in writing to the Appellant and Commission.
- 12.15** The decision of the Appeals Panel is binding upon both parties.
- 12.16** Public statements concerning the Appellant's accreditation/reaccreditation status shall be withheld until the Panel has notified both parties of the Panel's final decision.

Appendix A

Accreditation and Reaccreditation Process

Suggested Timeline

1. Process Begins: The Program submits a completed *Accreditation Application Form* with a non-refundable *application fee* of \$100 to the Commission Chair (the application fee is required for the initial application only). If the preconditions are met per the application information, the program begins work on the self-study report. The Program will refer to the following documents throughout the review process: (a) the accreditation *Standards* (at the Baccalaureate, Masters, or Doctoral Level); (b) the accreditation *Self-study Guidelines* (at the Baccalaureate, Masters, or Doctoral Level), for completing the Self-study Report; (c) the *Accreditation Review Process Guidelines*, and (d) the *Accreditation Policies and Procedures* for applied sociology, clinical sociology, engaged public sociology, translational sociology, forensic sociology, and rural sociology programs in Sociological Practice.¹

Estimated time: 2-3 weeks

2. The Program prepares the Self-study Report.

Estimated time: 2-3 months

3. The Program submits the Self-study Report (1 copy) with accreditation fee of \$2000 to the Commission Chair. The Self-study Report is a single digital document in MS Word or PDF format that includes a table of contents with live links to the narrative and supporting materials in the appendices. The Commission Chair reviews the Self-study Report for completeness. If the Self-study Report is deemed “complete,” the Chair and Vice-Chair of the Commission form an Accreditation Review Committee, and designate the committee chair and site visit team, in consultation with the Executive Committee. The Commission Chair deposits a copy of the Self-study Report in a shared folder in cloud storage for the Committee.

Estimated time: 3-4 weeks

4. The Accreditation Review Committee reviews the Self-study Report and schedules a conference call, and additional conference calls, as necessary.

Estimated time: 2-3 months

5. If the Self-study Report is deemed acceptable by the Accreditation Review Committee, a site visit is scheduled (see Section 7.2, in this document for scheduling a virtual site visit

¹ A Program may voluntarily withdraw from the initial accreditation review process at any time (see Section 4.4, in this document). An accredited program that requests the withdrawal of accreditation during an accreditation or reaccreditation period, chooses not to apply for reaccreditation, or fails to apply for reaccreditation in a timely manner are subject to the provisions in Sections 1.15, 4.5, and 9.5, and item 12 in Appendix A in this document (also see Section VIII in the [Accreditation Review Process Guidelines](#)).

followed by an abbreviated physical site visit during an international crisis or pandemic).
Estimated time: 2-3 weeks

6. The Site Visit Team conducts a site visit hosted by the Program in September, October, November, February, March, or April (see Section 7.1, in this document for exceptions).

Estimated time: 3 days (refer to *Accreditation Review Process Guidelines* for details.)

7. The Site Visit Team writes a Site Visit Report and submits it to the Program Director for comments, clarifications, and supporting documentation as necessary, and to the Chair of the Accreditation Review Committee for distribution to the full committee. The Chair of the Accreditation Review Committee schedules a conference, and additional conferences as necessary, and prepares an interim "Report on Accreditation" (without recommendation) for comment by the Program.

Estimated time: 3-4 weeks

8. The Chair of the Accreditation Review Committee writes the final "Report and Recommendation on Accreditation" for the Commission, incorporating any changes.

Estimated time: 2-3 weeks

9. The Chair of the Accreditation Review Committee submits the final "Report on Accreditation and Recommendation" to the Commission Board (summer meeting/August or winter meeting/February) with all available evidence for review. The Board accepts or rejects the recommendation.

Estimated time: 1 day

10. Process ends:

- The Program is recommended and accepted by the Commission Board for *Full Accreditation* (up to 5 years).
- The Program is recommended and accepted by the Commission Board for *Provisional Accreditation* (2 years).
- A program that is not recommended and accepted for accreditation by the Commission Board will receive a determination of *Accreditation Denied* (see Sections 1.14, and 8.3, in this document).
- The Program is recommended and accepted by the Commission Board for *Full Reaccreditation* (up to 7 years).
- The Program is recommended and accepted by the Commission Board for *Probationary Reaccreditation* (2 years).
- A program that is not recommended and accepted for reaccreditation by the Commission Board will receive a determination of *Accreditation Revoked* (see Sections 1.14, 9.2, and 9.3, in this document).

11. Post Accreditation Process: Annual Reports to the Commission

Following accreditation and reaccreditation, the Program submits an Annual Report to

the Vice-Chair of the Commission within two months of the end of the Program's academic year (see Section 11.2, in this document; and refer to Section VII, in the [Accreditation Review Process Guidelines](#); and Standard 4.2.4, in the *Standards* for all degree levels).

12. Post Accreditation Process: The Program Requests the Withdrawal of Accreditation, Chooses Not to Apply for Reaccreditation, or Fails to Apply for Reaccreditation in a Timely Manner

An accredited program that requests the withdrawal of accreditation during an accreditation or reaccreditation period, chooses not to apply for reaccreditation, or fails to apply for reaccreditation in a timely manner shall be responsible for graduating the students it has accepted and are currently enrolled in the program. The Program shall continue to be accredited until it indicates it has graduated all currently enrolled students in an Annual Report to the Commission. The period shall be determined by consensus of the Program and the Commission. Upon verification, the Commission shall withdraw the Program's accreditation (also see Sections 1.15, 4.5 and 9.5, in this document; and Section VIII in the [Accreditation Review Process Guidelines](#)). The Program shall be responsible for the payment of annual continuation fees to the Commission through the agreed date of cessation.