2010 Procedures for Accreditation

NAAB

The National Architectural Accrediting Board, Inc.

For Professional Degree Programs in Architecture

Approved February 19, 2010. Effective April 1, 2010 for all accreditation actions scheduled to take place after January 1, 2011.

Table of Contents

SECTION 1. OVERVIEW

About the National Architectural Accrediting Board

Core Purpose
The National Architectural Accrediting Board (NAAB) was founded in 1940, to "produce and maintain current a list of accredited schools of architecture in the United States and its possessions, with the general objective that a well integrated and coordinated program of architectural education be developed that is national in scope and afford opportunity for architectural schools with varying resources and operating conditions to find places appropriate to their objectives and do high class work therein." Since 1975, the NAAB has accredited professional degree programs rather than schools or universities and only accredits the first professional degree program offered by any school or university. As such, the NAAB does not accredit pre-professional degrees or other preparatory education that may serve as a prerequisite for admission to a professional degree program.

The NAAB is the only agency recognized by registration boards in the United States to accredit professional degree programs in architecture. Because most registration boards require an applicant for licensure to hold an NAAB-accredited degree, obtaining such a degree is an essential part of gaining access to the licensed practice of architecture.
The curriculum of an NAAB-accredited degree program includes professional studies, general studies, and electives. To gain and retain accreditation of its degree program, each institution must both develop a program specific to its mission and also educate students to be knowledgeable and capable of producing work that can be measured by, and satisfy, specific performance criteria.

The NAAB fully recognizes the rights and responsibilities of the educational institutions that offer degrees in preparation for entry into professional careers in the licensed practice of architecture as defined and governed by the laws of the individual states and jurisdictions.
Educational institutions are composed of a faculty responsible for the appropriate development of individual courses and curricula that are required, at a minimum, to provide each student the educational opportunity to meet the student performance criteria as defined by the NAAB.

The NAAB recognizes the institutional rights and responsibilities of the faculty to explore fundamental and innovative educational concepts, scholarship, research, methods, and technologies that exceed the minimum student performance criteria and that will lead to even higher standards of performance within the profession of architecture and related alternative careers of diverse and creative service to society.

The NAAB is an independent nonprofit 501(c) 3 corporation with an office in Washington, D.C. It adheres to nondiscriminatory practices and is funded equally by the AIA, ACSA and NCARB, with a contribution by the AIAS. Directors and visiting team members are not compensated, but are reimbursed for expenses.

History
The first step leading to architectural accreditation was taken in Illinois where the first legislation regulating the practice of architecture was enacted in 1897. Following that enactment, the Illinois Board of Examiners and Regulators of Architects gave its first examination in 1898 and by 1902 had established a rule restricting the examination to graduates of the state's approved 4-year architecture curriculum. In 1903, the board expanded this policy to include graduates from Cornell, Columbia, and Harvard Universities, the Massachusetts Institute of Technology, and the University of Pennsylvania. That action suggested the need for national standards of architectural education.

The first attempt to establish national standards came with the founding of the Association of Collegiate Schools of Architecture (ACSA) in 1912 and its adoption 2 years later of "standard minima" that schools were required to meet to gain ACSA membership. While these standard minima were in place, ACSA membership was equivalent to accreditation.

In 1932, the ACSA abandoned the standard minima, causing an 8-year hiatus in the profession's national system of education—a hiatus brought to an end when the ACSA, the American Institute of Architects (AIA), and National Council of Architectural Registration Boards (NCARB) established the NAAB and gave it authority to accredit schools of architecture nationally.

The founding agreement of 1940 also announced the intention to create an integrated system of architectural education that would allow schools with varying resources and circumstances to develop according to their particular needs.

Today, the NAAB's accreditation system for *professional degree programs* within schools requires a self-assessment by the accredited degree program, an evaluation of that assessment by the NAAB, and a site visit by an NAAB team that concludes with a recommendation to the NAAB as to the term of accreditation. The decision regarding the term of accreditation is then made by the NAAB Board of Directors.

Composition of the NAAB Board of Directors
The National Architectural Accrediting Board (NAAB) is both a decision-making and policy-generating body composed of a 14-member Board of Directors. The American Institute of Architects (AIA), the Association of Collegiate Schools of Architecture, and the National Council of Architectural Registration Boards (NCARB) each nominate three directors for 3-year terms, which are staggered at 1-year intervals. The American Institute of Architecture Students (AIAS) nominates two directors for staggered 2-year terms. The directors, collateral organizations, and interested members of the public at large propose candidates for two public directors, who serve 3-year terms and are elected by the Board of Directors. In addition, the executive director serves *ex officio.* The Board also elects an executive committee that includes at least one representative each from the AIA, ACSA, and NCARB, to serve as president, president-elect, secretary, and treasurer for a period of one year. At the discretion of the president, the most senior member of the Board nominated by the AIAS may be invited to participate in the deliberations of the executive committee.

The Board of Directors holds three regular meetings per year: winter, summer, and autumn. At the adjournment of the autumn meeting, new officers and board members are seated. The Executive Committee handles matters delegated to it by the Board between full meetings and, when required, a Special Board Meeting can be called. Program accreditation decisions rest solely with the NAAB Board of Directors.

The NAAB reserves the right to vary from these published procedures if such an action is in the best interests of a program or programs. The Board of Directors has delegated responsibility for establishing and maintaining the operating procedures that support accreditation activities, including the implementation of these *Procedures* to the executive director.

International Activities

The NAAB's mission is "leadership in, and the establishment of, educational quality assurance standards to enhance the value, relevance, and effectiveness of the architectural profession" for programs in the United States. Given the increasing globalization of the profession, the number of American architects practicing throughout the world, the number of architects from other countries seeking to work in the United States, and professional organizations from a number of countries seeking the advice and help of the NAAB in developing educational standards in their own countries, the following are some of the ways in which the NAAB provides services internationally:

- Architectural programs (outside the US and Canada) that can meet the NAAB Conditions for Accreditation are eligible for full accreditation under the terms of the *2004 Conditions for Accreditation* and these procedures.
- Architectural programs (outside the US and Canada) who cannot meet the NAAB Conditions largely because they are not regionally accredited as required by Condition 11, are eligible to be evaluated for substantial equivalency. The NAAB occasionally evaluates programs outside the U.S., ineligible for NAAB accreditation, to determine if they are "substantially equivalent" to NAAB-accredited programs. The term "substantial equivalency" identifies a program as comparable in educational outcomes in all significant aspects, and indicates that it provides an educational experience meeting acceptable standards, even though such program may differ in format or method of delivery. ***Substantial equivalency is not accreditation.*** The NAAB has established *Procedures for Substantial Equivalen*cy. These are available on the NAAB website.
- The NAAB can provide advice and consultation to organizations in other countries that are developing accreditation standards and procedures. Such consulting is provided for a fee.
- The Education Evaluation Service for Architects (EESA) provides assistance to individuals who do not have a professional degree in architecture from an NAAB-accredited program and who wish to either apply for an NCARB Certificate or for registration by an NCARB member board. EESA works with both internationally educated architects and applicants in the NCARB Broadly Experienced Architect program. For additional information go to www.naab-eesa.org.

NAAB Accreditation Documents
The *2010 NAAB Procedures for Accreditation* and the *2009 NAAB Conditions for Accreditation* outline, respectively, the requirements an accredited degree program must meet and procedures that they and the visiting teams must follow in order to demonstrate the achievement of minimum standards and a uniform accrediting process. These documents also contain *suggestions* that programs and teams are encouraged to follow. These documents govern accreditation actions for the period 2011-2016 (including *Architecture Programs Reports* to be submitted in September 2010).

This document is a companion to the *2009 NAAB Conditions for Accreditation.* Each should be read in the context of the other.

The *Procedures* are reviewed and updated, as needed, at least every two years to reflect changes in operating policy or procedures that may have been undertaken since the last review. Proposed changes are released for public comment and review by the collateral organizations and the public at least 120 days prior to the Board meeting at which they are scheduled to be approved.

Conditions for Accreditation (2009 ed.)
The *2009 Conditions for Accreditation,* published separately, are the minimum standards professional degree programs in architecture are expected to meet in order to achieve and maintain accreditation by the NAAB. The *Conditions* are reviewed every five years through a comprehensive process of assessment, research, analysis, review by the Board of Directors, and consultation with representatives of the other collateral organizations – this is known as the Accreditation Review Process.

Resulting revisions are reviewed by the collateral organizations and approved by the NAAB Board of Directors in the year following the accreditation review process. The next edition of the *NAAB Conditions for Accreditation* will be released in 2014.

SECTION 2. ACCREDITATION

Types/terms of accreditation
Although there are minor distinctions among the procedures that apply to continuing, initial, or reinstated accreditation, the sequence is essentially the same for all institutions seeking NAAB action.

Terms of accreditation are initially recommended by a visiting team at the conclusion of the *Visiting Team Report (VTR).* These recommendations are advisory to the Board. Teams may select from among the following when making the recommendation.

Actions on terms of accreditation are taken at regularly scheduled meetings of the Board of Directors, except where noted. In all cases any motion regarding an accreditation action must have at least 8 votes in favor to pass.

1. **Terms of Continuing Accreditation.** Programs seeking continuing accreditation may receive one of the following terms of accreditation, or accreditation may be revoked.
    a. **Six-Year Term.** This term indicates that deficiencies, if any, are minor, and the intent to correct them is ensured. The program is accredited for a six-year period.

    b. **Six-Year Term with Focused Evaluation After 1, 2, or 3 Years.** This term indicates that major deficiencies may exist in one or more of the following areas:
        i.   Meeting the conditions in Part One (I) of the *2009 Conditions for Accreditation*,
        ii. Meeting the conditions in Part Two: Sections 2 or 3; or
        iii. That the team has identified significant "Causes of Concern" in the most recent *Visiting Team Report.*
        A review of these deficiencies forms the basis of the focused evaluation (See Section 6 for additional information).

    c. **Three-Year Term.** This term indicates that major deficiencies are present in at least three of the following areas at the time of the current visit and may also have been present at the time of the previous visit:
        Learning Culture and Social Equity
        Long-Range Planning
        Self-Assessment
        Physical Resources
        Human Resources and Human Resource Development
        Financial Resources
        Information Resources
        More than one-third of the SPCs in any realm

Additionally, a program may receive a three-year term if any single SPC has been identified as Not Met for two previous consecutive accreditation visits and remains Not Met during the current review.

Multiple deficiencies in these areas sufficiently affect the quality of the program and a full accreditation review is required after three years. At the next scheduled review, the program may only receive either a six-year term, with or without a focused evaluation, or a two-year probationary term.

d. **Two-Year Probationary Term.** This term indicates that the deficiencies are severe enough to erode the quality of the program and that the intent or capability to correct these deficiencies is not evident.
   i. The program is on probation and must show cause for the continuance of its accreditation.
   ii. At its next scheduled review, the program must receive at least a three-year term or accreditation will be revoked.
   iii. The next scheduled review of a program that has received a two-year probationary term usually will be conducted by a team consisting of three former NAAB Directors and a person not from the NAAB.
   iv. If a three-year term follows a two-year probationary term, the program must receive a six-year term, with or without a focused evaluation, at the next scheduled review or accreditation will be withdrawn.

e. **Revocation of Accreditation.** Indicates that insufficient progress was made during a two-year probationary term to warrant a three-year term. Accreditation can also be revoked if no *Architecture Program Report* is submitted or if the team observes substantial and uncorrectable noncompliance with the NAAB conditions for accreditation during any site visit.

2. **Candidacy and Initial Accreditation**. Institutions seeking initial accreditation for a professional degree program in architecture must first be granted candidacy status by the NAAB. Institutions intending to establish a professional degree program should seek guidance from the NAAB for assistance in selecting the appropriate degree program type or types before proceeding with the development of a candidacy application.
   a. **Initial candidacy**. Programs seeking candidacy may be granted a period of candidacy of not less than two years. The program must achieve initial accreditation within six years of the effective date of the term of initial candidacy.

   b. **Initial accreditation**. Beginning January 1, 2011, all visits for initial accreditation will take place in the fall semester following the graduation of

the first cohort of students. The term of initial accreditation will be granted as follows:

    i. The effective date of initial accreditation will be set as January 1 of the year in which the visit took place.

    ii. The next visit for continuing accreditation will be three years from the year in which the visit for initial accreditation was conducted.

    iii. The program must receive a six-year term at the first visit for continuing accreditation after a term for initial accreditation is granted.

Programs that received a term of initial accreditation before January 1, 2011 will not have the effective dates of their terms of initial accreditation adjusted retroactively.

c. **Continuing Accreditation**. Programs that have achieved an initial term of accreditation must subsequently achieve a six-year term of accreditation during their first visit for continuing accreditation.

For more information on candidacy and initial accreditation see Sections 4 and 5, respectively.

SECTION 3. PROCEDURES FOR CONTINUING ACCREDITATION

Today, the NAAB's system for accreditation of *professional degree programs* within institutions requires a self-assessment by the accredited degree program, an evaluation of that assessment by the NAAB, and a site visit by an NAAB team that concludes with a recommendation to the NAAB as to the term of accreditation. The decision regarding the term of accreditation is then made by the NAAB Board of Directors.

For programs that have achieved an initial accreditation or are seeking continuing accreditation of their NAAB-accredited degree programs, the sequence is essentially the same.
- Program submits an *Architecture Program Report*.
- NAAB assigns a visiting team and a visit is conducted.
- The visiting team prepares a report and makes a confidential recommendation to the NAAB Board.
- The Board makes the final decision.

Once the Board has made a decision regarding a term of accreditation, continuing accreditation is subject to the submission of *Annual Reports* (See Section 11).

1. **Architecture Program Report**
    a. **Purpose**. *The Architecture Program Report* (*APR*) serves both as a self-study for the program and as the principal source document for conducting the visit.

    b. **Content**. The *APR* is, largely, a narrative document that is comprehensive and self-analytical. It is expected to succinctly describe how a program meets each of the conditions for accreditation. However, to the extent that photographs, tables, or other types of information support the program's narrative, they should also be included, but not to the detriment of the narrative. Areas and levels of excellence will vary among accredited degree programs as will approaches to meeting the conditions and reporting requirements. Nevertheless, schools must present complete and accurate information to demonstrate compliance with each of the NAAB Conditions; positive aspects of a degree program in one area cannot override deficiencies in another.

    c. **Format.** Schools must use the prescribed format for the *APR*. Each part is intended to allow a school to describe how the program's *unique qualities* and how its students' achievements satisfy the conditions that all accredited programs must meet. Hard copy *APR*s are limited to 150 (or 75 double-sided pages) pages excluding all supplemental information. Supplemental materials are limited to 100 pages (or 50 double-sided pages) and do not include the *VTR* from the previous visit or the institution's catalog. The *APR* is to be delivered either in Microsoft Word or Adobe PDF formats and are limited to a 7 MB file size. *APRs that exceed the file size or the page limits will be returned. Hard copy APRs will no longer be accepted.*

      i. Part One – Institutional Support and Commitment to Continuous Improvement
1. 1.1 Identity & Self-Assessment
2. 1.2 Resources
3. 1.3 Institutional Characteristics
   a. Statistical Reports
   b. *Annual Reports*[*]
   c. Faculty Credentials

     ii. Part Two – Educational Outcomes and Curriculum
1. 2.1 Student Performance Criteria
2. 2.2 Curricular Framework
3. 2.3 Evaluation of Preparatory/Pre-professional Education
4. 2.4 Public Information

   iii. Part Three – Progress Since the Last Site Visit
1. 3.1 Summary of Responses to the Team Findings
   a. Responses to Conditions Not Met
   b. Responses to Causes of Concern
2. 3.2 Summary of Responses to Changes in the NAAB Conditions[†]

   iv. Part Four – Supplemental Information
1. 4.4 Course Descriptions (see Appendix 1 for format)
2. 4.5 Faculty Resumes (see Appendix 2 for format)
3. 4.6 *Visiting Team Report* (*VTR*) from the previous visit and *Focused Evaluation Team Reports* from any subsequent Focused Evaluations
4. 4.7 Catalog (or URL for retrieving online catalogs and related materials)
5. Response to the Offsite Program Questionnaire (See Section 8)

     v. *APR*s may be submitted in electronic format only (see above)

The specific contents of the *APR* with respect to each element of Part One and Part Two are outlined in the *2009 Conditions for Accreditation*.

d. **Review and acceptance of the *APR*.**
   i. The *APR* is first reviewed by the NAAB staff to ensure it is complete.
   ii. The *APR* is then reviewed by the team chair for completeness and clarity, to discern the complexity of the program's structure, and to identify issues that affect the size of the team or length and locales of the site visit. The visiting team chair's review results in a recommendation to the Board to do one of the following:
      1. Accept the *APR* and schedule the site visit.

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[*] Information from 2008 forward will be provided by the NAAB from its Annual Report Submission System.
[†] This section is intended to give programs the opportunity to document how they have modified the program or resources in response to changes in the *2009 Conditions* as compared to the *Conditions* in effect at the time of the last visit.

2. Accept the *APR,* schedule the site visit, and request additional information before the visit.
3. Require additional information to be submitted by November 15 and schedule the site visit after the additional information is received, reviewed and determined to be acceptable.
4. Reject the *APR and* require a new report be submitted for review by November 15. If the new *APR* is considered acceptable, the visit will be scheduled.
   a. Should the chair recommend the *APR* be rejected, the *APR* and the chair's review are brought before the NAAB Board of Directors for review and action.
   b. Should the school fail to deliver an acceptable amended or replacement *APR* by 15 November, the chief academic officer of the institution is notified that the site visit cannot proceed and that accreditation may lapse.

e. **Dates/Deadlines**
   i. *APR*s must be received in the NAAB offices on or before September 7 of the calendar year immediately preceding the year in which accreditation is scheduled to expire (e.g., For visits scheduled in 2011, the *APR* is due September 7, 2010).
   ii. Review of *APR*s must be completed before the regularly scheduled fall meeting of the NAAB Board of Directors.
   iii. If a complete revision of the *APR* is requested by the team chair (see below), the revised *APR* is due November 15.

f. **Dissemination of the *APR* to the public prior to the visit.** To stimulate broad-based participation, the program is encouraged to distribute the *APR* within the school community before and during the site visit. However, the APR is not to be shared with the general public until after the final decision is communicated by the NAAB (see Section 3.5).

2. **Visiting Teams**
   a. **Composition of Teams**
      i. Teams are composed of at least four individuals, each of whom represents one of the four constituent organizations of the NAAB: the AIA, AIAS, ACSA, and NCARB. One member of the team will be nominated by the NAAB Executive Committee to serve as the team chair.
      ii. Teams are composed by the NAAB staff after the date for the visit has been set by the team chair and the program administrator. The NAAB makes every effort to ensure the team is balanced for geography, gender, race/ethnicity, and accreditation experience. In addition, the staff makes every effort to ensure that no one proposed as a member of a visiting team has a real or perceived conflict of interest as defined in Section 9. Every effort is made to assemble teams in such a way as to ensure that

not more than one person, excluding the AIAS representative, is on his or her first visit. This is not always possible.

    iii. Team members are advised of their preliminary selection for a specific visit with the understanding that final approval of the team is the responsibility of the program.

b. **Team Chair**

    i. **Role**. The team chair is responsible for the following:

      1. Negotiating the date for the visit with the program administrator.
      2. Reviewing the *APR* and identifying needs for additional information or requesting changes to the report.
      3. Developing the agenda for the visit with the program administrator.
      4. Consulting with the program administrator on the format and content of the team room.
      5. Approving all proposed non-voting members to the team. A team chair may also revoke this approval if he/she determines the non-voting member has a real or potential conflict of interest or is not prepared to fully participate in the visit.
      6. Leading a required pre-visit conference call with all members of the team to establish expectations for preparatory work prior to the visit, and special requirements or circumstances. This call is arranged by the NAAB in consultation with the chair.
      7. Preparing the final draft of the *Visiting Team Report* (see below) and sending it to the NAAB offices within 30 days of the last day of the visit.
      8. Securing the signatures of all team members on the report, including the non-voting member.
      9. Securing the signatures of the team on the confidential recommendation, excluding the non-voting member (see more below).
      10. Reviewing corrections and comments submitted by the NAAB staff.
      11. Approving corrections of fact submitted by the program after reviewing the draft *VTR*.
      12. Ensuring the team's compliance with the *Procedures for Accreditation* and appropriate standards of conduct during the visit.
      13. Attend team chair training.

    ii. **Selection**. Visiting team chairs are nominated by the Executive Committee before the site visit. The selection is based on a review of the resumes of former visiting team chairs and experienced visiting team members. Visiting team chairs may also be selected from among former directors of the NAAB. NAAB staff notify program administrators once a chair has been nominated. The administrator may challenge the

nomination for potential conflicts of interest (See Section 9). Once the chair has been confirmed, the administrator and the chair work together to select a date for the visit.

c. **Non-voting members**
   i. **Role**. To facilitate communication and foster a spirit of collaboration, the program is encouraged to nominate one or two non-voting members to the site visit.
   ii. **Selection and Approval**.
       1. The program administrator may identify up to two non-voting members. They must be mutually agreed upon by the administrator and the visiting team chair to be part of the team.
       2. A non-voting member may be a member of the architecture community or an *alumnus/a* nominated by the program administrator to offer insight into the program's unique qualities or history. NOTE: Alumni/ae who have graduated since the previous site visit are considered *per se* to have a real conflict of interest. Programs considering the use of *alumni/ae* in this role are encouraged to invite individuals who graduated at least 10 years prior to the visit.
       3. The NAAB may also propose non-voting members, including NAAB Directors, prospective team members, foreign visitors, NAAB consultants, representatives of affiliated accrediting agencies, staff from collateral organizations, or NAAB staff members.
       4. Members of previous accreditation teams cannot serve as non-voting members for any program on whose accrediting team they have previously served.
       5. Individuals who have currently or recently had a contractual or consulting relationship (either paid or voluntary) with the program or the institution may not serve as non-voting members for that program.
       6. Non-voting team members must complete all online training modules before the visit begins.
   iii. **Participation**.
       1. All non-voting members must participate throughout the entire site visit including orientation, entry meetings, evidence confirmation, and exit meetings. They are encouraged to offer comments and advice to the visiting team chair, team members, program, or institution.
       2. Non-voting members do not participate in the team's decision concerning the recommendation on the term of accreditation.
       3. Non-voting members may be present at the last team work session solely at the discretion of the visiting team chair.

4. All non-voting members must agree in advance to abide by the principles of confidentiality as outlined below and by the Conflict of Interest policies in Section 9.

d. **Notification to Program**. The NAAB staff notify the program administrator when a full team has been assembled. The program administrator is responsible for determining whether any member of the team poses a real or potential conflict of interest.

   i. **Conflicts of Interest**. The NAAB seeks to avoid any real or perceived conflict of interest in its procedures, deliberations, and accrediting decisions. See Section 9 for additional information on Conflict of Interest.

   ii. **Challenges to Team Members**. Programs may challenge no more than two members of a proposed visiting team, including the chair, under the terms of Section 9, Conflicts of Interest. Such challenges are to be made in writing within 10 days of receiving notice of the nomination of a team chair or the membership of a visiting team. Challenges will be reviewed by the NAAB executive director and accreditation manager. When challenges are permitted to stand, a new team member will be assigned. Challenges will not be accepted less than 21 days prior to the start of an accreditation visit.

3. **Site Visits**
   a. **Scheduling the Dates for the Visit**
      i. The dates for a visit for continuing accreditation are set by the team chair in consultation with the program administrator.
      ii. Generally, these visits take place between the last week of January and the first week of April each year.
      iii. Visits for continuing accreditation begin on Saturday evening and end the following Wednesday at noon.
      iv. All members of the team are expected to participate in the visit the entire time.
      v. Additional days may be added if the program is offered in more than one site; likewise individual members of the team may be scheduled to participate for more days to visit other locations for the program. These exceptions are agreed to by the team chair and the program administrator with advice from the NAAB staff. See Section 9 for additional information on visits with special circumstances.
      vi. Dates for visits cannot be changed once a team has been assembled and proposed to the program.

   b. **Schedule/Agenda for Each Visit**. Each visit must include, at a minimum, the following:
      i. **Prior to the Visit**
         1. **Team Orientation**. Team members and non-voting members participate in a mandatory pre-visit conference call, in which the

visiting team chair reviews the *APR, Conditions* and the *Procedures*, discusses visit protocols, and establishes expectations for each team member for how the team will work. Generally, this call will take place 14 days prior to the start of the visit.

2. **Review of the *APR*** (Team only). This review allows team members to discuss their initial reactions to the *APR*, to raise any initial concerns and to identify and prioritize the questions to be addressed during the visit. In light of this discussion, the visiting team chair outlines team assignments and may revise details of the agenda.

3. **Attend Team Training**. All team members are required to complete the NAAB Team Member Training program prior to the visit.

ii. **Onsite**
1. **Tours**
   a. **Physical Resources.** The school conducts a brief tour of the physical resources that support the professional degree program. This tour should include an explanation of how the team room is organized, the facilities the program uses, as well as, meetings with the personnel of media centers, workshops, and laboratories.
   b. **Library/Information Resources**. The library tour includes a meeting with the architecture librarian and visual resources professional to discuss their assessment of those components.
2. **Meetings (**NOTE: All meetings are confidential, informal discussions, **not** presentations.)
   a. **Staff**. This is a meeting with key staff of the academic unit and without any faculty or administrators present. Staff that attend this meeting should include but not be limited to administrative assistants, shop personnel, librarian, career placement professionals, advisors and others.
   b. **Program Head**. These include a discussion of issues arising from the *APR*, the program's strategic plan and self-assessment procedures, progress made since the previous site visit, any required changes to the visit agenda, and any requests for additional materials the team may need. These will usually happen every morning of the visit.
   c. **Entrance Meetings with the School or College Administrator, Chief Academic Officer, Faculty, and Students**. These are separate meetings and allow comparison of the views held by each constituency on the

program's strengths and causes for concern or any issue raised by the visiting team, the program, or the institution.

    i. Meetings with faculty must be open to all ranks from the various curricular areas, including those from other disciplines supporting the program.

    ii. Meetings with students, generally lead by the AIAS representative, without the presence of any administrators, staff, or faculty, should be arranged so that all students can attend.

  d. **Meeting with student representatives**. This is an informal gathering of a small group of student leaders, without the presence of any administrators, staff, or faculty, who may be officers in student organizations or elected to attend by their peers.

  e. **Contact with Graduates and Local Practitioners**. This is generally a social event that may include recent and past graduates, local registration board members, and representatives of the AIA chapter.

3. **Review of Student and Faculty Exhibits**. Team members are individually and jointly responsible for assessing work in the team room and elsewhere.

4. **Observation of Studios, Lectures, and Seminars**. The team may divide to attend scheduled classes and may use evenings to observe unscheduled studio activity.

5. **Review of General Studies, Electives, and Related Programs**. This review includes meetings with faculty or administrators to discuss prerequisite general studies courses, minors or concentrations that students may pursue, and any programs or groups that have a significant relationship with the accredited degree program.

6. **Review of School Records and Transfer Credit Assessment**. The visiting team chair may request school and student records, which should be presented with names removed.

7. **Debriefing Sessions**. Each evening, the team meets to evaluate its progress, adjust assignments, and assess the need for additional information.

8. **Accreditation Deliberation and Drafting the *VTR***. The last afternoon and evening of the site visit is devoted to developing the team's consensus on whether the program has met each of the NAAB conditions, drafting an assessment of the latter, and agreeing on the confidential recommendation to the NAAB Directors on a term of accreditation. By the end of the last work session, the *VTR* should be in a draft form and ready for editing by the visiting team chair.

9. **Exit interviews**. The sequence of exit interviews is proscribed in order to ensure the team delivers its initial information to key leaders within the institution and the program before addressing the faculty, staff, and students in the program. These interviews are not to take place until the team has finished its deliberations. Further, the purpose of these interviews is to communicate the following:
   a. the conditions met with distinction,
   b. the conditions not met,
   c. causes of concern, and
   d. any general team comments or acknowledgements.

These interviews are led by the chair; other members of the team may be called upon by the chair to comment. All members of the team are advised to avoid making any comments that may be interpreted as offering advice or other recommendations to the program or as revealing the content of the confidential recommendation.

The recommended sequence of exit interviews on Wednesday morning is as follows:
   1. Exit interview with the program administrator, 1 hour. Questions and answers of clarification are permitted; the team chair will lead any response.
   2. Exit interview with the leadership of the academic unit in which the program is located (e.g., director, chair, dean), 30 minutes. Questions and answers of clarification are permitted; the team chair will lead any response. NOTE: this may be broken down into more than one meeting.
   3. Exit interview with the central administrators responsible for oversight of the academic unit (e.g., provost, vice president for academic affairs, president), 30 minutes. Questions and answers of clarification are permitted; the team chair will lead any response.
   4. Exit interview with the students, faculty, and staff of the program, 30 minutes; questions and answers are not permitted.
   5. The team is expected to leave the institution as soon as the last interview is completed.

c. **Team Room**
   i. **Purpose**. The team room is a securable, reasonably soundproof room accessible only to the team that is set up within the building for the exclusive use of the team to evaluate the program in confidence.
   ii. **Contents**. Before the site visit, the program head and visiting team chair discuss the content and organization of the team room, which must

contain fully labeled and easily accessible exhibits of student work. Exhibits must include examples of both the minimum passing grade and high achievement; be of sufficient quantity to ensure that all graduates are meeting the performance criteria; have been executed since the previous site visit; and span no less than a single previous academic year. In all cases, student work should be presented in the form in which it was turned in. If work was turned in using electronic format, the program is expected to provide the applications used to create the work in order for the team to review it.

iii. **Standards for Visit Preparation**. The process of preparation for an accreditation visit – drafting documents, collecting, and displaying student work, documenting student achievement and outcomes, and installing prepared materials in the team room and beyond – shall be accomplished by the program in accordance with its studio culture policy.

The team room must contain the following:

1. **Student Studio Work**. The visual material should be mounted on vertical surfaces; not placed in stacks. The presentation of studio work must represent the full range of approaches taken and assignments made by various faculty and must include syllabi, project statement or assignments, handouts, bibliographies, and corresponding samples of student drawings and models. In addition to final projects, in-progress work and student journals must be included, or the progress of one group of students may be illustrated. Finally, the achievement of the student must be indicated (i.e., high or low pass) on the work.

2. **Course Notebooks**. A notebook should be provided for each required and elective course, including studio courses. The notebook must contain a syllabus showing weekly activities and assignments, a bibliography, quizzes and examinations, where applicable, and corresponding samples of student work with grades or instructors' comments included. The achievement of the student must be indicated (i.e., high or low pass) and a statistical summary of achievement by all students must also be included

   Notebooks may be presented electronically but only after consulting with the team chair. In the event a program chooses to present course notebooks electronically, it is the responsibility of the program to make this material available to the team in the team room.

3. **Student Admissions and Advising Files.** These are copies of files for students admitted to the program, with identifying information removed, that demonstrate the process by which students are admitted to the program and how, if appropriate,

advanced standing is determined (See *2009 Conditions for Accreditation*, Part II. Section 3.).

4. **Team Work Area**. The room must contain a conference table, with enough seating to accommodate the entire team.
5. **Access.** The team room must be lockable; the only keys are to be given to the members of the team. No one other than the team is to be in the room, except at the team's invitation.
6. **Equipment**. The room must contain a telephone, a document shredder, computer equipment as requested by the visiting team chair, Internet access, a printer, an LCD projector, and a sufficient number and type of electrical outlets.
7. **Visit Agenda and Resumes**. The visit agenda and resumes of the team should be posted in the vicinity of the room.
8. **Faculty Photos**. Faculty photos should be posted in the team room.
9. **Matrices**.
   a. A large format copy of the faculty credentials matrix for the current semester, described in the *2009 Conditions for Accreditation*, Part II; Section 3, Faculty Credentials, should be posted in the team room.
   b. A large copy of the matrix(ces), described in the *2009 Conditions for Accreditation* Part II: Section 1 , Student Performance Criteria, should be posted in the team room.

If work from more than one professional degree program or track or from additional teaching sites is being reviewed, student work from each program or track, or site must be clearly identified. While a range of work must be displayed for each required course, it is not necessary to present the complete output of a studio, lecture, or seminar.

Class assignments must be available for all projects presented. As the team will need to gain an overview of the curriculum and the integration of studio and coursework during each year of the program, it may be helpful to organize a single year's documentation in one area.

The program is responsible for determining the logic of the team room, in consultation with the chair. However each item must be cross-referenced to the course matrix and criteria it addresses, be dated, and indicate its assessment from minimum to high achievement. Ideally, examples by several different students or teams will be furnished.

Exhibits in spaces outside the team room can augment, but not substitute for, team room exhibits. They should be identified in a manner consistent with team room displays, except that indications of minimum to high pass should be omitted in public displays.

d. **Faculty Exhibits**. The program must provide evidence through a faculty exhibit[*] that the faculty, taken as a whole, reflects the range of knowledge and experience necessary to promote student achievement as described in Part Two of the *2009 Conditions for Accreditation*. This exhibit should include highlights of faculty professional development and achievement since the last accreditation visit.

4. **Visiting Team Report (VTR)**
   a. **Purpose.** The *VTR* serves multiple purposes. It is essential to the NAAB in making its accreditation decision; it may serve to strengthen the program and its position within the institution; and it may inform current and prospective students about the nature and quality of the program. *VTR*s are considered advisory to the NAAB Board of Directors. (A template for *VTRs* can be found in Appendix 1).

   b. **Contents**. The *VTR* conveys the visiting team's assessment of whether the program meets the *Conditions for Accreditation*, as measured by evidence of student learning, the overall capacity of the program to fulfill its obligations to ensure student achievement, and the overall learning environment. It establishes the degree to which the program is functioning in the manner described in the *APR*. Therefore, the *VTR* must be concise and consistent and include documentation of the following:
      i. The program's noteworthy qualities with respect to the *Conditions*.
      ii. The program's deficiencies with respect to the *Conditions*, especially the Student Performance Criteria.
      iii. Concerns about the program's future performance and/or capacity to meet its long-term strategic objectives.
      iv. Comments that may be helpful in preparing for future accreditation visits (if any).

   c. **Format**. The *VTR*, generally speaking, includes the following:
      i. **Section I – Summary of Team Findings**
         1. **Team Comments**. This is a narrative in which the team makes its general comments on the program, the *APR*, and its observations and assessments of the areas listed in 3.4.b. i-iv (above).
         2. **Conditions Not Met**. This is a list of the conditions and student performance criteria that the team determines are not met.

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[*] The faculty exhibit should be set up near or in the team room. To the extent the exhibit is incorporated into the team room, it should not be presented in a manner that interferes with the team's ability to view and evaluate student work.

3. **Causes for Concern**. This is a narrative that describes specific concerns of the team relative to unmet conditions or to conditions that may have been met within the strict definition of the condition/criterion, but for which the team has concerns or questions. This is a numbered list. Each item should have a brief title. It is not necessary for an unmet condition to generate a cause for concern; likewise conditions/criteria that are determined to be met may have also generated concerns within the team.

4. **Progress since the Previous Site Visit/*VTR***. This is a narrative in which the current team reviews the program's progress against each of the not-met conditions and causes of concern from the previous visit and *VTR*. It is the responsibility of the current team to determine, based on their review, whether previously not-met conditions are now met and whether the causes of concern have been addressed.

ii. **Section II – Compliance with the 2009 Conditions for Accreditation**

iii. **Section III – Appendices**

1. **Appendix A**. Program and institutional information from Part I: Section 1 of the *APR*.

2. **Appendix B**. Conditions Met with Distinction. This is a list of the conditions and student performance criteria for which the team wishes to commend the program. The team is encouraged to include a brief narrative for each one of the conditions or criteria listed here.

3. **Appendix C**. The team roster.

iv. **Section IV – Report Signatures.** This page includes the signatures of all team members, including the non-voting member(s).

v. **Section V. Confidential Recommendation**. This page transmits the team's recommendation on the term of accreditation to the NAAB Board of Directors, signed by all members of the team, <u>except</u> the non-voting member(s) (see Section 2 for terms that may be recommended).

d. **Review/Acceptance/Transmittal by the Team**. The team chair must transmit a final draft of the *VTR* to the NAAB office not later than 30 calendar days after the visit ends. During the interim, the team chair is responsible for completing the draft and collecting additional input or suggested text from the other members of the team.

e. **Review by NAAB Staff**. Upon receiving the draft from the team chair, the NAAB staff reviews the draft report and makes corrections for grammar, spelling, and punctuation. In addition, the report is reviewed for completeness and comprehension and to ensure the team has not offered advice or recommendations for changes or modifications to the program. If there are concerns or requests for additional review, the draft is returned to the chair. Once

the chair makes the adjustments to the draft, it is sent, without the confidential recommendation, to the program administrator.

f. **Corrections of fact**. The program administrator is asked to review the draft *VTR* to make corrections of fact only. These corrections are to be transmitted to the NAAB staff, who, in turn will review the corrections of fact with the team chair. The team chair has 10 calendar days to accept the corrections of fact and resubmit a final *VTR*.

g. **Optional response**. The final *VTR* is transmitted to the program administrator who may choose to write a response.

h. **Dates and deadlines**.
   i. 30 days after the visit ends: team chair sends draft *VTR* to NAAB staff.
   ii. NAAB staff complete the initial edits and corrections, in consultation with the chair, and then sends the draft *VTR* to the program administrator.
   iii. Within 10 calendar days of receiving the draft *VTR*, program submits corrections of fact. Corrections sent after the deadline will not be accepted.
   iv. Within 10 calendar days of receiving the corrections of fact, the team chair accepts or rejects the corrections and submits final *VTR* to NAAB staff.
   v. NAAB staff transmits the final *VTR* to the program administrator for an optional response.
   vi. Within 10 calendar days of receiving the final *VTR*, the program sends its optional response to NAAB offices. Responses sent after the deadline will not be forwarded to the Board.
   vii. Not later than 21 calendar days before the next meeting of the NAAB Board of Directors, NAAB staff prepare the final report package for Board of Directors review. This package contains the following:
      1. An executive summary
      2. The final *VTR*.
      3. Signature pages.
      4. Confidential recommendation page.
      5. Program response, if one is submitted.

5. **Decision of the Board of Directors**. At its next regularly scheduled meeting, the final report package, including the confidential recommendation is presented to the Board of Directors for a decision. The Board has the following options:
   a. To accept the recommendation of the visiting team on a term of accreditation.

   b. To reject the recommendation of the visiting team and to substitute a new term of accreditation, including the revocation of accreditation.

6. **Transmitting the Decision of the Board of Directors**. Within 14 calendar days of a Board decision regarding a term of accreditation, a letter announcing the decision is sent to the president of the institution, with copies to the program administrator, the team chair, and the team members. This letter is sent by U.S.P.S., certified-mail, return-receipt-requested. In the event the Board decides to revoke accreditation, the letter will include the reasons for the decision and advice for addressing the deficiencies before applying for reinstatement (See Section 8). The institution has 14 calendar days from the receipt of a decision letter to request reconsideration (see Section 12).

7. **Confidentiality**. The team and any non-voting members must maintain strict confidentiality with respect to materials reviewed, interviews conducted, and team deliberations, including the team's recommendation on a term of accreditation in perpetuity. The team bases its assessment of the program, in part, on interviews with various constituencies of the program. All individual and group interviews are confidential, and the information obtained from them is for the exclusive use of the team in preparing its report and recommendation.

    Before the accreditation decision, both the NAAB and the program are prohibited from making either the *APR* or the *VTR* available to the collateral organizations or the public.

8. **Public Disclosure of Accreditation Outcomes**
    a. After the accreditation decision, the program is required to disseminate the *APR*, the final *VTR* and pertinent attachments (including the program response, if one was prepared), the current editions of the *Conditions* and the *Procedures* and any addenda, and, eventually, the *Annual Reports* and the NAAB response to each *Annual Report*. These documents must be housed together in the architecture library and be freely accessible to all.

    b. Unless written permission is obtained from the NAAB, the program may disseminate only complete copies of the *APR*, *VTR*, the *Conditions* and the *Procedures* and any addenda. Programs may not publish these documents in abbreviated or excerpted forms.

    c. The program is required to provide faculty and students with access to the current student performance criteria and related accreditation documents (see *2009 Conditions for Accreditation,* Part II: Section 4 – Public Information*).

    d. The NAAB makes available in its office the *APRs* and the *VTRs* of all accredited programs, candidate programs, or programs that have lost accreditation. These are available to the public by appointment. Beginning in 2011, the NAAB will publish all *VTRs* after accreditation decisions are made at www.naab.org. These will be published without the confidential recommendation of the team.

    e. The accreditation decisions for a given year are published in the annual *Report on Accreditation in Architecture Education.* In addition they are made available to

the collateral organizations and the public, and to other organizations upon request.

    f.   Within 30 calendar days of a decision to revoke accreditation, the NAAB will notify the collateral organizations, the appropriate regional accrediting agency, and the licensing board for the jurisdiction in which the institution is located.

9. **Special Provisions for Institutions with More than One NAAB-Accredited Degree Program**. If an institution offers more than one NAAB-accredited degree program certain adjustments may be made to the schedule, team, and the *APR*.

    a.   **Adjustments to the Schedule**. To the extent possible, the NAAB prefers to schedule a concurrent review of all NAAB-accredited programs in a single visit. Thus, any institution that offers more than one NAAB-accredited program would be expected to prepare one *APR*, one team room, and host one team. At the discretion of the team chair and in consultation with the program administrator(s), the visit may be extended by one day to facilitate review of student work.

    b.   **Adjustments to the Team**. Any team scheduled for concurrent review for continuing accreditation of more than one NAAB-accredited program at the same institution will have one additional team member selected from the pool of individuals nominated to serve on visiting teams by the Association of Collegiate Schools of Architecture. This additional team member will not affect the ability of the program to name up to two non-voting members.

    c.   **Adjustment to the *APR***

        i.   Part I Institutional Support and Commitment to Continuous Improvement.

            1.   Part I: Section 1. The *APR* may provide one response for all accredited degree programs.

            2.   Part I: Section 2. The *APR* must provide information that there are appropriate resources for each NAAB-accredited program.

            3.   Part I: Section 3. The *APR* must provide quantitative information for each NAAB-accredited program.

            4.   Part I: Section 4. The *APR* must identify one set of documents included in the team room.

        ii.   Part II: Educational Outcomes and Curriculum.

            1.   Part II: Section 1. The program must provide a separate matrix for each degree program offered and for each track for completion of the accredited degree(s).

            2.   Part II: Section 2. The program must provide complete information regarding the curriculum for each of the NAAB-accredited programs and for all tracks for completing the NAAB-accredited degree.

            3.   Part II: Section 3. The program must demonstrate the processes for the analysis and evaluation of the preparatory/pre-professional education of students admitted to any of its accredited degree

> programs, with special attention paid to evaluating whether SPC are expected to have been met in educational experiences in non-accredited programs.
>
> 4. Part II: Section 4. The program may provide one response for all NAAB-accredited programs.

d. **Special Provisions for Institutions Seeking Candidacy or Initial Accreditation at the Same Time as a Visit for Continuing Accreditation.**
In the rare case that an institution is seeking candidacy or initial accreditation for an additional NAAB-accredited professional degree program in architecture in the same year as a visit for continuing accreditation, the visits will not be combined. Instead separate visits will be scheduled with separate teams. In addition, a separate *APR* must be prepared for each program to be visited.

SECTION 4. PROCEDURES FOR CANDIDACY FOR ACCREDITATION

Initial candidacy for new professional degree programs in architecture requires the completion of three important steps. For institutions that already have at least one NAAB-accredited professional degree program, some of these steps may be waived or modified. Generally, the steps are as follows:
- Application to establish candidacy status.
- Determination of eligibility.
- Initial candidacy visit.

Throughout the process, there are points of review by the NAAB staff and the NAAB Board of Directors.

Institutions interested in establishing a NAAB-accredited, professional degree program in architecture are encouraged to contact the NAAB staff, administrators and faculty members from institutions with NAAB-accredited degree programs, the ACSA, and professional consultants for advice and counsel in selecting appropriate degree types and for assistance in preparing the necessary documentation, especially the *Plan for Achieving Initial Accreditation*.

If an institution seeks to establish more than one NAAB-accredited program, the applications must be made separately. The NAAB will not accept applications for candidacy for more than one program at a time from the same institution.

1. **Candidacy Application.** Institutions seeking initial accreditation for a professional degree program in architecture must first be granted candidacy status by the NAAB. The first step in achieving candidacy status is to submit an application for candidacy to the NAAB. A complete application must include the following:
   a. A written announcement from the institution's chief academic officer of the intention to seek candidacy for accreditation for a professional degree program in architecture. The letter should include the specific degree name (e.g., B. Arch., M. Arch., or D. Arch.) and pre-requisites and the total number of credits to be awarded.

   b. The most recent decision letter from the recognized, U.S. regional accrediting agency for the institution (See 2009 *NAAB Conditions for Accreditation*, Part II: Section 2.1, Regional Accreditation).

   c. The *Plan for Achieving Initial Accreditation* (see below).

   d. Applications may be submitted in electronic format only.
      i. Applications are limited to 75 pages including all supplemental information. They are to be sent either in Microsoft Word or Adobe PDF and are limited to 3 MBs.
      ii. Applications are to be addressed to the Accreditation Manager, NAAB. By e-mail: info@naab.org with a copy to cpair@naab.org. Please include "Application for Candidacy" in the subject line.

2. **Determination of Eligibility**. The second step toward becoming a candidate program is for the NAAB to determine whether the proposed degree program is eligible for candidacy. The process for determining eligibility is based on whether the institution already offers a NAAB-accredited degree and is seeking to develop another one or whether the institution has no NAAB-accredited programs.

   a. **Determination of Eligibility**. A review panel consisting of the NAAB executive director or associate executive director, a member of the executive committee, and one additional member of the Board of Directors will review the application and determine whether to accept the application in full; accept the application provisionally; or reject the application and request a new application.

      i. For programs seeking candidacy for a professional degree program in architecture that **do not** currently have a NAAB-accredited degree program:
         1. If the application is accepted in full, an eligibility visit will be scheduled.
         2. If the application is accepted provisionally, additional information will be requested. Once the additional information is received and determined to be sufficient to proceed, an eligibility visit will be scheduled.
         3. If the application is rejected, the chief academic officer will be notified and advised as to the deficiencies or concerns of the review panel and asked to submit a new application.

      ii. For programs that already offer at least one NAAB-accredited degree and are seeking candidacy for an additional professional degree program (e.g., an institution with an accredited B. Arch. is seeking to establish an accredited M. Arch.):
         1. If the application is accepted in full, the review panel will make a recommendation to the NAAB Board to accept the program as "eligible for initial candidacy;" no visit is required.
         2. If the application is accepted provisionally, additional information will be requested. Once the additional information is received and determined to be sufficient, the review panel will make a recommendation to the NAAB Board to accept the program as "eligible for initial candidacy;" no visit is required.
         3. If the application is rejected, the chief academic officer will be notified and advised as to the deficiencies or concerns of the review panel and asked to submit a new application.

   b. **Eligibility Visit.**
      i. **Purpose.** There are three purposes of the eligibility visit.
         1. To review the *Conditions* and *Procedures* with the proposed program's administrators, faculty, staff, and students.
         2. To confirm the institutional commitment to the implementation of the *Plan for Achieving Initial Accreditation*.

3. To review the physical, financial, human, and information resources committed to the program.

ii. **Format.**
   1. Eligibility visits are to last not more than 2 days.
   2. They will be undertaken by any one of the following individuals: an officer of the NAAB, executive director, or associate executive director.
   3. The visit will be scheduled on two consecutive weekdays during the regular academic year.
   4. The visit should include the following:
      a. Presentation by the program on the history and mission of the institution, academic/administrative unit, and proposed degree program.
      b. Discussion between the reviewer and the program administrator to review the *NAAB Conditions* and *Procedures.*
      c. Separate meetings with faculty, staff, and students.
      d. Meetings with the division administrators (e.g., department chair and dean) and chief academic officer.
      e. Opportunities to observe classes and studios (if courses are being offered that will be included in the proposed degree program).
      f. A tour of the physical resources that are or will be designated for the program (studios, classrooms, seminar rooms, shops, and labs).
      g. A tour of the library or other information resource center(s) that support the program.
      h. Optional: a meeting with *alumni* of the institution and local architects. This meeting is only required for institutions seeking to develop an existing pre-professional program into an accredited professional degree program.

iii. **Report from the Review Panel or the Eligibility Visit**. The reviewer completing the eligibility visit must submit a memorandum to the Board of Directors that documents his/her observations and conclusions. If no visit is required, this report is completed by the three-person review panel described above. The report must include the following:
   1. A review of the resources committed to the program
   2. Commitment of the institution to the implementation of the *Plan for Achieving Initial Accreditation*.
   3. Assessment of the readiness of the program to complete a visit for initial candidacy.
   4. Recommendation to the NAAB Board to accept or not accept the program as eligible for initial candidacy. The recommendation will

also identify the length of time that should elapse before scheduling the initial candidacy visit.

    iv. **Action on Eligibility for Initial Candidacy**.

        1. If the recommendation is to accept the program as eligible for initial candidacy, the NAAB staff will select a visiting team chair and advise the program to compile an *APR* and prepare for an initial candidacy visit as outlined below.

        2. If the recommendation is to not accept the program as eligible for initial candidacy, a new application will have to be submitted.

c. **Plan for Achieving Initial Accreditation.**

    i. **Purpose**. *The Plan for Achieving Initial Accreditation* serves multiple purposes:

        1. It is an analysis of the current status of the program that identifies long-term objectives for establishing and implementing the new degree program.

        2. It is an analysis of the extent to which the new program already complies with the *Conditions for Accreditation* with special emphasis on program identity, resources, and the curricular framework.

        3. It proposes a course of action for achieving initial accreditation in not more than six years. This includes, but is not limited to, the following:

            a. Securing resources not already available to the program (e.g., faculty, space, financial support).

            b. Securing institutional approvals for the new degree program (if required).

            c. Recruiting and retaining students.

            d. Proposed date for enrolling the first cohort or class; projected date for awarding degrees to the first cohort or class to complete the program.

            e. Developing and implementing new courses and/or curricular sequences.

            f. Plans or provisions in the event the program does not achieve initial candidacy.

            g. Plans or provisions in the event the program does not achieve initial accreditation.

    ii. **Content.** *The Plan for Achieving Initial Accreditation* should include the following:

        1. Cover Page. This page should include the following information:

            a. Name of Institution

            b. Degree program proposed (i.e., B. Arch., M. Arch., or D. Arch.), with pre-requisites as appropriate (e.g., M. Arch., (pre-professional degree plus 42 graduate credits)).

        c. Name, address, email, and telephone contact information for the following individuals:
- i. Program administrator
- ii. Head of academic unit in which the program will be located
- iii. Chief academic officer
- iv. President of the institution

2. Part One – Analysis of the extent to which the proposed program already complies with the following Conditions for Accreditation:
   - a. Part I: Sections 1-3
   - b. Part II: Section 1-4
3. Part Two – Timeline for Achieving Initial Accreditation (see above)
4. Part Three – Supplemental Information
   - a. 3.1 Course Descriptions (See *2009 Conditions* Appendix 1)
   - b. 3.2 Faculty Resumes (See *2009 Conditions* Appendix 2)

3. **Initial Candidacy.** Once a program has been accepted as eligible for initial candidacy, a site visit for initial candidacy will be scheduled for the next academic year, generally in the spring. With certain exceptions, visits for initial candidacy are similar to those for continuing accreditation. There are, however, subtle, yet important distinctions (e.g., the length of the visit). The first step is the preparation of an *Architecture Program Report* (APR) and preparation for a visiting team. The *APR*, selection of the visiting team, and other elements of the site visit are described below.

    a. ***Architecture Program Report* Submitted for Initial Candidacy Visits**
   - i. **Purpose.** The *Architecture Program Report for Initial Candidacy* (*APR-IC*) serves both as a self-study for the program and as the principle source document for conducting the visit.
   - ii. **Content**. For programs seeking initial candidacy, the *APR-IC* should:
     1. Present complete and accurate information to demonstrate the extent to which the program is already in compliance with the NAAB Conditions.
     2. Present complete and accurate information to demonstrate how the program will use its *Plan for Achieving Initial Accreditation* to achieve compliance with the NAAB Conditions in not less than six years.
     3. Areas and levels of excellence will vary among degree programs seeking candidacy as will approaches to meeting the conditions and reporting requirements. While programs are encouraged to identify those areas in which they believe they excel, positive aspects of a degree program in one area cannot override deficiencies in another.
   - iii. **Format**. Schools must use the following format for the *APR for Initial Candidacy*. Each part should be used to describe how the program's *unique* qualities, its *Plan for Achieving Initial Accreditation,* and its

students' achievements do (or will) satisfy the conditions that all programs must meet in order to become accredited. For additional information on the contents of the *APR-IC* see, *NAAB Conditions for Accreditation*, 2009 edition.

1. Part One – Institutional Support and Commitment to Continuous Improvement
   a. 1.1 Identity & Self-Assessment
   b. 1.2 Resources
   c. 1.3 Institutional Characteristics
      i. Statistical Reports (comparative data not required for *APR-IC)*
      ii. Faculty Credentials
2. Part Two – Educational Outcomes and Curriculum
   a. 2.1 Student Performance Criteria
   b. 2.2 Curricular Framework
   c. 2.3 Evaluation of Preparatory/Pre-professional Education
   d. 2.4 Public Information
3. Part Three – Progress Since the Last Site Visit (not required for *APR-IC)*
   a. Responses to Conditions Not Met
   b. Responses to Causes of Concern
4. Part Four – Supplemental Information
   a. 4.4 Course Descriptions (see *2009 Conditions,* Appendix 1 for format)
   b. 4.5 Faculty Resumes (see *2009 Conditions A*ppendix 2 for format)
   c. 4.6 Visiting Team Report (VTR) from the previous visit (not required for *APR-IC*)
   d. 4.7 Catalog (or URL for retrieving online catalogs and related materials)

iv. **Submission.** *APRs for Initial Candidacy* may be submitted in electronic format only.
   1. *APR-IC*s are limited to 250 pages including all parts. The page limit does not include the institution's catalog or to previous *VTRs* (the previous *VTR* is not required for *APR-IC*).
   2. Electronic versions of the *APR-IC* are to be sent either in Microsoft Word or Adobe PDF and are limited to 7 MBs.
   3. *APR-IC*s are to be addressed to the Accreditation Manager, NAAB.
      By email: info@naab.org with a copy to cpair@naab.org. Please include "Initial Candidacy *APR*" and the name of the institution in the subject line.

v. **Review and acceptance.**
   1. The *APR-IC* is first reviewed by the NAAB staff to ensure it is complete

2. The *APR-IC* is then reviewed by the team chair for completeness and clarity, to discern the complexity of the program's structure, and to identify issues that may affect the duration and agenda for the site visit. The visiting team chair's review results in a recommendation to the Board to do one of the following:
   a. Accept the *APR-IC* and schedule the site visit.
   b. Accept the *APR-IC,* schedule the site visit, and request additional information before the visit.
   c. Require additional information to be submitted not less than 60 days before the scheduled visit date. The date will be confirmed after the additional information is received, reviewed and determined to be acceptable.
   d. Reject the *APR-IC* and require a new report be submitted for review not less than 45 days prior to the date for the visit. If the new *APR-IC* is considered acceptable, the visit will take place.
      i. Should the chair recommend the *APR-IC* be rejected, the *APR-IC* and the chair's review are brought before the NAAB Board of Directors for review and action.
      ii. Should the school fail to deliver an acceptable amended or replacement *APR-IC*, the chief academic officer of the institution is notified that the candidacy visit will have to be postponed until the next semester. A new chair will be appointed and a new team assembled.

vi. **Dates/Deadlines**
   1. *APR-IC*s are due in the NAAB offices by September 7 of the calendar year immediately preceding the year in which the initial candidacy visit is scheduled to take place. In the event a candidacy visit is scheduled for the fall, the *APR-IC* is due not less than 6 months prior to the scheduled date for the visit.
   2. For *APR-IC*s sent in September, review of *APR-IC*s must be completed before the regularly scheduled fall meeting of the NAAB Board of Directors.
   3. For *APR-IC*s submitted in the spring, the review must be completed before the regularly scheduled summer meeting of the NAAB Board of Directors.
   4. New *APR-IC*s (if they are requested) are due not less than 45 days prior to the dates for visit.

vii. **Dissemination of the *APR-IC* to the Public Prior to the Visit**. To stimulate broad-based participation, the program is encouraged to distribute the *APR-IC* within the school community before and during the site visit. However, the *APR* is not to be shared with the general public

until after the final decision is communicated by the NAAB (see Section 4.3.e).

b. **Visiting Teams**
   i. **Composition of teams.**
      1. Teams for initial candidacy visits are composed of three individuals: an educator, a practitioner, and an individual selected from a pool of NAAB staff and former NAAB Directors. One of these individuals will be designated by the NAAB Directors to serve as the team chair.
      2. Teams are composed by the NAAB staff after the date for the visit has been set by the team chair and the program administrator. The NAAB makes every effort to ensure the team is balanced for geography, gender, race/ethnicity, and accreditation experience. In addition, the staff makes every effort to ensure that no one proposed as a member of a visiting team has a real or perceived conflict of interest as defined in Section 9. To maintain uniform quality of visits and *Candidacy Visiting Team Reports* (C-*VTR*s), teams are selected so that not more than one person is on his or her first visit.
      3. Team members are advised of their preliminary selection for a specific visit with the understanding that final approval of the team is the responsibility of the program.
   ii. **Team Chair**
      1. **Role.** The team chair is responsible for the following:
         a. Negotiating the date for the visit with the program administrator.
         b. Reviewing the *APR for Initial Candidacy* and identifying needs for additional information or requesting changes to the report.
         c. Developing the agenda for the visit with the program administrator.
         d. Consulting with the program administrator on the format and content of the team room.
         e. Hosting a mandatory pre-visit conference call with the team prior to the visit to establish expectations and special requirements or circumstances.
         f. Preparing the final draft of the *Candidacy-Visiting Team Report* (see below) and sending it to the NAAB offices within 30 days of the visit.
         g. Securing the signatures of all team members on the report.
         h. Securing the signatures of the team on the confidential recommendation.
         i. Approving corrections of fact submitted by the program after reviewing the draft *C-VTR*.

      j. Ensuring the team's compliance with the *Procedures for Accreditation* and appropriate standards of conduct during the visit.

  2. **Selection**. Visiting team chairs are nominated by the Executive Committee before the site visit. The selection is based on a review of the resumes of former visiting team chairs and experienced visiting team members. Visiting team chairs may also be selected from among former directors of the NAAB. NAAB staff notify program administrators once a chair has been nominated. The administrator may challenge the nomination on the basis of potential conflicts of interest (See Section 9). Once the chair has been confirmed, the administrator and the chair work together to select a date for the visit.

  iii. **Non-voting members.** Non-voting members are not permitted on teams for initial candidacy or on subsequent teams to determine the continuation of candidacy.

  iv. **Notification to Program**. The NAAB staff notify the program administrator when a full team has been assembled. The program administrator is responsible for determining whether any member of the team poses a real or potential conflict of interest.

  v. **Conflicts of Interest**. The NAAB seeks to avoid any real or perceived conflict of interest in its procedures, deliberations, and accrediting decisions. See Section 9 for additional information.

  vi. **Challenges to Team Members**. Programs may challenge no more than one member of a proposed visiting team for initial candidacy, under the terms of Section 9, Conflicts of Interest. Such challenges are to be made in writing within 10 days of receiving notice of the nomination of a chair or the membership of a visiting team. Challenges will be reviewed by the NAAB executive director and accreditation manager. Where challenges are permitted to stand, a new team member will be assigned. Challenges will not be accepted less than 21 days prior to the start of an accreditation visit.

c. **Scheduling the Dates for the Site Visit.**
  1. The dates for a visit for initial candidacy are set by the team chair and the program administrator in consultation.
  2. Generally, these visits take place between the last week of January and the first week of April each year.
  3. Once a date has been set and a team proposed, the date cannot be changed.
  4. Length of the visit:
    a. Visits for initial candidacy begin on Saturday evening and end the following Wednesday at noon.
    b. If the program is still in the early stages of implementation and the amount of student work available for review is

limited, the visit may begin on Sunday evening and end the following Wednesday at noon. The final decision on the length of the visit is made by the team chair in consultation with the program administrator.

5. All members of the team are expected to participate in the visit the entire time.

6. If the program seeking candidacy is to be offered in more than one site, the team chair may arrive early in order to visit other locations for the program. These exceptions are agreed to by the team chair and the program administrator with advice from the NAAB staff. See Section 8 for additional information on visits with special circumstances.

d. **Schedule/Agenda for Each Visit for Initial Candidacy.** Each visit must include, at a minimum, the following:

   i. **Prior to the Visit**

      1. **Team Orientation**. Team members participate in a mandatory pre-visit conference call in which the visiting team chair reviews the *APR-IC, Conditions* and the *Procedures*, discusses visit protocols, and establishes expectations for each team member for how the team will work. Generally, this call will take place 14 days prior to the start of the visit.

      2. **Review of the *APR-IC*** (Team only). This review allows team members to discuss their initial reactions to the *APR*, to raise any initial concerns and to identify and prioritize the questions to be addressed during the visit. In light of this discussion, the visiting team chair outlines team assignments and may revise details of the agenda.

   ii. **Onsite**

      1. **Tours**

         a. **Physical Resources.** The school conducts a brief tour of the physical resources that support the professional degree program. This tour should include an explanation of how the team room is organized, the facilities the program uses, as well as, meetings with the personnel of media centers, workshops, and laboratories.

         b. **Library/Information Resources**. The library tour includes a meeting with the architecture librarian and visual resources professional to discuss their assessment of those components.

      2. **Meetings** (NOTE: All meetings are confidential, informal discussions, **not** presentations.)

         a. **Staff**. This is a meeting with key staff of the academic unit and without any faculty or administrators present. Staff that attend this meeting should include but not be limited to

     administrative assistants, shop personnel, librarian, career placement professionals, advisors and others.

    b. **Program Head**. These include a discussion of issues arising from the *APR-IC* the program's strategic plan and self-assessment procedures, any required changes to the visit agenda, and any requests for additional materials the team may need.

    c. **Entrance Meetings with the School or College Administrator, Chief Academic Officer, Faculty, and Students**. These are separate meetings and allow the team to review and discuss the implications of the new degree program, and identify strengths and causes for concern or any issue raised by the visiting team, the program, or the institution.

      i. Meetings with faculty must be open to all ranks from the various curricular areas, including those from other disciplines supporting the program.

      ii. Meetings with students, generally lead by the AIAS representative, without the presence of any administrators, staff, or faculty, should be arranged so that all students can attend.

    d. **Meeting with student representatives**. This is an informal gathering of a small group of students, without the presence of any administrators, staff, or faculty, who may be officers in student organizations or elected to attend by their peers.

    e. **Contact with Graduates and Local Practitioners**. (Only if the institution is proposing to expand an existing pre-professional program into an accredited degree program or during visits for continuation of candidacy).This is generally a social event that may include recent and past graduates, local registration board members, and representatives of the AIA chapter.

3. **Review of Student and Faculty Exhibits**. Team members are individually and jointly responsible for assessing work in the team room and elsewhere.

4. **Observation of Studios, Lectures, and Seminars**. (Only necessary if courses currently being offered are or will be part of the proposed professional degree program)The team may divide to attend scheduled classes and may use evenings to observe unscheduled studio activity.

5. **Review of General Studies, Electives, and Related Programs**. This review includes meetings with faculty or administrators to discuss prerequisite general studies courses, minors or concentrations that students may pursue, and any programs or

groups that have a significant relationship with the accredited degree program.

6. **Review of School Records and Transfer Credit Assessment**. The visiting team chair may request school and student records, which should be presented with names removed.

7. **Debriefing Sessions**. Each evening, the team meets to evaluate its progress, adjust assignments, and assess the need for additional information.

8. **Accreditation Deliberation and Drafting the *VTR***. The last afternoon and evening of the site visit is devoted to developing the team's consensus on whether the program has met each of the NAAB conditions, drafting an assessment of the latter, and agreeing on the confidential recommendation to the NAAB Directors on a term of accreditation. By the end of the last work session, the *VTR* should be in a draft form and ready for editing by the visiting team chair.

9. **Exit interviews**. The sequence of exit interviews is proscribed in order to ensure the team delivers its initial information to key leaders within the institution and the program before addressing the faculty, staff, and students in the program. These interviews are not to take place until the team has finished its deliberations. Further, the purpose of these interviews is to communicate the following:
   a. the conditions met with distinction,
   b. the conditions not yet met,
   c. causes of concern, and
   d. any general team comments or acknowledgements.

These interviews are led by the chair; other members of the team may be called upon by the chair to comment. All members of the team are advised to avoid making any comments that may be interpreted as offering advice or other recommendations to the program or as revealing the content of the confidential recommendation.

The recommended sequence of exit interviews on the final morning is as follows:

- Exit interview with the program administrator, 1 hour. Questions and answers of clarification are permitted; the team chair will lead any response.
- Exit interview with the leadership of the academic unit in which the program is located (e.g., director, chair, dean), 30 minutes. Questions and answers of clarification are permitted; the team chair will lead any response. NOTE: this may be broken down into more than one meeting.

- Exit interview with the central administrators responsible for oversight of the academic unit (e.g., provost or vice president for academic affairs), 30 minutes. Questions and answers of clarification are permitted; the team chair will lead any response.
- Exit interview with the students, faculty, and staff of the program, 30 minutes; questions and answers are not permitted.
- The team is expected to leave the institution as soon as the last interview is completed.

e. **Team Room**

1. **Purpose**. The purpose of the team room is the same as for visits for continuing accreditation. Please see Section 3 for additional information. It is to be designated for the exclusive use of the team to evaluate the program in confidence.

2. **Contents**. Before the site visit, the program head and visiting team chair discuss the content and organization of the team room. The team room must contain fully labeled and easily accessible exhibits of student work, if available. Materials used as exhibits must include examples of both the minimum passing grade and high achievement; be of sufficient quantity to ensure that all graduates are meeting the performance criteria; and have been executed by students enrolled in the proposed program (this may not be necessary for an initial candidacy visit, but will be necessary for a subsequent visit for continuation of candidacy). Where courses have not yet been offered, please provide course descriptions that include learning outcomes and their correlation to the SPC. The team room must also contain the following:

   a. **Student Studio Work**. The majority of the visual material should be mounted on vertical surfaces, not placed in stacks. The presentation of studio work must represent the full range of approaches taken and assignments made by various faculty, and must include syllabi, project statements or assignments, handouts, bibliographies, and corresponding samples of student drawings and models. In addition to final projects, in-progress work and student journals may be included, or the progress of one group of students may be illustrated.

   b. **Course Notebooks**. A notebook should be provided for each required and elective course, including studio courses. The notebook must contain a syllabus showing weekly activities and assignments, a bibliography, quizzes and examinations, where applicable, and corresponding samples of student work. The notebook must also contain

a statistical summary of achievement by all students in the course.

During a candidacy visit, notebooks should be provided for courses that have not yet been offered, but for which syllabi and other materials have been prepared.

Notebooks may be presented electronically but only after consulting with the team chair. In the event a program chooses to present course notebooks electronically, it is the responsibility of the program to make this material available to the team in the team room.

c. **Student Admissions and Advising Files**
These are copies of files for students admitted to the program, with identifying information removed, that demonstrate the process by which students are admitted to the program and how, if appropriate, advanced standing is determined (See *2009 Conditions for Accreditation*, Part II. Section 3).

d. **Team Work Area**. The room must contain a conference table, with enough seating to accommodate the entire team.

e. **Access**. The team room must be lockable; the only keys are to be given to the members of the team. No one other than the team is to be in the room, except at the team's invitation.

f. **Equipment**. The room must contain the following: a telephone, document shredder, computer equipment as requested by the visiting team chair, Internet access, printer, LCD projector, and a sufficient number and type of electrical outlets.

g. **Visit Agenda and Resumes**. The visit agenda and resumes of the team should be posted in the vicinity of the room.

h. **Faculty Photos**. Faculty photos should be posted in the team room.

i. **Matrices.**
    i. A large copy of the faculty credentials matrix for the current semester as described in Part II: Section 3 should be posted in the team room.
    ii. A large copy of the matrix, described in Part II: Section 1. Student Performance Criteria, of the *Conditions for Accreditation*, should be posted in the team room.

While a range of work must be displayed for each required course, it is not necessary to present the complete output of a studio, lecture, or seminar.

The organization of student work is left to the discretion of the program in consultation with the team chair, but each piece must cross-reference the course matrix and criteria it addresses, be dated, and indicate its assessment from minimum to high achievement. Ideally, examples by several different students or teams should be furnished.

Exhibits in spaces outside the team room can augment, but not substitute for, team room exhibits. Such exhibits should be identified in a manner consistent with team room displays, except that indications of minimum to high pass must be omitted in public displays. Class assignments must be available for all projects presented.

   j. **Faculty Exhibits** (See Section 3 of this document, for additional information).

f. *Candidacy-Visiting Team Report* (*C-VTR*)
   i. **Purpose**. The *C-VTR* serves multiple purposes. It is essential to the NAAB in making its decision regarding candidacy; it may serve to strengthen the program and its position within the institution; and it may inform current and prospective students about the nature and quality of the program. *C-VTRs* are considered advisory to the NAAB Board of Directors.
   ii. **Contents.**
     7. The *C-VTR* conveys the visiting team's assessment of whether the program's plan for achieving initial accreditation is reasonable, capable of being implemented, and to what extent the program meets or is likely to meet the *Conditions for Accreditation*, as measured by the following:
       a. Evidence of student learning.
       b. The overall capacity of the program to fulfill its obligations to ensure student achievement.
       c. The overall learning environment.
     8. It establishes the degree to which the program is functioning in the manner described in the *APR-IC.* Therefore, the *C-VTR* must be concise and consistent and include documentation of the following:
       a. The program's noteworthy qualities with respect to the *Conditions*.

b. The program's progress toward identifying and eliminating deficiencies with respect to the *Conditions*, especially the Student Performance Criteria.

c. Concerns about the program's future performance and/or capacity to achieve initial accreditation.

d. Comments that may be helpful in preparing for future candidacy reviews or initial accreditation visits.

iii. **Format**. The *C-VTR*, generally speaking, includes the following:

1. **Section I – Summary of Team Findings**

   a. **Team Comments**. This is a narrative in which the team makes its general comments on the program, the *APR-IC*, and its observations and assessments with special attention to the items listed in 4.3.f.2.a-d (above).

   b. **Conditions Not Met/Not-Yet Met**. This is a list of the conditions and student performance criteria that the team determines are either not met or not-yet met.

   c. **Causes for Concern**. This is a narrative that describes specific concerns of the team relative to not-yet-met conditions or to conditions that may have been met within the strict definition of the condition/criterion, but for which the team has concerns or questions. This should be a numbered list and each item should have a title. It is not necessary for a not-yet-met condition to generate a cause for concern; likewise conditions/criteria that are determined to be met, may have also generated concerns within the team. All of these should be documented in this section of the report.

   d. **Progress since the Previous Visit/*C-VTR*.**

      i. In the case of the first visit to establish initial candidacy, this section is left blank.

      ii. In the case of a visit for continuing candidacy, this section is completed. This is a narrative in which the current team reviews the program's progress against each of the not-yet-met conditions and causes of concern from the previous visit and *C-VTR*. It is the responsibility of the current team to determine, based on their review, whether previously not-yet-met conditions are now met and whether the causes of concern have been addressed.

2. **Section II – Compliance with the Conditions for Accreditation.**

3. **Section III – Appendices**

   a. Appendix A. Program and institutional information from Part I of the *APR*.

      e. Appendix B. Conditions Met with Distinction. This is a list of the conditions and student performance criteria for which the team wishes to commend the program. The team is encouraged to include a brief narrative for each one of the conditions or criteria listed here.

      b. Appendix C. The team roster.

4. **Section IV Report Signatures –** This page includes the signatures of all team members.

5. **Section V– Confidential Recommendation**. This page transmits the team's recommendation on the term of initial candidacy to the NAAB Board of Directors, signed by all members of the team. The recommendation will also include a recommendation as to the length of time until the next visit either for continuing candidacy or initial accreditation.

6. **Review/Acceptance/Transmittal by the Team**. The team chair must transmit a final draft of the *C-VTR* to the NAAB office not later than 30 calendar days after the visit ends. During the interim, the team chair is responsible for completing the draft and collecting additional input or suggested text from the other members of the team.

iv. **Review by NAAB staff**. Upon receiving the draft from the team chair, the NAAB staff reviews the draft report and makes corrections for grammar, spelling, and punctuation. In addition the report is reviewed for completeness and comprehension and to ensure the team has not offered advice or recommendations for changes or modifications to the program. Any requests for clarification or adjustments are reviewed with the team chair. Once any changes have been made or approved by the chair, the draft, without the confidential recommendation, is sent to the program administrator.

v. **Corrections of fact**. The program administrator is then asked to review the draft *C-VTR* to make corrections of fact only. These corrections are to be transmitted to the NAAB staff, who, in turn review the corrections with the chair. The team chair has 10 calendar days to accept the corrections of fact and resubmit a final *C-VTR*.

vi. **Optional response**. The final *C-VTR* is transmitted to the program administrator who has the option to write a response.

vii. **Dates and deadlines**.

1. 30 days after the visit ends: team chair sends draft *C-VTR* to NAAB staff.

2. NAAB staff completes the initial edits and corrections in consultation with the chair, and sends draft *C-VTR* transmitted to the program administrator.

3. Within 10 calendar days of receiving the draft *C-VTR*, program submits corrections of fact. Corrections sent after the deadline will not be accepted.

4. Within 10 calendar days of receiving the corrections of fact, the staff and team chair accept or reject corrections and submit final *C-VTR* to NAAB staff.
5. NAAB staff transmit the final *C-VTR* to the program administrator for an optional response.
6. Within 10 calendar days of receiving the final *C-VTR*, the program sends its optional response to NAAB offices. Responses sent after the deadline will not be forwarded to the Board.
7. Not later than 21 calendar days before the next meeting of the NAAB Board of Directors, NAAB staff prepare the final report package for Board of Directors review. This package contains the following:
    e. An executive summary
    f. Final *C-VTR*.
    g. Signature pages and confidential recommendation.
    h. Optional program response.

g. **Decision of the Board of Directors**. At its next regularly scheduled meeting, the final report package, including the confidential recommendation is presented to the Board of Directors for a decision. The Board has the following options:
    i. To accept the recommendation of the visiting team on a term of initial or continuing candidacy.
    ii. To reject the recommendation of the visiting team and to deny initial or continuing candidacy.

h. **Transmitting the Decision of the Board of Directors**. Within 14 calendar days of a Board decision regarding a term of initial candidacy, a letter announcing the decision is sent to the president of the institution, with copies to the program administrator, the team chair, and the team members. This letter is sent by U.S.P.S., certified-mail, return-receipt-requested. Decisions to deny candidacy are not subject to reconsideration or appeal. The letter transmitting a decision to deny initial candidacy will include advice for reapplying.

i. **Confidentiality**. The team and any non-voting members must maintain strict confidentiality with respect to materials reviewed, interviews conducted, and team deliberations, including the team's recommendation on a term of candidacy in perpetuity. The team bases its assessment of the program, in part, on interviews with various constituencies of the program. All individual and group interviews are confidential, and the information obtained from them is for the exclusive use of the team in preparing its report and recommendation.

Before the candidacy decision, both the NAAB and the program are prohibited from making either the *APR* or the *C-VTR* available to the collateral organizations or the public.

j. **Public Disclosure of Accreditation Outcomes**

    i. After the candidacy decision, the program is required to disseminate the *APR-IC*, the final *C-VTR* and pertinent attachments, the current editions of the *Conditions* and the *Procedures* and any addenda, and, eventually, the *Annual Reports* and the NAAB response to each *Annual Report*. These documents must be housed together in the architecture library and be freely accessible to all.

    ii. Unless written permission is obtained from the NAAB, the program may disseminate only complete copies of the *Conditions* and the *Procedures* and any addenda and the *C-VTR*.

    iii. The program is required to provide faculty and incoming students with access to the current student performance criteria and related accreditation documents. (See *2009 Conditions for Accreditation,* Part II: Section 4. Public Information).

    iv. The NAAB makes available in its office the *APRs* and the *VTRs* of all accredited programs, candidate programs, or programs that have lost accreditation. These are available to the public by appointment. Beginning in 2011, the NAAB will publish all *VTRs* at www.naab.org after accreditation decisions are made. These will be published without the confidential recommendation of the team.

    v. The accreditation decisions for a given year are made available to the collateral organizations—to be published in their entirety in each organization's newsletter—and to other organizations and the public upon request.

    vi. Within 30 calendar days of a decision to deny candidacy, the NAAB will notify the collateral organizations and the appropriate regional accrediting agency.

4. **Subsequent Evaluations**. Continuation of candidacy is subject to reviews and visits at two-year intervals until initial accreditation is achieved. The reporting, team composition, and visit requirements for each subsequent visit are the same as for initial candidacy.

SECTION 5. PROCEDURES FOR INITIAL ACCREDITATION

Once a program has achieved initial candidacy and completed a minimum number of years in candidacy status, it is eligible to apply for initial accreditation of its professional degree program. For institutions that already have at least one NAAB-accredited professional degree program, some of these steps may be waived or modified. Generally, the steps are as follows:

- Request for initial accreditation
- Initial accreditation visit

Throughout the process, there are points of review by the NAAB staff and the NAAB Board of Directors.

All visits for initial accreditation take place in the fall following the graduation of the first cohort of students to complete the program.

Terms of initial accreditation may only be three years. See Section 2, paragraph 2.b .

In order to meet the education requirement set forth by the National Council of Architectural Registration Boards, an applicant for an NCARB Certificate must hold a professional degree in architecture from a program accredited by the NAAB; the degree must have been awarded not more than two years prior to initial accreditation.

The "two-year rule," as it is sometimes called, is promulgated by NCARB. The full text can be found in the *Handbook for Interns and Architects*, Chapter 1, in the statement defining the education requirement for an NCARB Certificate.

> "You must hold a professional degree in architecture from a program accredited by the National Architectural Accrediting Board (NAAB) or the Canadian Architectural Certification Board (CACB/CCCA) no later than two years after your graduation, or hold a professional degree in architecture, certified by the CACB, from a Canadian university."

In practical terms, this means that if a program receives an initial term of accreditation effective January 1, 2008, for example, individuals who graduated after January 1, 2006, are considered to have met the education requirement for an NCARB Certificate. However, meeting the education requirement for the NCARB Certificate may not be equivalent to meeting the education requirement for registration in a specific jurisdiction.

1. **Eligibility for Initial Accreditation**.
   a. Programs seeking initial accreditation for a first professional degree program in architecture that **do not** currently offer a NAAB-accredited degree program must have:
      i. Completed no less than four years in continuous candidacy.
      ii. One graduating class that has completed the entire professional degree program for which accreditation is sought. This class or cohort must have graduated not more than one year prior to the year in which the initial

accreditation visit is scheduled (e.g., for visits in 2011, the first cohort must have graduated in 2010).

b. Programs that already have at least one NAAB-accredited professional degree program must have:
    i. No less than two years in continuous candidacy.
    ii. A six-year term of accreditation without focused evaluations for the pre-existing accredited professional degree program in architecture.
    iii. One graduating class that has completed the entire professional degree program for which accreditation is sought. This class or cohort must have graduated not more than one year prior to the year in which the initial accreditation visit is scheduled (e.g., for visits in 2011, the first cohort must have graduated in 2010).
    iv. It is the responsibility of the program, not NAAB, to inform students of the status of their degree program(s) relative to accreditation and whether the program is on schedule to achieve initial accreditation.

2. **Official Request for Initial Accreditation.** Institutions seeking initial accreditation for a professional degree program in architecture that has been granted candidacy status must first notify the NAAB of their desire to be granted an initial term of accreditation.

a. To initiate the process for achieving initial accreditation, the program must formally request the NAAB to schedule a visit for initial accreditation. The request is due not later than March 1 of the year prior to the year in which the visit for initial accreditation is requested. In making a request for initial accreditation, the program effectively forfeits any remaining time in the six-year candidacy. For example, if a program has completed four years in candidacy and requests initial accreditation and initial accreditation is denied, then the program must begin the process again with an application for candidacy.

b. The request must include the following:
    i. A written request from the chief academic officer of the institution to schedule a visit for initial accreditation of the professional degree program in architecture. The letter should include the specific degree name (e.g., B. Arch., M. Arch., or D. Arch.) including pre-requisites (e.g., M. Arch. (pre-professional degree plus 60 graduate credits)).
    ii. A copy of the most recent decision letter from the NAAB.
    iii. A copy of the most recent decision letter from the recognized, U.S. regional accrediting agency for the institution (see *NAAB 2009 Conditions for Accreditation* Part II, Section 2.1, Regional Accreditation).
    iv. An assessment of the progress against the *Plan for Achieving Initial Accreditation* with specific attention to providing evidence that the plan will be fully implemented by the time of the site visit for initial accreditation.
    v. The request must be submitted electronic format only.

1. Requests are limited to 75 pages including all supplemental information.
2. The request is to be sent either in Microsoft Word or Adobe PDF and is limited to 3 MBs.
3. Applications are to be addressed to the Accreditation Manager, NAAB by email: info@naab.org with a copy to cpair@naab.org. Please include "Application for Initial Accreditation Site Visit" in the subject line.

3. **Initial Accreditation.** Once the application has been reviewed for completeness, the program will be added to the annual visit schedule for the next calendar year. Visits for initial accreditation are conducted in the fall only and are similar to those for continuing accreditation. The first step is the preparation of an *Architecture Program Report for Initial Accreditation* (*APR-IA*) and preparation for a visiting team. The *APR-IA*, selection of the visiting team, and other elements of the site visit are described below.

   a. ***Architecture Program Report for Initial Accreditation***
      i. **Purpose.** The *Architecture Program Report for Initial Accreditation* (*APR-IA*) serves both as a self-study for the program and as the principle source document for the team conducting the visit.
      ii. **Content**. For programs seeking initial accreditation, the *APR-IA* should:
         1. Present complete and accurate information to demonstrate the extent to which the program is already in compliance with each of the NAAB Conditions.
         2. Present complete and accurate information to demonstrate how the program has used its *Plan for Achieving Initial Accreditation* to achieve compliance with the *NAAB Conditions*.
         Areas and levels of excellence will vary among candidate programs as will approaches to meeting the conditions and reporting requirements. While programs are encouraged to identify those areas in which they believe they excel, positive aspects of a degree program in one area cannot override deficiencies in another.
      iii. **Format**. Schools must use the following format for the *APR-IA*. Each part should be used to describe how the program's unique qualities, its *Plan for Achieving Initial Accreditation*, and its students' achievements satisfy the conditions that all programs must meet in order to become accredited. For additional information on the contents of the *APR* see, *NAAB Conditions for Accreditation*, 2009 edition.
         1. Part One – Institutional Support and Commitment to Continuous Improvement
            a. 1.1 Identity & Self-Assessment
            b. 1.2 Resources
            c. 1.3 Institutional Characteristics
               i. Statistical Reports

      ii.   *Annual Reports*[*]
      iii. Faculty Credentials
2. Part Two – Educational Outcomes and Curriculum
   a. 2.1 Student Performance Criteria
   b. 2.2 Curricular Framework
   c. 2.3 Evaluation of Preparatory/Pre-professional Education
   d. 2.4 Public Information
3. Part Three – Progress Since the Last Site Visit
   a. 3.1 Summary of Responses to the Team Findings
      i. Responses to Conditions Not Met
      ii. Responses to Causes of Concern
   b. 3.2 Summary of Responses to Changes in the NAAB Conditions[†]
4. Part Four – Supplemental Information
   a. 4.4 Course Descriptions (see Appendix 1 for format)
   b. 4.5 Faculty Resumes (see Appendix 2 for format)
   c. 4.6 Visiting Team Report (VTR) from the previous visit
   d. 4.7 Catalog (or URL for retrieving online catalogs and related materials)
5. *APR*s may be submitted in hard copy or electronic format (see below).
6. *APR-IA*s are limited to 150 pages for Parts 1-3 and 100 pages for Part 4. The page limit does not include the *C-VTR* from the previous visit or the institution's catalog.
   a. The *APR* is to be sent either in Microsoft Word or Adobe PDF and is limited to 7 MBs.
   b. *APR*s should be sent to info@naab.org with a copy to cpair@naab.org. Please include "Initial Accreditation" and the name of the institution in the subject line.

  iv. **Review and acceptance.**
1. The *APR-IA* is first reviewed by the NAAB staff to ensure it is complete.
2. The *APR-IA* is then reviewed by the team chair for completeness and clarity, to discern the complexity of the program's structure, and to identify issues that may affect the duration and agenda for the site visit. The visiting team chair's review results in a recommendation to the Board to do one of the following:
   a. Accept the *APR-IA* and schedule the site visit.
   b. Accept the *APR-IA,* schedule the site visit, and request additional information before the visit.

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[*] Information from 2008 forward will be provided by the NAAB from its Annual Report Submission System.
[†] This section is intended to give programs the opportunity to document how they have modified the program or resources in response to changes in the *2009 Conditions* as compared to the *Conditions* in effect at the time of the most recent visit for candidacy.

    c. Require additional information to be submitted not less than 60 days before the scheduled visit date. The date will be confirmed after the additional information is received, reviewed and determined to be acceptable.

    d. Reject the *APR-IA and* require a new report be submitted for review not less than 45 days prior to the date for the visit. If the new *APR-IA* is considered acceptable, the visit will take place.

        i. Should the chair recommend the *APR-IA* be rejected, the *APR-IA* and the chair's review are brought before the NAAB Board of Directors for review and action.

        ii. Should the school fail to deliver an acceptable amended or replacement *APR-IA*, the chief academic officer of the institution is notified that the initial accreditation visit will have to be postponed until the next semester. A new chair will be appointed and a new team assembled.

  v. **Dates/Deadlines**

    1. *APR-IA*s are due in the NAAB offices by February 1 of the calendar year in which the initial accreditation visit is scheduled to take place.

    2. The review must be completed before the regularly scheduled summer meeting of the NAAB Directors.

    3. New *APR-IA*s (if they are requested) are due not less than 45 days prior to the dates for visit.

  vi. **Dissemination of the *APR-IA* to the Public Prior to the Visit**. To stimulate broad-based participation, the program is encouraged to distribute the *APR-IA* within the school community before and during the site visit. However, the *APR-IA* is not to be shared with the general public until after the final decision is communicated by the NAAB (see Section 5.4).

b. **Visiting Teams**

  i. **Composition of Teams.**

    1. Teams are composed of at least four individuals, each of whom represents one of the four constituent organizations of the NAAB: the AIA, AIAS, ACSA, and NCARB. One of these individuals will be nominated by the NAAB Directors to serve as the team chair.

    2. Teams are composed by the NAAB staff after the date for the visit has been set by the team chair and the program administrator. The NAAB makes every effort to ensure the team is balanced for geography, gender, race/ethnicity, and accreditation experience. In addition, the staff makes every effort to ensure that no one proposed as a member of a visiting team has a real or perceived

conflict of interest as defined below. To maintain uniform quality of visits and *Visiting Team Reports* (*VTR*s), teams are selected so that not more than one person, excluding the AIAS representative, is on his or her first visit.

3. Team members are advised of their preliminary selection for a specific visit with the understanding that final approval of the team is the responsibility of the program.

ii. **Team Chair**

1. **Role.** The team chair is responsible for the following:
   a. Negotiating the date for the visit with the program administrator.
   b. Reviewing the *APR-IA* and identifying needs for additional information or requesting changes to the report.
   c. Conducting a mandatory, pre-visit conference call with all members of the team to establish expectations and special requirements or circumstances. This call is arranged by the NAAB in consultation with the chair.
   d. Developing the agenda for the visit with the program administrator.
   e. Consulting with the program administrator on the format and content of the team room.
   f. Approving proposed non-voting members to the team. Note, the team chair may also revoke this approval if he/she determines the non-voting member has a real or potential conflict of interest or is not prepared to fully participate in the visit.
   g. Preparing the final draft of the *Visiting Team Report* (see below) and sending it to the NAAB offices within 30 days of the visit.
   h. Securing the signatures of all team members on the report, including the non-voting member.
   i. Securing the signatures of the team on the confidential recommendation, excluding the non-voting member (see more below).
   j. Approving corrections of fact submitted by the program after reviewing the draft *VTR*.
   k. Ensuring the team's compliance with the *Procedures for Accreditation* and appropriate standards of conduct during the visit.

2. **Selection**. Visiting team chairs are nominated by the Executive Committee before the site visit. The selection is based on a review of the resumes of former visiting team chairs and experienced visiting team members. Visiting team chairs may also be selected from among former directors of the NAAB. NAAB staff notify program administrators once a chair has been nominated. The

administrator may challenge the nomination for potential conflicts of interest. Once the chair has been confirmed, the administrator and the chair work together to select a date for the visit.

iii. **Non-voting members**

1. **Role.** To facilitate communication and foster a spirit of collaboration, the program is encouraged to nominate up to two program non-voting members to participate in the site visit.

2. **Selection and Approval**.

   a. The program may identify a total of two non-voting members for an initial accreditation visit. The selection must be mutually agreed upon by the program and the visiting team chair to be part of the team.

   b. A program non-voting member may be a member of the architecture community or an *alumnus/a* nominated by the program to offer insight into its unique qualities or history. Individuals who have graduated from the program during its candidacy are considered *per se* to have a real conflict of interest and may not serve on the visiting team for initial accreditation in any capacity.

   c. The NAAB may suggest visiting non-voting members, including prospective team members, non-voting members from affiliated accrediting agencies, staff from collateral organizations, or NAAB staff members. Foreign non-voting members and consultants are not proposed for initial accreditation visits.

   d. Any individual who had or has a contractual or consulting relationship to the program at any time, whether paid or voluntary may not participate as a non-voting team member.

3. **Participation.**

   a. The non-voting member must participate throughout the entire site visit including orientation, entry meetings, evidence confirmation, and exit meetings. He/she is encouraged to offer comments and advice to the visiting team chair, team members, program, or institution.

   b. The non-voting member does not participate in the formal team decisions concerning the recommendation on accreditation.

   c. The non-voting member may be present at the last team work session solely at the discretion of the visiting team chair.

   d. The non-voting member must agree in advance on the principles of confidentiality and conflicts of interest (See Section 9) as outlined below.

e. The non-voting team member must complete all online NAAB training modules.

iv. **Notification to Program**. The NAAB staff notify the program administrator when a full team has been assembled. The program administrator is responsible for determining whether any member of the team poses a real or potential conflict of interest.

v. **Conflicts of Interest**. The NAAB seeks to avoid any real or perceived conflict of interest in its procedures, deliberations, and accrediting decisions. See Section 9 for additional information.

vi. **Challenges to Team Members**. Programs may challenge up to two members of a proposed visiting team, including the chair, under the terms of Section 9, Conflicts of Interest. Such challenges are to be made in writing within 10 days of receiving notice of the nomination of a chair or the membership of a visiting team. Challenges will be reviewed by the NAAB executive director and accreditation manager. Where challenges are permitted to stand, a new team member will be assigned. Challenges will not be accepted less than 21 days prior to the start of an accreditation visit.

c. **Site Visits**
   i. **Scheduling the Dates for the Visit.**
      1. The dates for a visit for initial accreditation are set by the team chair and the program administrator in consultation.
      2. Generally, these visits take place between the last week of January and the first week of April each year.
      3. Once a team has been assembled and proposed, the dates for a visit cannot be changed.
      4. Visits for initial accreditation begin on Saturday evening and end the following Wednesday at noon.
      5. All members of the team are expected to participate in the visit the entire time.
      6. If the program seeking initial accreditation is offered in more than one site, the team chair may be scheduled to arrive early in order to visit other locations for the program. These exceptions are agreed to by the team chair and the program administrator with advice from the NAAB staff. See Section 9 for additional information on visits with special circumstances.
   ii. **Schedule/Agenda for the Visit**
      The schedule for a visit for initial accreditation is the same as for continuing accreditation. See Section 3 for this information.
   iii. **Team Room**
      The purpose, contents, access, and equipment for a team room for a visit for initial accreditation is the same as for a visit for continuing accreditation. See Section 3 for this information.

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iv. **Faculty Exhibits**. The program must provide evidence through a faculty exhibit[*] that the faculty, taken as a whole, reflects the range of knowledge and experience necessary to promote student achievement as described in the *Conditions for Accreditation*. This exhibit should include highlights of faculty professional development and achievement since the last candidacy visit.

d. *Visiting Team Report (VTR)*
   i. **Purpose.** The *VTR* serves multiple purposes. It is essential to the NAAB in making its accreditation decision; it may serve to strengthen the program and its position within the institution; and it may inform current and prospective students about the nature and quality of the program. *VTR*s are considered advisory to the NAAB Board of Directors.
   ii. **Contents**. The *VTR* conveys the visiting team's assessment of whether the program has fully implemented the *Plan for Achieving Initial Accreditation;* whether the program meets the *Conditions for Accreditation*, as measured by evidence of student learning, the overall capacity of the program to fulfill its obligations to ensure student achievement, and the overall learning environment. It establishes the degree to which the program is functioning in the manner described in the *APR.* Therefore, the *VTR* must be concise and consistent and include documentation of the following:
      1. The program's noteworthy qualities with respect to the *Conditions*.
      2. The program's deficiencies with respect to the *Conditions*, especially the Student Performance Criteria.
      3. Concerns about the program's future performance and/or capacity to meet its long-term strategic objectives.
      4. Comments that may be helpful in preparing for future accreditation visits.
   iii. **Format**. The *VTR,* generally speaking, includes the following:
      1. **Section I – Summary of Team Findings**
         a. **Team Comments**. This is a narrative in which the team makes its general comments on the program, the *APR*, and its observations and assessments with special attention to the items in 5.3.ii.1-4 (above).
         b. **Conditions Not Met.** This is a list of the conditions and student performance criteria that the team determines are not met.
         c. **Causes of Concern**. This is a narrative that describes specific concerns of the team relative to unmet conditions or to conditions that may have been met within the strict definition of the condition/criterion, but for which the team

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[*] The faculty exhibit should be set up near or in the team room. To the extent the exhibit is incorporated into the team room, it should not be presented in a manner that interferes with the team's ability to view and evaluate student work.

has concerns or questions. It is not necessary for an unmet condition to generate a cause for concern; likewise conditions/criteria that are determined to be met may have also generated concerns within the team.

    d. **Progress since the Previous Site Visit/*VTR*.** This is a narrative in which the current team reviews the program's progress against each of the not-met or not-yet-met conditions and causes of concern from the previous visit and *VTR*. It is the responsibility of the current team to determine, based on their review, whether previously not-met or not-yet-met conditions are now met and whether the causes of concern have been addressed.

2. **Section II – Compliance with the 2009 Conditions for Accreditation**
3. **Section III – Appendices**
    a. Appendix A. Program and institutional information from Part I: Section 1 of the *APR*.
    b. Appendix B. Conditions Met with Distinction. This is a list of the conditions and student performance criteria for which the team wishes to commend the program. The team is encouraged to include a brief narrative for each one of the conditions or criteria listed here.
    c. Appendix C. The team roster.
4. **Section IV – Report Signatures.** This page includes the signatures of all team members, including the non-voting member(s).
5. **Section V – Confidential Recommendation**. This page transmits the team's recommendation on the term of accreditation to the NAAB Board of Directors, signed by all members of the team, except the non-voting member(s) (see Section 2 for terms that may be recommended).

iv. **Review/Acceptance/Transmittal by the Team**. The team chair must transmit a final draft of the *VTR* to the NAAB office not later than 30 calendar days after the visit ends. During the interim, the team chair is responsible for completing the draft and collecting additional input or suggested text from the other members of the team.

v. **Review by NAAB Staff**. Upon receiving the draft from the team chair, the NAAB staff reviews the draft report and makes corrections for grammar, spelling, and punctuation. In addition the report is reviewed for completeness and comprehension and to ensure the team has not offered advice or recommendations for changes or modifications to the program. If there are concerns or requests for additional review, the draft is returned to the chair. Once the chair makes the adjustments to the draft, it is sent, without the confidential recommendation, to the program administrator.

vi. **Corrections of fact**. The program administrator is asked to review the draft *VTR* to make corrections of fact only. These corrections are to be transmitted to the NAAB staff, who, in turn will review the corrections of fact with the team chair. The team chair has 10 calendar days to accept the corrections of fact and resubmit a final *VTR*.

vii. **Optional response**. The final *VTR* is transmitted to the program administrator who may choose to write a response.

viii. **Dates and deadlines**.
1. 30 days after the visit ends: team chair sends draft *VTR* to NAAB staff.
2. NAAB staff completes the initial edits and corrections, in consultation with the chair, and then sends the draft *VTR* to the program administrator.
3. Within 10 calendar days of receiving the draft *VTR*, program submits corrections of fact. Corrections received after the deadline will not be accepted.
4. Within 10 calendar days of receiving the corrections of fact, the team chair accepts or rejects corrections and submits final *VTR* to NAAB staff.
5. NAAB staff transmits the final *VTR* to the program administrator for an optional response.
6. Within 10 calendar days of receiving the final *VTR*, the program sends its optional response to NAAB offices. Responses received after the deadline will not be forwarded to the Board.
7. Not later than 21 calendar days before the next meeting of the NAAB Board of Directors, NAAB staff prepares the final report package for Board of Directors review. This package contains the following:
   a. An executive summary.
   b. The final *VTR*.
   c. Signature pages.
   d. Confidential recommendation page.
   e. Program response, if one is submitted.

e. **Decision of the Board of Directors**. At its next regularly scheduled meeting, the final report package, including the confidential recommendation is presented to the Board of Directors for a decision. The Board has the following options:
   i. To accept the recommendation of the visiting team on a term of initial accreditation.
   ii. To reject the recommendation of the visiting team and deny initial accreditation.

f. **Transmitting the Decision of the Board of Directors**. Within 14 calendar days of a Board decision regarding a term of initial accreditation, a letter announcing the decision is sent to the president of the institution, with copies to the program

administrator, the team chair, and the team members. This letter is sent by U.S.P.S., certified-mail, return-receipt-requested. The institution has 14 calendar days from the receipt of a decision letter to request reconsideration. See Section 12.

g. **Confidentiality**. The team and any non-voting members must maintain strict confidentiality with respect to materials reviewed, interviews conducted, and team deliberations, including the team's recommendation on a term of initial accreditation in perpetuity. The team bases its assessment of the program, in part, on interviews with various constituencies of the program. All individual and group interviews are confidential, and the information obtained from them is for the exclusive use of the team in preparing its report and recommendation.

Before the accreditation decision, both the NAAB and the program are prohibited from making either the *APR* or the *VTR* available to the collateral organizations or the public.

4. **Public Disclosure of Accreditation Outcomes**
    a. After the accreditation decision, the program is required to disseminate the *APR-IA*, the final *VTR* and pertinent attachments, the current editions of the *Conditions* and the *Procedures* and any addenda, and, eventually, the *Annual Reports* and the NAAB response to each *Annual Report*. These documents must be housed together in the architecture library and be freely accessible to all.

    b. Unless written permission is obtained from the NAAB, the program may disseminate only complete copies of the *Conditions* and the *Procedures* and any addenda and the *VTR*.

    c. The program is required to inform faculty and incoming students that access to the current student performance criteria and any addenda may be read or downloaded from the NAAB Web site.

    d. The NAAB makes available in its office the *APRs* and the *VTRs* of all accredited programs, candidate programs, or programs that have lost accreditation. These are available to the public by appointment. Beginning in 2011, the NAAB will publish all *VTRs* at www.naab.org after accreditation decisions are made. These will be published without the confidential recommendation of the team.

    e. The accreditation decisions for a given year are made available to the collateral organizations—to be published in their entirety in each organization's newsletter—and to other organizations and the public upon request.

    f. Within 30 calendar days of a decision to deny initial accreditation, the NAAB will notify the collateral organizations and the appropriate regional accrediting agency.

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SECTION 6. FOCUSED EVALUATIONS

Programs may receive a term of accreditation with a focused evaluation (FE) after 1, 2, or 3 years. These are sometimes abbreviated as FE1, FE2, or FE3. In granting a term of this type, the NAAB Board of Directors has determined through a review of the *VTR* and other documents that major deficiencies may exist that if not addressed could impair the ability of the program to continue to provide a professional education in architecture. Focused evaluations are scheduled 1, 2, or 3 years after the initial visit (e.g., a focused evaluation 3 years after a 2008 visit would take place in 2011). Generally, focused evaluations take place during the late spring and summer, with any required visits scheduled for the early fall.

The scope of an FE is identified in the decision letter sent to the institution following an accreditation decision by the NAAB Directors. Generally, FEs are limited to matters related to Part I, Sections 1 and 2, and Part II, Sections 2-4 of the *2009 Conditions for Accreditation.* The scope of the FE may also include Causes for Concern in any area other than Student Performance Criteria (Part II, Section 1). In the first quarter of the year in which an FE is scheduled, the NAAB will notify the program to confirm the scope of the FE and to advise them of the deadline for submitting the requisite report.

The information provided to the FE team will include: correspondence with the program regarding scope of the FE, a *Program FE Report,* all *Annual Reports* submitted by the accredited program and the previous *VTR*.

Generally, the FE includes the following elements:
- Review of narrative reports and other documentary evidence by the FE team.
- Determination as to whether a visit is necessary.
- One-day site visit, as needed.
- *Focused Evaluation Team Report* submitted to the Board.

The result of an FE may not exempt a program from continuing to report on **all** unmet Conditions, Criteria, and Causes of Concern from the most recent *VTR* through the Annual Report Submission System. A program may only be released from reporting on those items that formed the scope of the FE by the FE Team.

Unless otherwise released by the FE Team, the program must continue to report on all deficiencies until the next *APR* is due.
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1. **Narrative Reports**
   a. *Program Focused Evaluation Reports* must be submitted to the NAAB by April 1 each year. These reports are similar to *Annual Reports* (see Section 11). However, they are expected to be more comprehensive and to address not only progress by the program, but also any plans for changes or adjustments in response to the most recent accreditation decision.

    b. *Program FE Reports* have two sections. For programs undergoing a Focused Evaluation, both sections must be completed:
        i. A narrative describing the program's response to each item identified as being the scope of the FE, and
        ii. A brief narrative summarizing changes that have been made or may be made in the accredited program.

    c. *Program FE Reports* must be sent electronically to the Accreditation Manager, NAAB.
        i. *Program FE Reports* are limited to 25 pages and 1 MB and are to be in either Word or Adobe PDF.
        ii. By e-mail: info@naab.org with a copy to cpair@naab.org. Please include "*Program FE Report* –[Name of Institution and degree program]" in the subject line.

2. **Focused Evaluation Team**
    a. The NAAB will assign a team of 2 persons (1 educator and 1 practitioner), 1 of whom is a member of the NAAB Board of Directors.

    b. One of the 2 will be designated as the team chair.

    c. There are no non-voting members on FE teams.

3. **Responsibilities of the FE Team Chair**
    a. Coordinate the review of documents with the other member of the team.

    b. Coordinate the initial assessment of the reports and make a recommendation to the NAAB Board as to whether a visit is required.

    c. Communicate with the program on the details of the FE visit, if required.

    d. Prepare the final *FE Team Report*.

4. **FE Sequence**
    a. Review of *Focused Evaluation Report*. In the year of the focused evaluation, the team will review the following:
        i. *Program FE Report*
        ii. Any *Annual Reports* previously submitted
        iii. The most recent *VTR*
        iv. The correspondence confirming the scope of the FE

    b. All documents will be sent to the team by the NAAB staff.

    c. The FE team will confer, using any reasonable means, to determine whether the documentation provides sufficient evidence that the program has removed, or will

remove, each deficiency identified as the scope of the FE at least one academic year prior to the next, regularly scheduled visit. The team will reach an initial decision from among the following:

  i.   The team determines based on a review of the documentary evidence that the program has removed or will remove each deficiency at least one academic year before the next scheduled regular accreditation visit and no FE visit is necessary.
  ii. The team determines based on a review of the documentary evidence that a visit is necessary.

d. If the team determines that no visit is necessary.
  i.   The team chair will prepare a report using the *FE Team Report t*emplate (See Appendix 1). The report will be confined to the analysis of the issues identified as being the scope of the FE and whether the program has removed or will remove these deficiencies at least one academic year prior the next regularly scheduled visit.
  ii. The NAAB will provide a copy of the report to the program to correct errors of fact or omissions.
  iii. The final copy of the report, with the recommendation of the FE team will be sent to the NAAB Board for action.

e. If the team determines a visit is necessary.
  i.   The team chair will consult with the program administrator to set a date for a 1-day FE visit. Visits are to take place on a weekday during a week when classes are in session and students are on campus.
  ii. The scope of the visit is limited to the subject(s) of the FE.
  iii. The team chair and program administrator will consult on the schedule for the visit. Generally, visits should include the following:
      1. Entrance and exit meetings with the program administrator.
      2. Meetings with institutional administrators with responsibility for the subject of the FE (e.g., vice president of finance and administration).
      3. Meetings with faculty.
      4. Review of documents and other evidence deemed appropriate by the program or requested by the team chair to demonstrate progress toward addressing the subject(s) of the FE.
  iv. A team room may or may not be necessary depending on the documents or other evidence to be reviewed.
  v.   Upon the conclusion of the visit, the team chair will prepare a report using the *FE Team Report* template. The report will be confined to the analysis of the issues identified as being the scope of the FE and whether the program has removed or will remove any deficiencies at least one academic year prior the next regularly scheduled visit.
  vi. The NAAB will provide a copy of the report to the program for corrections of errors of fact or omissions.

vii.   The final copy of the report, with the recommendation of the FE team will be sent to the NAAB Board for action.

f.   The program, if it wishes, may provide a written response to the final *Focused Evaluation Team Report*.

5.   **Recommendations Following a Focused Evaluation.** The FE team may make one of four recommendations to the NAAB Board of Directors.
   a.   Allow the schedule for the next visit to stand unchanged and release the program from further reporting on any of the items that were the scope of the FE in subsequent Annual Report Part II narratives.

   b.   Allow the schedule for the next visit to stand unchanged and require the program to continue to report on any item that was within the scope of the FE in subsequent Annual Report Part II narratives.

   c.   Advance the time for the next visit while allowing adequate time for the program to prepare for a regular visit.

   d.   Continue to identify the matters as being of sufficient concern or the program's efforts to address them as being insufficient and schedule another focused evaluation before the next regularly scheduled visit. New issues may not be added to the scope of a subsequent focused evaluation.

6.   **Final Decision**.
   a.   The responsibility for the final decision rests with the NAAB Board of Directors. The recommendation of the FE team will be forwarded to the Board and a decision will be made at the next regularly scheduled meeting of the Board.

   b.   Decisions of the NAAB following a focused evaluation are not subject to appeal.

7.   **Confidentiality**. The team must maintain strict confidentiality with respect to materials reviewed, interviews conducted, and team deliberations, including the team's recommendation on the results of the FE, in perpetuity. The team bases its assessment of the program, in part, on interviews with various constituencies of the program. All individual and group interviews are confidential, and the information obtained from them is for the exclusive use of the team in preparing its report and recommendation.

Before the FE decision, both the NAAB and the program are prohibited from making either the *Special Program FE Report* or the *FE Team Report* available to the collateral organizations or the public.

SECTION 7. NOMENCLATURE CHANGE REQUESTS

In response to institutional changes, institutions may decide to change the title(s) of the NAAB-accredited degree program they offer (e.g., B. Arch. to M. Arch.). Changes to the nomenclature of NAAB-accredited degree programs must be approved by the NAAB Board of Directors. Generally, approval of a nomenclature change follows this sequence:
- Letter of application to the NAAB Board of Directors.
- Submission of a proposal.
- Review of the proposal and application.
- Decision by the NAAB Board of Directors.

Nomenclature change requests are limited to the following:
- Programs seeking to convert an existing B.Arch. already in excess of 150 credits to a single-degree M.Arch. program by modest adjustments to the curriculum in order to achieve the 168-credit minimum.
- Programs seeking to convert an existing five-year, non-baccalaureate M.Arch program into a B.Arch program through modest adjustments in the curriculum in order to achieve the 150-credit minimum.
- Programs seeking to convert an existing M. Arch. program that requires an undergraduate degree (either in architecture or another discipline) for admission into a D. Arch. program by modest adjustments to the curriculum in order to achieve the 210-credit minimum.

Any program seeking to use the nomenclature change procedure to "split" an accredited single-degree program into a multi-degree sequence that concludes with an M.Arch or D. Arch., and which may require a pre-professional degree for admission, must first consult the NAAB to determine whether this procedure is appropriate or whether the new, proposed multi-degree sequence must pursue candidacy and initial accreditation. In the event the program must pursue candidacy and initial accreditation, the Board may approve an accelerated schedule.

If approved, nomenclature changes may not be applied retroactively.

1. **Eligibility.** Programs seeking approval of a nomenclature change request must have the following:
    a. A 6-year term of accreditation that does not include or require a focused evaluation for their current program (i.e., a "clean 6-year term").

    b. All elements of Part II, Section 2, of the *2009 Conditions for Accreditation Curricular Framework* must have been met in the last accreditation visit and *VTR*.

    c. No element of Part II, Section 3 of the *2009 Conditions for Accreditation* may be listed as a cause for concern in the most recent *VTR*.

      d. No more than 4 years have elapsed since the last regularly scheduled accreditation visit.

2. **Application.** Programs seeking approval of a nomenclature change request must submit the following to the NAAB Board of Directors:

      a. A letter from the chief academic officer of the institution requesting approval of the change.

      b. A proposal for implementing the change (see below).

      c. A copy of the most recent decision letter from the NAAB Board of Directors.

      d. Copies of other institutional or state-required approvals for the nomenclature change. The NAAB will not consider nomenclature change requests that have not met all other requirements for institutional or state-required approvals.

      e. Applications for nomenclature changes may be sent by email only and are to be addressed to the NAAB Accreditation Manager.
         i. Applications are limited to 50 pages and 2 MBs.
         ii. They are to be in either Word or Adobe PDF.
         iii. By e-mail: info@naab.org with a copy to cpair@naab.org. Please include "Application for Nomenclature Change –[Name of Institution]" in the subject line.

3. **Proposal for Nomenclature Changes**. The proposal for the nomenclature change must include the following:

      a. Part I – Description of the current degree program.
         i. This should be similar to the program's response to Part II, Section 2.1 Professional Degrees and Curriculum in its most recent *Architecture Program Report.*[*]
         ii. The matrix for Part II, Section 1, Student Performance Criteria, for the current degree program.

      b. Part II - Proposed new degree nomenclature.
         i. Part A – Professional Degrees & Curriculum. This section should describe any changes that must be made to the program in order to conform to NAAB and institutional requirements including:
            1. A narrative that responds to the requirements of Part II, Section 2, Curricular Framework.
            2. A new matrix for Student Performance Criteria for the accredited program under its new title.
            3. Any pre-requisites.

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[*] Part II, Section 2.1 is similar to Condition 12 from the *2004 NAAB Conditions for Accreditation*.

ii. Part B – Implementation Plan. This section must identify a course of action for implementation of the renamed degree program within not more than two academic years after receiving approval of the nomenclature change. The plan must include the following:
1. Securing resources not already available to the program (e.g., faculty, space, financial support), if necessary.
2. Developing and implementing new courses and/or curricular sequences, if necessary.
3. Proposed last academic year in which students will receive diplomas with the current title for the NAAB-accredited degree program.
4. Proposed first academic year in which students may enroll in the newly titled NAAB-accredited degree program.
5. Proposed academic year in which students will receive diplomas that display the new degree title.
6. Plans for ensuring that students in the current degree program are able to complete their NAAB-accredited degrees on time.
7. A plan for communicating with students, faculty, staff, alumni and the state registration/licensing board if the nomenclature change is approved by the NAAB Board. NOTE: If approved, nomenclature changes may not be applied retroactively.

4. **Nomenclature Change Review Team**.
   a. The NAAB will assign a team of 2 persons (1 educator and 1 practitioner), 1 of whom is a member of the NAAB Board of Directors, the other will be from the most recent visiting team, if possible.

   b. One of the 2 will be designated by the NAAB Directors as the team chair.

   c. There are no non-voting team members on teams to review nomenclature change requests.

5. **Responsibilities of the Team Chair.**
   a. Coordinate the review of documents with the other member of the team.

   b. Coordinate the initial assessment of the reports and make a recommendation to the NAAB Board as to whether a visit is required.

   c. Communicate with the program on the details of the visit, if required.

   d. Prepare the final *Nomenclature Change Request Report*.

6. **Nomenclature Change Sequence.**
   a. The team will review the application and proposal along with the most recent *VTR*.

b. The team will confer, using any reasonable means, to determine whether the documentary evidence is sufficient for making a recommendation to the NAAB Board of Directors. The team will reach an initial decision from among the following:

    i. Based on a review of the documentary evidence, the team determines that the program has provided sufficient documentation for making a recommendation to the NAAB Board of Directors and no visit is necessary.

    ii. The team determines based on a review of the documentary evidence that a visit is necessary to review additional documentation or to confer with program administrators and other institutional leaders.

c. If the team determines that no visit is necessary.

    i. The team chair will prepare a report using the *Nomenclature Change Request Report* template. The report will be confined to the analysis of the proposal and the program's preparation to implement the new degree title.

    ii. The NAAB will provide a copy of the report to the program to correct errors of fact or omissions.

    iii. The final copy of the report, with the recommendation of the team will be sent to the NAAB Board for action.

d. If the team determines a visit is necessary.

    i. The team chair will consult with the program administrator to set a day for a 1-day Nomenclature Change visit. Visits are to take place on a weekday during a week when classes are in session and students are on campus.

    ii. The scope of the visit is limited to the preparation by the institution or academic unit to implement the new degree title.

    iii. The team chair and program administrator will consult on the schedule for the visit. Generally, visits should include the following:

        1. Entrance and exit meetings with the program administrator.

        2. Meetings with institutional administrators with responsibility for implementation of the new degree (e.g., department chair or dean).

        3. Meetings with faculty.

        4. Meetings with students.

        5. Review of documents and other evidence deemed appropriate by the program or requested by the team chair to demonstrate the program's readiness to implement the new degree title.

    iv. A team room may or may not be necessary depending on the documents or other evidence to be reviewed.

    v. Upon the conclusion of the visit, the team chair will prepare a report using the *Nomenclature Change Request Report* template.

vi. The NAAB will provide a copy of the report to the program to correct errors of fact or omissions.
vii. The final copy of the report, with the recommendation of the NC team will be sent to the NAAB Board for action.

e. The program, if it wishes, may provide a written response to the final report.

7. **Recommendations for Nomenclature Change Requests.** The team may make one of three recommendations to the NAAB Board of Directors.
   a. Approve the nomenclature change request and leave the existing visit schedule unchanged.

   b. Approve the nomenclature change request and advance the time for the next visit while allowing adequate time for the program to prepare. .

   c. Deny the nomenclature change request.

   In the event the change is approved, the team will recommend a specific date by which the current degree title will no longer be considered accredited and a date after which only the new title will be considered the accredited degree. These dates will also be reported to the National Council of Architectural Registration Board.

8. **Final Decision**.
   a. The responsibility for the final decision rests with the NAAB Board of Directors. The recommendation of the team will be forwarded to the Board and a decision will be made at the next regularly scheduled meeting of the Board.

   b. In the event the nomenclature change request is denied, the program must wait until after its next regularly scheduled accreditation visit to reapply.

   c. Decisions of the NAAB regarding nomenclature changes are not subject to appeal.

9. **Confidentiality**. The team must maintain strict confidentiality with respect to materials reviewed, interviews conducted, and team deliberations, including the team's recommendation on a nomenclature change request in perpetuity. The team bases its assessment of the request, in part, on interviews with various constituencies of the program. All individual and group interviews are confidential, and the information obtained from them is for the exclusive use of the team in preparing its report and recommendation.

Before the decision, both the NAAB and the program are prohibited from making the application, proposal, or final report available to the collateral organizations or the public.

SECTION 8. SPECIAL CIRCUMSTANCES

1. **Request for Postponement of a Regularly Scheduled Visit.**
   Under certain circumstances, a program may request postponement of a regularly scheduled visit for continuing accreditation or continuation of candidacy. The process for requesting a postponement is the same in either case. A program may only request a postponement one time in any accreditation cycle.

   The following may not be postponed: visits for initial accreditation, focused evaluations, and nomenclature change reviews.

   a. **Submitting the Request:**
   Not later than August 1 in the year prior to a regularly scheduled visit for continuing accreditation, or initial or continuation of candidacy, a program may request that the visit be postponed to the next academic semester or quarter (e.g., a visit scheduled for Spring 2011 may be postponed to Fall 2011). The request must include the following:
      i. A written request for the postponement from the institution's chief academic officer.
      ii. A brief description of the reason(s) for requesting the postponement.
      iii. A brief description of the benefit of the postponement to the program and institution.
      iv. A brief description of the benefit of the postponement to the accreditation process.
      v. Requests to postpone visits originally scheduled for the following spring must be received in the NAAB offices no later than close of business on August 1. Requests to postpone visits originally scheduled for the fall, must be received in the NAAB offices no later than close of business on March 1.
      vi. Applications may be submitted in electronic format only.
         1. Applications are limited to 3 pages and 200 KB including all supplemental information.
         2. The request is to be sent either in Microsoft Word or Adobe PDF.
         3. Requests are to be addressed to the Executive Director, NAAB at info@naab.org with a copy to cpair@naab.org. Please include "Request for Postponement of Regularly Scheduled Visit –[Name of Institution]" in the subject line.

   b. **Action on the Request**. Decisions to grant or deny a request for a postponement will be made by the NAAB Executive Committee at its next regularly scheduled meeting. Results of the decision will be communicated by a letter addressed to the chief academic officer within 7 calendar days of the executive committee's decision.

c. **Special Circumstances**. In the event of a natural disaster or other catastrophic event, a program may request a postponement of a regularly scheduled visit without regard to the deadlines described above.

2. **Request for Reinstating Accreditation**
A request for reinstatement must be made by an institution's chief academic officer. The procedure for reinstatement is the same as that for Candidacy and Initial Accreditation, as described in Sections 4 and 5. For programs requesting reinstatement, the minimum period of candidacy is one year.

3. **Programs at Remote Locations**
The NAAB recognizes that institutions continue to seek innovative ways in which to deliver curricula leading to an NAAB-accredited degree. These innovations may vary from individual courses offered in unique settings (e.g., urban design centers) to dual-campus institutions where a single curriculum is delivered in part or in full by the same faculty at more than one location. For the purpose of accreditation of a first professional degree in architecture accredited by the NAAB, the following definitions apply.
   a. **Definitions.**
      i. **Branch Campuses**. A branch campus is a location that is geographically apart from and independent of the accredited program offered at the main/flagship campus of the institution, is permanent in nature, offers at least 50 percent of the curriculum leading to a NAAB-accredited degree, or has a curriculum that differs significantly from that offered at the main/flagship campus, has its own faculty and administrative/supervisory organization, including committee structures, and has its own budgetary and hiring authority. Students and faculty are engaged in committees or professional organizations that are unique to the branch campus. Opportunities for research and scholarship are controlled at the branch campus. NAAB-accredited programs offered at branch campuses must be accredited separately from those offered at the main campus (e.g., University of California system or the University of Texas system). For the purposes of accreditation, institutional partnerships to offer a NAAB-accredited program at more than one main/flagship campus of more than one institution will be considered under this definition.
      ii. **Additional Site.** An additional site is a location that is geographically apart from, but not independent of the accredited program at the main/flagship campus or its organizational control and management. There is one dean or administrative head with overall responsibility for the program and one committee structure serving the programmatic needs of the additional site and the main campus site (i.e., one curriculum committee, one grievance committee, and one admissions

66

committee). Faculty, staff, and students are integrated into the academic, professional and social life of the program at the main campus. This includes faculty and students from the additional sites being engaged in committees, professional organizations, and having comparable access to scholarly and research activities. Programs offered at a main campus and at an additional site are accredited together as a single program.

iii. **Teaching Site and Study-Abroad**. A teaching site is a location that is geographically apart from, but not independent of the accredited program. It is used only for instruction during a specific course or single-semester sequence. The teaching site allows the program to meet the needs of different course components within a single curriculum. Teaching sites and study abroad programs are reviewed within the context of the curriculum for the NAAB-accredited program.

iv. **Online Learning**. For the purposes of accreditation, courses offered online will be considered under the definition of teaching sites, except to the extent that more than 40 percent of the curriculum is delivered online or the residency requirement is less than six weeks. In such cases, the online program will be considered an additional site.

b. **Determination of Accreditation Status for Branch Campuses or Additional Sites.** In the *Annual Report* submitted one year prior to the due date for the next regularly scheduled *APR* and in the Supplemental Material for the *APR*; the program must include its responses to the questionnaire found in Appendix 2 and a narrative description of its branch campuses, additional sites, teaching sites and online learning using the definitions above. The narrative must address the following matters:
   i. Curriculum
   ii. Geographic location
   iii. Administrative structure
   iv. Budgetary and hiring authority and responsibilities
   v. Faculty access to committee assignments, research and scholarship opportunities and participation in professional societies
   vi. Student access to services and equipment, and participation in governance.
   vii. Physical resources

The responses to the questionnaire and narrative taken together will be used by the Executive Committee to determine which category to assign and what additional requirements may be added to the visit. This decision will be made by the Executive Committee and the program will be notified no later than January 1 (or eight months prior to the deadline for the *APR*) as to whether a separate *APR* and separate site visit will be required. The criteria for the determination of the status of the remote programs are outlined below.

c. **Separate *APR*s and Separate Site Visits.** Programs on branch campuses will be treated as unique, individually accredited programs and will follow the procedure outlined in Section 3. This will require a separate *APR* and a separate visit.

d. **Expanded *APR* and Extended Visit**
   i. Programs with additional sites, teaching sites, or online learning are required to describe these sites in the *APR* and to identify the role(s) these sites play in the ability of the program to deliver the curriculum leading to the accredited degree or the ability of the institution to meet its mission.
   ii. Visits to additional sites or teaching sites will be included in the regularly scheduled visit to the accredited program. The site visit may be extended by up to 2 days to accommodate the visit to the additional or teaching site. The additional or teaching site will be visited by the visiting team chair and at least one other member of the team. (NOTE: Teaching sites located outside the U.S. may be visited by the team chair; the decision to do so is made by the chair after review of the *APR* and in consultation with the NAAB..

e. **New Programs at Branch Campuses or Additional Sites**
   i. Programs initiating new programs at branch campuses will be treated as unique, individual programs and will be required to follow the procedures for candidacy and initial accreditation as outlined in Sections 4 and 5.
   ii. Programs initiating or altering additional sites, teaching sites or online learning must provide this information in the *Annual Report, Part II*, at such time as the changes are made or considered. When the program prepares its next *APR*, the team chair and the NAAB staff will determine whether additional time will be added to the visit to review the new or altered sites.

f. **Review of Student Work**
   NAAB visiting teams shall have access to student work completed at other locations or online. There are several options for this review. The team chair, program administrator, and NAAB staff should consult on the method that best meets the needs of the visit. These options include:
   i. Establishing a team room at the additional or teaching site and displaying student work there. In this case, a day will be added to the visit.
   ii. Displaying student work from the additional or teaching site in the team room at the primary location for the program. The work must be clearly identified as having been produced by students at the additional or teaching site.

iii. In all cases, the institution will coordinate the location of the display and logistics of the visit with the team chair prior to the accreditation visit.

g. *Visiting Team Report*

In all cases, the NAAB *Visiting Team Report* shall address the additional sites, teaching sites, or online learning relative to the conformance of their administrative structure, financial responsibilities, equipment and facilities, student demographics, curriculum and student/faculty governance policies to those of the main/flagship campus. The evaluative essence of the accreditation process is to assure the profession and the public that the conditions and performance standards for accreditation as measured through institutional and student performance criteria has been achieved in all sites at which the NAAB-accredited degree is offered.

4. **Phasing Out Programs**

An institution that intends to eliminate its NAAB-accredited degree, must maintain compliance with the NAAB *Conditions for Accreditation* until the conclusion of the fiscal year in which the program will cease awarding the accredited degree.

Any institution that intends to eliminate its NAAB-accredited degree must provide a narrative report that describes the process for eliminating the degree program, the last year in which students will be admitted to the program, and the last year in which the degree will be awarded. During a phase-out period, students who enrolled in the accredited degree program must be able to complete their entire course of study, with the necessary resources, as accredited by the NAAB. Further, regularly scheduled visits for continuing accreditation will take place.

SECTION 9. CONFLICTS OF INTEREST.

The NAAB and its volunteer leaders are dedicated to serving the interests of the NAAB's constituencies and collateral partners in the most honorable and ethical manner possible. Among the NAAB's duties is the responsibility to provide assurance to its constituencies and partners that debates, decision making, and all governance at the NAAB is conducted in an objective and bias-free context. Thus, the NAAB seeks to avoid any real or perceived conflict of interest in its procedures, deliberations, and accrediting decisions[*].

No person shall take part as a visiting team member and no Board member shall participate in an accrediting decision or the deliberations leading thereto if he/she cannot evaluate a program objectively and without bias even if none of the categories for automatic disqualification set forth below apply. The term "program" shall include, in addition to the program specifically to be evaluated, any previous program, substitute program, or other program at the institution regardless of its degree title, that has received or is seeking NAAB accreditation.

The NAAB shall not assign an individual to serve on a visiting team to evaluate a program if it appears that the individual has a real or perceived conflict of interest that would raise a question as to that individual's objectivity regarding the evaluation.

All conflicts, real or potential, must be disclosed to the program administrator, the visiting team chair, and the NAAB staff at least 21 days before the visit begins in order to determine whether specific action should be taken.

1. Except as set forth below, no individual shall be assigned more than once to serve as a member of a visiting team for the same program. This provision shall also apply to non-voting members on a visiting team.

2. If a program received less than the maximum term of accreditation during its last accreditation cycle, then, with the express agreement of the program, one member of the last visiting team, exclusive of the non-voting member may be assigned to the subsequent visiting team.

3. Directors and potential team members, including non-voting members are responsible for determining and reporting whenever they have a conflict of interest, or appearance of a conflict of interest, with regard to a particular accreditation matter[†]. Before serving as a team

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[*] The policy on conflict of interest was approved by the NAAB Board of Directors on July 20, 2008.
[†] Non-voting members are likely to be alumni or otherwise considered "friends" of the program. These relationships do not, necessarily preclude an individual from serving as an non-voting member, however, they must be identified and reported to the team chair prior to an individual's being accepted by the chair as an non-voting member on the team. These relationships are to be documented in the *VTR* under Team Comments.

member or participating in any decision on the matter, an individual shall inform the NAAB if such a conflict or the appearance of a conflict exists.

4. An individual, in determining whether he or she should be disqualified from participation shall consider, even in the absence of a true conflict of interest, whether the potential appearance of a conflict of interest is sufficiently serious to dictate the individual's withdrawal from participation.

5. When considering whether he or she has a conflict of interest or an apparent conflict of interest that would prevent the individual from taking part in the evaluation of a program, the individual should take into account such matters (nonexclusive) as these:
   a. Graduation from the institution in which the program being evaluated is located.
   b. Close association with administrative or faculty personnel in the program or at the institution at which the program is located.
   c. Having relatives or close friends who are associated with the program or the institution at which it is located.
   d. Being a donor or providing other resources and support to the program or institution at which it is located.
   e. Demonstrating that he/she holds a preconceived opinion based on the type of program to be evaluated, its reputation, the underlying philosophy of the program, the extent of expected faculty research, or the extent to which it is an undergraduate or graduate program.

6. No person shall serve as a visiting team member and no director shall take part in the deliberations or decision regarding the accreditation of a program under the following circumstances:
   a. The individual has, or has had, a direct relationship to the program being evaluated, as an employee, current or former student, or graduate of this program.
   b. Within the 10 years prior to the visit the individual, whether paid or unpaid, has had a limited relationship with the program being evaluated as a temporary employee, visiting faculty member, recipient of an honor, speaker on more than a single occasion, volunteer teacher or mentor, consultant, or financial supporter.
   c. With regard to the program to be evaluated, the individual is currently seeking, or at any time in the 10 years prior to the visit has unsuccessfully sought permanent employment or a relationship of the types set forth above.
   d. The individual or a member of the individual's immediate family (including the individual's spouse, child, parent, or sibling and the immediate family of the spouse, child, or sibling) is an employee of, or is currently seeking employment with, the institution in which the program is located.

7. Exceptions to the above policy may be made if approved by an administrator of the program in writing or if the program fails to make a timely objection to a substitution necessary on short notice.

SECTION 10. ANNUAL REPORTS

Continuing accreditation and candidacy is subject to the submission of *Annual Reports*. *Annual Reports* are submitted online through the NAAB's Annual Report Submission system available from the NAAB Web site and are due by November 30 of each year. They are then reviewed by the NAAB staff and a response is prepared and sent to the program. For specific information or instructions on how to complete *Annual Reports*, please refer to the NAAB's Web site www.naab.org.

1. **Content.** These reports have two parts:
   a. **Part I (Annual Statistical Report)** captures statistical information on the institution in which an architecture program is located and the degree program. For the purposes of the report, the definitions are taken from the glossary of terms used by the Integrated Postsecondary Education Data System (IPEDS) [*]. Much of the information requested in Part I corresponds to the *Institutional Characteristics, Completion and 12-Month Enrollment Report* submitted to IPEDS in the fall by the institution. Data submitted in this section is for the previous fiscal year.

   b. **Part II (Narrative Report)** is the narrative report in which a program provides the following:
      i. Plans and activities for addressing all elements of Section 1.4 Conditions Not Met and Section 1.5 Causes of Concern of the most recent *VTR*.
      ii. Plans, activities or additional information requested in subsequent decision letters on other accreditation actions (e.g., nomenclature change).
      iii. A brief description of changes to the program. (NOTE: This part is linked to other questions in the Annual Statistical Report for which a narrative may be required).

2. **Submission**
   a. *Annual Reports* are submitted through the NAAB's Annual Report Submission system and are due on November 30.

   b. All programs are required to submit both parts of the *Annual Report,* There are two exceptions:
      i. Programs submitting *APR*s in September for visits the following spring must only complete the Annual Statistical Report.

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[*] IPEDS is the "core postsecondary data collection program for the National Center for Education Statistics. Data are collected from all primary providers of postsecondary education in the [U.S.] in areas including enrollments, program completions, graduation rates, faculty, staff, finances, institutional prices, and student financial aid." For more information see http://nces.ed.gov/IPEDS/

      ii. Programs with FEs are required to submit the Annual Statistical Report in the year in which the FE is scheduled (see Section 6 of this document for additional information).

3. **NAAB Response.** *Annual Reports* are reviewed by the NAAB staff and an NAAB response is sent to the program, generally after February 1. The NAAB administrative response to the *Annual Report* will identify whether additional or continued reporting is required on any matter. Programs are required to include these administrative responses as supplemental material in subsequent *APR*s. The response has three sections:
   a. A checklist that identifies whether required elements are included or not.

   b. An assessment of the program's response to deficiencies from the last *VTR* and any subsequent action by the Board. This part has two sections:
      i. Assessment of responses to conditions not-met.
      ii. Assessment of responses to causes of concern.

   c. An acknowledgement of any changes to the program and whether those changes may require additional reporting in subsequent reports.

   d. Programs may not be released from reporting in the *Annual Report* on an item that was the subject of a Focused Evaluation or Suspension Review except by the team conducting the FE or SR (See Section 6).

4. **Fine for Late Annual Report.** *Annual Reports* are due each year on November 30. In the event a program fails to complete an annual report on time, including not more than one extension, the program will be assessed a fine of $100.00 per calendar day until the *Annual Report* is submitted. This fee will be assessed when the NAAB Response to the Annual Report is completed.

5. **Failure to Submit an *Annual Report*.** If an acceptable *Annual Report* is not submitted to the NAAB by the deadline, the NAAB may also advise the chief academic officer and program administrator of the failure to comply. In the event the program fails to submit an acceptable *Annual Report* after an extensive period of time, the NAAB executive committee may consider advancing the program's next accreditation sequence by at least one calendar year. In such cases, the chief academic officer of the institution will be notified with copies to the program administrator and a schedule will be determined so that the program has at least six months to prepare an *APR.*

SECTION 11. COMPLAINTS ABOUT PROGRAMS

Individuals who wish to file a complaint about an accredited program must do so in writing.
1. A letter, addressed to the president, and sent to the NAAB offices at 1735 New York Avenue, NW, Washington, DC must include the following:
   a. The specific nature of the complaint.

   b. A description of the impact on the accreditation of the program of the failure of the program or institution to address the complaint. The complainant is expected to reference the specific *Conditions for Accreditation* that may be compromised.

   c. Evidence that the complainant has exhausted all other institutional means for resolving the issue.

2. Upon receiving a written complaint about a program, the NAAB will notify the program that a complaint has been received. The NAAB will make every effort to ensure the complainant's identity is kept confidential. The NAAB will request a response from the program.

3. The complaint and response are presented for review at the next Board meeting. At that time, the Board may consider the following courses of action:
   a. To take no action.

   b. To require the program to address the matter of the complaint in the next *Annual Report* and subsequent *APR*.

   c. To append the complaint and response to the next *VTR, FE Report, Nomenclature Change Request Report, or Extension of Term Request Report* to be considered as part of the record for the next accreditation action.

4. The NAAB will not consider complaints from students about grades given in specific courses within NAAB-accredited programs.

5. Complaints may be filed at any time during a program's current accreditation cycle. Complaints about matters that arose in a prior accreditation cycle will not be considered.

SECTION 12. RECONSIDERATIONS

Programs may request reconsideration of Board action regarding terms of accreditation or of Board decisions to deny or withdraw accreditation. When making a request for reconsideration, the program must be prepared to present evidence that either of the following is true:
- The Board's decision is not supported by factual evidence cited in the record or
- The NAAB and/or visiting team failed to comply substantially with established accreditation procedures and any such departure significantly affected the decision.

Reconsiderations may not be requested for the following circumstances:
- Failure of the program to provide information to the NAAB and/or the visiting team in a timely manner.
- Board action regarding the acceptance of *APR*s or *Annual Reports*.

Reconsiderations are conducted by the NAAB Directors. The filing of a request for a reconsideration automatically delays implementation of the Board's accreditation decision.

1. **Initiating a Reconsideration**.
    a. The reconsideration must be requested by the chief academic officer of the institution within 14 calendar days of receiving the NAAB's accreditation decision.

    b. The request is sent to the NAAB president.

    c. The request must identify the incorrect or insufficient factual information cited by the NAAB in support of the decision and/or evidence of the visiting team's failure to comply with established accreditation procedures and that such failure significantly affected the accreditation decision.

    d. The request must be sent by certified mail, return receipt requested.

    e. All days refer to regular calendar days, exclusive of national holidays.

2. **Reconsideration Sequence**.
    a. Upon receiving the request, the NAAB president assigns a Board member as Board representative to oversee the reconsideration until its conclusion at the next regularly scheduled meeting of the Board. Other than having participated in the accreditation decision, the Board representative shall have had no prior involvement with the program.

    b. The Board representative sends the request for reconsideration to the team chair and requests a written response to the assertions of incorrect or insufficient evidence and/or failures of the visiting team to comply with established procedures.

c.   The Board representative, using the *VTR*, the program's response to the *VTR,* the program's request for reconsideration, and the visiting team chair's response, shall prepare a written analysis of the issues.

d.   The written analysis is sent to the program and the visiting team chair.

e.   Upon receiving the Board representative's analysis, the chief academic officer of the institution may request either one of the following:
   i.   A reconsideration on the record or
   ii.   A reconsideration hearing at the next regularly scheduled Board of Directors meeting.

f.   Reconsideration on the Record.
   i.   If the program requests reconsideration on the record, the reconsideration will be added to the agenda for the next regularly scheduled meeting.
   ii.   The agenda item will include the following background material:
      1.   The *VTR.*
      2.   The program's response to the *VTR.*
      3.   The program's request for reconsideration.
      4.   The visiting team chair's response.
      5.   The Board representative's analysis.
   iii.   If the team chair is a member of the Board, he/she is excused from the deliberations.
   iv.   The NAAB Directors review the record and determine whether to reconsider the accreditation decision. At least 8 members of the Board must vote in favor of a motion to reconsider the decision.
   v.   Reconsideration of the Accreditation Decision.
      1.   If the motion to reconsider is approved, a new motion on the accreditation action will be made.
      2.   Any new motion regarding a reconsidered term of accreditation must be based only on materials provided in the record.
      3.   Any new motion regarding a reconsidered term of accreditation must have at least 8 votes in favor to pass.
   vi.   Not less than 7 calendar days after the meeting of the Board of Directors where the term of accreditation was reconsidered, the NAAB president shall send the institution the decision. This letter will include reasons supporting it as recorded by the Board designee.

g.   Reconsideration Hearing. The hearing has two stages.
   i.   Determination to Grant Reconsideration.
      1.   If the program requests a reconsideration hearing, the chief academic officer and the Board representative may make a written request to the NAAB executive director naming persons required at the hearing. The executive director shall invite these persons, but cannot ensure their attendance. Such requests must be made

at least 14 calendar days before the next regularly scheduled meeting of the Board of Directors.

2. During the Board meeting, the Board recesses from its regular business and reconvenes for the reconsideration hearing. The Board representative serves as chair. In attendance shall be the NAAB Directors, the NAAB executive director, representatives of the institution as determined by the institution, and the visiting team chair.

3. The Board representative opens the hearing by introducing the participants and explaining the procedure to be followed.

4. Representative(s) of the institution, who may include legal counsel, will present their position, confining it to issues of either incorrect or insufficient factual information and/or evidence that the visiting team's failure to comply with accreditation procedures affected the accreditation decision.

5. Within the same limits, the visiting team chair and the president of NAAB may present other positions.

6. The Board representative may question any attendee and, solely at his/her discretion, may direct questions from Board members to the institution and vice versa.

7. The institution's representative(s) make a closing statement, which concludes the reconsideration hearing, after which the institution's representatives and the visiting team chair are excused.

8. The NAAB Directors review the evidence and determine whether to reconsider the accreditation decision. At least 8 members of the Board must vote in favor of a motion to reconsider the decision.

ii. Reconsideration of the Accreditation Decision.

1. If the motion to reconsider is approved, the reconsideration hearing will adjourn and the Board will reconvene in its regular meeting. The president will resume the chair.

2. Any new motion regarding a reconsidered term of accreditation must be based on information available to the visiting team with respect only to those matters that served as the basis for the grant of reconsideration. The Board may take the steps deemed necessary to review material available to the visiting team but not contained in the *APR* or *VTR*.

3. Any new motion regarding a reconsidered term of accreditation must have at least 8 votes in favor to pass.

4. Not less than 7 calendar days after the meeting of the Board of Directors where the term of accreditation was reconsidered, the NAAB president shall send the institution the decision. This letter will include reasons supporting it as recorded by the Board designee.

SECTION 13. APPEALS

Programs may appeal a reconsideration decision only if the decision resulted in a decision to deny or withdraw accreditation. By entering an appeal process, the institution agrees to accept the ruling of the appeal panel as final.

Appeals may only be made on the following grounds:
- The NAAB decision was not supported by sufficient factual evidence cited in the record.
- The Board of Directors and/or visiting team failed to comply substantially with established accreditation procedures and such departure significantly affected the decision.

Failure of the program to provide information to the NAAB and/or the visiting team in a timely manner cannot provide a basis for requesting the appeal of a reconsideration decision.

An appeal is conducted by persons selected to represent the collateral organizations and the public.

1. **Initiating the Appeal**.
   a. To initiate an appeal hearing, the chief academic officer must send a written request to the NAAB president within 21 calendar days of receiving official notice of the reconsideration decision. The request must include a specific response to the reconsideration decision.

   b. The request is sent to the NAAB president.

   c. The request must identify the incorrect or insufficient factual information cited by the NAAB in support of the decision and/or evidence of the visiting team's failure to comply with established accreditation procedures and that such failure significantly affected the accreditation decision.

   d. The request must be sent by certified mail, return receipt requested.

   e. All days refer to regular calendar days, exclusive of national holidays.

   f. The filing of a request for an appeal automatically delays implementation of the Board's accreditation decision.

2. **Appeal Sequence**.
   a. Selecting the Appeal Panel.
      i. Each collateral organization is informed of the appeal hearing and asked to submit to the NAAB president a list of persons who can represent the collateral organization and those who can represent the public; who are willing to serve on an appeal panel; and who have never been involved with either the Institution or the accreditation action under appeal.

    ii.   The NAAB president draws from these lists to propose an appeal panel composed of five persons, one each representing the AIA, AIAS, ACSA, NCARB, and the public.

    iii.   Within 14 calendar days of receiving a request for an appeal hearing, the NAAB executive director forwards the proposed membership of the panel to the chief academic officer and proposes a date and place for convening the panel.

    iv.   Within 7 calendar days of receiving the list, the chief academic officer either notifies the NAAB president that the panel is acceptable or challenges no more than two proposed members. In the latter case, the NAAB president will appoint replacements, after which the membership of the appeal panel is final.

    v.   The NAAB president selects a member of the approved panel to serve as the appeal panel chair.

b.   Appeal Panel Review of the Record.

    i.   The appeal panel receives and reviews the program's *APR*, *VTR*, the program's response to the *VTR*, information reviewed during the reconsideration hearing, and the institution's response to the reconsideration decision.

    ii.   The appeal panel chair reviews the evidence and any policies, correspondence, and documents applicable to the appeal hearing with the executive director.

    iii.   After the initial review, the appeal panel chair and the chief academic officer of the institution then determine a time and place for the hearing.

c.   Appeal Hearing.

    i.   The appeal panel chair convenes an appeal hearing. In attendance are the appeal panel, the NAAB president and Board representative, the visiting team chair, the NAAB executive director, and representatives of the institution as determined by the institution.

    ii.   The appeal panel chair opens the hearing by introducing the participants and explaining the procedure to be followed.

    iii.   A representative or representatives of the institution, who may include legal counsel, first present their position, confining it to issues of incorrect or insufficient factual information cited by the NAAB in support of the decision and/or evidence that failure of the visiting team to comply with established accreditation procedures significantly affected the accreditation decision.

    iv.   The appeal panel chair may question any attendee.

    v.   The appeal panel chair calls a recess so the panel may consider whether to receive or request additional written material before its deliberations.

    vi.   The institution's representative or representatives make a closing statement, which concludes the appeal hearing, after which the institution's representatives are excused.

      d. Appeal Decision.
          i. The panel convenes in executive session to rule on whether the accreditation decision is upheld.
             1. If the accreditation decision is upheld, the following occur:
                 a. The appeal panel chair prepares a statement to be signed by the members of the appeal panel, stating the accreditation decision is upheld, and delivers it to the NAAB office within 7 calendar days of the appeal hearing.
                 b. Within 7 calendar days of its receipt, the NAAB president forwards the statement to the chief academic officer of the institution.
             2. If the accreditation decision is not upheld, the following occur:
                 a. The appeal panel identifies the factual evidence found to be incorrect or insufficient to support the NAAB decision and/or those lapses in compliance with established accreditation procedures that significantly affected the accreditation decision.
                 b. The appeal panel chair prepares a report containing the appeal panel decision and the reasons supporting it and delivers it to the NAAB office within 7 calendar days of the appeal hearing.
                 c. Within 7 calendar days of its receipt, the NAAB President forwards the report to the chief academic officer of the institution.
                 d. The NAAB immediately takes steps to correct the items specified in the appeal panel report and to have the NAAB make a new accreditation decision in light of the corrections. This new accreditation decision is subject to reconsideration and appeal, as if it were an original accreditation decision.

3. **Decision**. The ruling of the appeal panel is final.

4. **Expenses.** The institution shall bear the expenses directly associated with the hearing, such as those for meeting rooms and for the travel, meals, and lodging of its representatives and the appeal panel. The institution shall bear the expense of having witnesses appear at its request, and the NAAB shall do the same.

SECTION 14. RESPONSIBILITIES

1. **Responsibilities of the NAAB office.** The NAAB staff is responsible for:
   a. Ensuring that the visiting team chair, team members, and non-voting members are informed of their responsibilities.

   b. Providing the team chair and team members with the *Conditions* and *Procedures*, and a template for completion of the *VTR* not less than 4 week prior to the visit.

   c. Stewarding the resources of the NAAB and the programs by approving all airline reservations with an estimated fare above $750.00.

   d. Communicating with team members on behalf of the program. Team members are advised not to communicate with the program directly; this is the responsibility of the NAAB staff and the team chair.

   e. Billing programs for the expenses of the visiting team. These invoices will be sent not later than September 1 for visits that took place during the spring; and not later than February 1 for visits that took place in the fall. The NAAB will provide the following supporting documentation:
      i. Copies of invoices or itineraries for airfare or other transportation.
      ii. Copies of receipts for ground transportation, including rental cars.
      iii. Copies of receipts for meals and other expenses over $25.00.

2. **Responsibilities of the team members**.
   a. Contacting the NAAB office to confirm their participation in the site visit not less than <u>4 weeks before the visit.</u>

   b. Promptly suggesting any revisions to the *VTR.*

   c. Reviewing Section 9, Conflict of Interest, and verifying to the NAAB office and the team chair that no conflict of interest exists.

   d. Making air travel arrangements at least 4 weeks in advance to secure economical fares.

   e. Before the visit, reviewing the *Conditions* and the *Procedures*, the program's *APR*, the format for the *VTR*, and the visiting team members' resumes.

   f. Thoroughly examining documentation in the team room as assigned by the visiting team chair.

g. Actively participating or observing, as applicable, in all aspects of the visit and carrying out all tasks assigned by the visiting team chair with integrity and timeliness.

h. Participating in writing the draft of the *VTR*, which should reflect the team's consensus on all matters of substance, by the last night of the visit before the exit interviews.

i. Holding information in strictest confidence as specified in these *Procedures*.

j. Notifying the NAAB office immediately in the event of a personal emergency that renders the team member unable to fulfill his/her responsibilities. In the event, a team member withdraws from a team less than 30 days prior to the visit for reasons other than a personal or health emergency, he/she will be permanently removed from the pool of potential team members.

k. Completing and submitting his/her reimbursement requests in a timely manner.
    i. A copy of the reimbursement form can be found on the NAAB Web site in the Documents section in the Team Room folder.
    ii. Requests for reimbursement must be submitted within 60 days of the end of the visit. Requests for reimbursement must include:
        1. Invoice/itinerary for transportation (air or rail).
        2. Receipts for ground transportation, including rental cars.
        3. Receipts for meals and incidental expenses over $25.00.
    iii. Any reimbursement item in excess of $25.00 that does not have an accompanying receipt or explanation (e.g., "3 of us shared the check for dinner; my share was $30.00) will not be honored and the total amount of the reimbursement will be adjusted accordingly.
    iv. Requests for reimbursement submitted after August 15 for spring visits and after January 15 for fall visits will not be honored.

l. Complete the required NAAB team training program prior to being assigned to a visiting team.

3. **Responsibilities of the school/program**.
    a. The program is responsible for making all hotel and lodging arrangements for the team. This includes ensuring that reasonable accommodation has been made for persons with disabilities.

    b. The program is responsible for notifying the NAAB office not less than 30 days prior to the visit of the following:
        i. Visit-related expenses that cannot be reimbursed according to institution policy (e.g., alcohol served at meals).
        ii. Specific requirements for documentation to support invoices for team expenses (e.g., boarding passes).

If the program fails to notify the NAAB office before the team arrives, the program will be responsible for securing the necessary documentation from the team members.

c. Unless otherwise agreed to by the program administrator and the team chair, the program is responsible for all ground transportation during the visit. This includes transportation to and from the airport and all local transportation.

d. The program is responsible for providing team members with copies of the *APR* not less than 45 days prior to the first day of the visit.

e. The program is responsible for providing the team room and for ensuring the following provisions have been addressed:
     i. Secure, sound proof space for the exclusive use of the team.
     ii. Accessible to the team only 24 hours a day during the course of the visit.
     iii. Students must have been notified if work prepared for a specific course is selected for use in accreditation activities and must have reasonable access to the work, except during the actual accreditation visit.
     iv. The program has been responsible for all expenses related to archiving or preparing original work for accreditation purposes.

4. **Expenses for visiting teams**. The program is responsible for all expenses for visiting teams. This includes visits for continuing accreditation, eligibility for candidacy, initial candidacy, initial accreditation, focused evaluations, nomenclature changes, and extensions of term.

5. **Fines for late *APR*s**. *APR*s are due each year on September 7. For each calendar day after September 7 that passes until the *APR* is received, the program will be assessed a fine of $100.00 per day. This fee will be assessed when the program is billed for the expenses of the visiting team.

6. **Fines for late Annual Reports**. *Annual Reports* are due each year on November 30. In the event a program fails to complete an annual report on time, including not more than one extension, the program will be assessed a fine of $100.00 per calendar day until the *Annual Report* is submitted. This fee will be assessed when the NAAB Response to the Annual Report is completed.

APPENDICES
1. Report Templates
2. Branch Campuses Questionnaire
3. Annual Report Submission
4. Suggested site visit agenda
5. Site visit protocols
6. Check list for site visits
7. Reimbursement form(s)
8. NAAB Bylaws

Appendix 1: Report Templates
   A. Visiting Team Report
   B. Focused Evaluation Team Report
   C. Nomenclature Change Request Report

Appendix 2. Branch Campuses Questionnaire

Name of Institution:	
Title of Degree:	
Name of Program Administrator:	
Name of Person Completing this Form:	
Location of Branch Campus, Additional Site, Teaching Site, Online learning, or Study Abroad Program:	
Distance from Main/Flagship Campus:	
Number of Courses from Curriculum Leading to a NAAB-Accredited Degree Offered at this site	
(List all courses: number, title, credits offered)	
Is attendance at the branch campus, additional site, teaching site, study abroad or online program required for completion of the NAAB-accredited degree program?	
Who has administrative responsibility for the program at the branch campus?	
To whom does this individual report?	
Where are financial decisions made?	
Who has responsibility for hiring faculty?	
Who has responsibility for rank, tenure, and promotion of faculty at the branch campus?	
Does the branch campus have its own curriculum committee?	
Does the branch campus have its own admissions committee?	

Does the branch campus have its own grievance committee?	
Does the branch campus have its own resources for faculty research and scholarship?	
Does the branch campus have its own AIAS or NOMAS chapter?	
Does the branch campus maintain its own membership in ACSA?	

Appendix 3: NAAB – Annual Report Submission (ARS)

Introduction

In 2008, the National Architectural Accrediting Board (NAAB) launched a new online Annual Report Submission (ARS) system with a deadline of November 30.

Continuing accreditation/candidacy is subject to the submission of *Annual Reports*. They are reviewed by the NAAB staff and a response is prepared and posted to the ARS for each access by the program. Under certain conditions, three-year terms of accreditation may be extended to six-year terms on the basis of the material provided in *Annual Reports*. Conversely, if an acceptable *Annual Report* is not submitted to the NAAB by the following January 15 the NAAB may consider advancing the schedule for the program's next accreditation sequence.

SECTION A. INSTITUTIONAL CHARACTERISTICS
This section captures aggregated information about the home institution for each architecture program. Wherever possible, this information should be the same as that reported by the institution to IPEDS in its most recent Institutional Characteristics report or Completion report.

1. Program Contact Information *(preloaded from ACSA Guide):*

2. Institution Type:

3. Carnegie Classification:
      a. Basic Classification:
      b. Undergraduate Instructional Program:
      c. Graduate Instructional Program:
      d. Size and Setting:

4. Which regional accreditation agency accredits your institution?

5. In which ACSA region is the institution located?

6. Who has direct administrative responsibility for the architecture program?
      Name
      Title
      Office Phone Number
      Fax Number
      Email

7. To whom should inquiries regarding this questionnaire to be addressed?
      Name
      Title
      Office Phone Number
      Fax Number
      Email

8. Who is the university administrator responsible for verifying data (and completing IPEDS reports) at your institution?
      Name
      Title
      Office Phone Number

Fax Number
Email

9. Institutional Test Scores
    a. SAT
        Critical Reading
        25th percentile SAT score: _____
        75th percentile SAT score: _____

        Mathematics
        25th percentile SAT score: _____
        75th percentile SAT score: _____

        Writing
        25th percentile SAT score: _____
        75th percentile SAT score: _____

    b. ACT
        25th percentile ACT score: _____
        75th percentile ACT score: _____

    c. Graduate Record Examination (GRE)
        Verbal: _____ (200-800)
        Quantitative: _____ (200-800)
        Analytical: _____ (0.0 – 6.0)

SECTION B – NAAB-ACCREDITED ARCHITECTURE PROGRAMS
This section captures information about the specific NAAB-accredited degree programs offered by the institution, unless otherwise noted in the instructions.

1. DEGREE PROGRAMS
    a. Which NAAB accredited / candidate degree programs were offered during the last fiscal year? (B. Arch, M. Arch, D. Arch)

    Accredited
        B. Architecture ☐

        M. Architecture ☐

        D. Architecture ☐
    Candidate
        B. Architecture ☐

        M. Architecture ☐

        D. Architecture ☐
    b. Did your institution offer any pre-professional architecture degree programs during the last fiscal year (Bachelor of Science, Bachelor of Arts, etc.)?

    c. Did your institution offer any post-professional architecture degree programs during the last fiscal year?

2. **Does your institution have plans to initiate any new NAAB-accredited degree programs?**

3. Does your institution have plans to discontinue any of its NAAB-accredited degree programs?

4. What academic year calendar type does your institution have?

5. Credit Hours for Completion for each program:

    a. Indicate the total number of credit hours taken at your institution to earn each NAAB accredited/candidate degree program offered by your institution.

    b. By degree, what is the distribution of the credit hours in the following: General Education, Professional, and Electives?

6. Average credit hours per student per term by degree program?

7. Is your degree program(s) offered in whole, or in part, at more than one campus or location? If yes, please provide detailed information including location (city, state, or country, length (credit hours), and indicate if students can earn full accredited program at additional campus.

SECTION C –TUITION, FEES AND FINANCIAL SUPPORT FOR STUDENTS IN NAAB-ACCREDITED PROGRAMS

1. Tuition is defined as "the amount of tuition and required fees covering a full academic year most frequently charged to students for instructional services."

    a. What were the tuition and fees for the institution for the last fiscal year?

    b. Does the institution offer discounted or differential tuition for a NAAB-accredited degree program?

    c. Is a summer session required for any portion of your accredited degree program(s)? If yes, what is the additional tuition and fees for the summer program?

    d. Does the institution offer discounted or differential tuition for summer courses for a NAAB accredited degree program?

2. Financial Aid: What was the percent of students financial aid at both the institutional and architecture program levels (grants, loans, assistantships, scholarships, fellowships, tuition waivers, tuition discounts, veteran's benefits, employer aid [tuition reimbursement] and other monies [other than from relatives/friends] provided to students to meet expenses? *This includes Title IV subsidized and unsubsidized loans provided directly to student) provided by the institution to students enrolled in each program(s) leading to a NAAB accredited degree during the last fiscal year.*

    a. Institution

        i. Percent of students receiving aid

            1. Federal Grants

            2. State/Local Grants

            3. Institutional Grants

            4. Student Loans

        ii. Average amount of types of financial aid received

            1. Federal Grants

            2. State/Local Grants

            3. Institutional Grants

          4. Student Loans

    b. Architecture Program
        i. Percent of students receiving aid
            1. Federal Grants
            2. State/Local Grants
            3. Institutional Grants
            4. Student Loans
        ii. Percent of students by types of aid
            1. Federal Grants
            2. State/Local Grants
            3. Institutional Grants
            4. Student Loans

3. Graduate Assistantships (What was the total number of graduate-level students employed on a part-time basis for the primary purpose of assisting in classroom or laboratory instruction or in the conduct of research during the last fiscal year (Jul 1 – Jun 30) within the NAAB-accredited programs offered by your institution? *Please include: graduate assistant, teaching assistant, teaching associate, teaching fellow or research assistant in your calculation.*

SECTION D – STUDENT CHARACTERITICS FOR NAAB-ACCREDITED DEGREE PROGRAMS

1. APPLICANT CYCLE
    a. Applicants: Indicate the number of individuals who fulfilled the institution's requirements to be considered for admission (including payment or waiving of the application fee, if any) and who had been notified of one of the following actions during the last fiscal year: admission, nonadmission, placement on a waiting list, or application withdrawn by applicant or institution.

    b. Admissions (students admitted): Indicate the total number of applicants that have been granted an official offer to enroll.

    c. Entering Students: (update question from definition below) Indicate the number of individuals who enrolled during the last fiscal year. Exclude readmitted students who were counted as enrolled in a prior year). Information about ethnicity must be based on self-identification information provided by the individual.

2. Total undergraduate/graduate architecture enrollment in NAAB accredited program by race/ethnicity.

SECTION E -- DEGREES AWARDED

1. What is the total number of NAAB-accredited degrees that were awarded in the last fiscal year?

2. Time to Completion/Graduation
    a. Time to completion equals the total number of semesters/quarters to complete the degree: ____

    b. Percentage of students that graduate in "normal time to completion" _____

    c. Percentage of students that graduate in 150% of "normal time to completion"
3. Graduation rate for B. Arch programs: The rate required for disclosure and/or reporting purposes under Student Right-to-Know. This rate is calculated as the total number of completers within 150%

of normal time divided by the revised cohort minus any allowable exclusions. This information should be provided by the unit within the institution responsible for reporting data to the National Center for Education Statistics. This information should also be provided by the unit within the institution responsible for preparing IPEDS report- Graduation rate for the institution; Graduation rate for the B. Arch.

SECTION F -- RESOURCES FOR NAAB-ACCREDITED PROGRAMS
This section captures information on the resources of NAAB-accredited degree programs.

1. Total number of catalogued titles in the architecture library collection within the institutional library system (Main Campus; Other locations – links from B8).

2. Total number of catalogued titles that have Library of Congress NA or Dewey 720-729 (Main Campus; Other locations – links from B8).

3. What is the total number of permanent workstations (studio desks) that can be assigned to students enrolled in design studios?

4. Please indicate which of the following: labs, shop, and other learning resources available to all students enrolled in NAAB-accredited degree program(s).

5. Financial Resources
      a. Total Revenue from all sources $_____

      b. Expenditures
            i. Instruction **$_____**
            ii. Capital **$_____**
            iii. Overhead **$_____**

      c. Per Student Expenditure: What is the average per student expenditure for students enrolled in a NAAB accredited degree program. *This is the total amount of goods and services, per student, used to produce the educational services provided by the NAAB-accredited program.*
            Instruction + Overhead / FTE Enrollment $_____

SECTION G - HUMAN RESOURCE SUMMARY (Architecture Program)

1. Credit Hours Taught (needs definition and perhaps example)
      a. Total credit hours taught by full time faculty
      b. Total credit hours taught by part time faculty
      c. Total credit hours taught by adjunct faculty

2. Instructional Faculty
    a. Full-time Instructional Faculty (Professor, Associate Professor, Assistant Professor, Instructor): Those members of the instructional/research staff who are employed full time and whose major assignment is instruction, including those with release time for research. Includes full-time faculty for whom it is not possible to differentiate between teaching, research, and public service because each of these functions is an integral component of his/her regular assignment:

    b. Part-Time Instructional Faculty (Professor, Associate Professor, Assistant Professor, Instructor).

c. Adjunct Faculty Professor, Associate Professor, Assistant Professor, Instructor): Non-tenure track faculty serving in a temporary or auxiliary capacity to teach specific courses on a course-by-course basis. Includes both faculty who are hired to teach an academic degree-credit course and those hired to teach a remedial, developmental or ESL course; whether the later three categories earn college credit is immaterial. Excludes regular part-time faculty, graduate assistants, full-time professional staff who may teach individual courses (such as the dean or academic advisor) and appointees who teach non-credit courses exclusively.

3. Faculty Credentials:
Indicate the highest degree achieved by each faculty member (professor, associate professor, assistant professor).

4. Salaries

Average annual salaries for only full-time instructional faculty teaching in the NAAB-accredited program for the last fiscal year. Do not include administrators.

PART II: RESPONSES TO THE MOST RECENT VISITING TEAM REPORT

Part II (Narrative Report) is the report in which a program responds to the most recent *Visiting Team Report (VTR).* The narrative must address *Section 1.4 Conditions Not Met* and *Section 1.5 Causes of Concern* of the *VTR*. Part II also includes a description of changes to the program that may be of interest to subsequent visiting teams or to the NAAB. In addition, this part is linked to other questions in Part I for which a narrative may be required. If a program had zero "not mets" in the most recent *VTR* or was "cleared of future reporting" in subsequent annual reports, no report is required in Part II.

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Appendix 4: Suggested Site Visit Agenda

Saturday
P.M.
Team arrival and check-in at the hotel
Team introductions and orientation

Sunday
A.M.
Team-only breakfast
Architecture Program Report (*APR*) review and assembly of issues and questions
Overview of the team room by the program head
Initial review of exhibits and records
Team lunch with program administrators
P.M.
Tour of the facilities
Entrance meeting with the faculty
Continued review of exhibits and records
Team-only dinner
Debriefing session

Monday
A.M.
Team breakfast with the program head
Entrance meeting with the chief academic officers of the institution
Entrance meeting with the school or college administrator(s)
Continued review of exhibits and records
Lunch with selected faculty members
P.M.
Observations of studios
Continued review of exhibits and records
School-wide entrance meeting with students
Reception with faculty, administrators, alumni/ae, and local practitioners
Team-only dinner
Continued review of exhibits and records
Debriefing session

Tuesday
A.M.
Team breakfast with the program head
Review of general studies, electives, and related programs
Observation of lectures and seminars
Continued review of exhibits and records
Team lunch with student representatives
P.M.
Meeting with faculty
Complete review of exhibits and records
Team-only dinner
Accreditation deliberations and drafting the *Visiting Team Report* (*VTR*)

Wednesday
A.M.

Check-out of the hotel
Team breakfast with the program head
Exit meeting with the school or college administrator(s)
Exit meeting with the chief academic officers of the institution
School-wide exit meeting with the faculty and students
Team departures

Appendix 5: Site Visit Protocols

Do not publicly divulge insider information.

All the information obtained by a team member in the course of a site visit is privileged and confidential. It is a breach of trust to disclose any aspect of this information outside the institution and the NAAB.

Do not privately divulge insider information.

A visiting team's sole assignment is to assess a program's compliance with the conditions for accreditation. It is improper to disclose any information that is not pertinent to this assignment within the program or the institution.

Do not recruit personnel.

It is inappropriate to solicit potential personnel for your own school or office during a site visit.

Do not accept institutional gifts.

It is inappropriate to accept any institutional gifts, favors, or services during a site visit.

Do not engage in self-promotion.

It is inappropriate to indicate your interest in being employed by an institution in any capacity until after the institution has received its accreditation decision.

Do not offer personal solutions.

It is inappropriate to suggest how a program might meet the NAAB conditions for accreditation or to in any way impose your personal views on program structure, administration, or pedagogy.

Do not overreact to or ignore deficiencies.

Continually bear in mind that the accreditation process includes a structured method by which a program can improve and correct its deficiencies. It is inappropriate to react to deficiencies in a punitive, threatening manner or, conversely, to ignore them based on unfounded optimism.

Do not be overwhelmed by stature.

Deficiencies encountered at a prestigious institution should be provided with the same objective assessment offered to programs in less prestigious institutions. It is inappropriate to minimize or turn a blind eye to deficiencies or concerns out of deference to an institution's reputation.

Appendix 6: Site Visit Checklists

For Program Administrators

Visit Preparation

_____ Write the letter describing remote sites.

_____ Attend the National Architectural Accrediting Board (NAAB) workshops on *Architecture Program Report* (*APR)* and site visit preparation at the ACSA Administrators' and Annual Conferences.

_____ Prepare an *APR* for delivery to the NAAB office by 7 September.

_____ Review the team composition proposed by the NAAB and accept, challenge, or augment it as appropriate.

_____ Work with the team chair to establish the visit schedule.

_____ Work with the team chair to select non-voting members from among those nominated; invite the non-voting members and inform them of their responsibilities.

_____ Augment or rewrite the *APR,* if so requested.

_____ Discuss the content and organization of the team room with the team chair.

_____ Work with the team chair and the program and institutional representatives to develop a visit agenda.

_____ Inform the program and institutional representatives of the finalized agenda.

_____ Discuss the provision of hotel meeting space with the team chair and make all room and meeting space reservations.

_____ Make arrangements for the local transportation of the team.

_____ Set up a team room with easily accessible and fully identified exhibits of student and faculty work.

_____ Advise the team as to preferences for making travel arrangements (individual booking, institutional travel site or office, NAAB travel agency).

The Site Visit

_____ Post the visit agenda and team resumes in the vicinity of the team room.

_____ Provide an overview of the team room; augment the team room with any supplemental student work or records that may be required.

_____ Facilitate the team's attendance at all visit activities.

The Visit Follow-Up

_____ Review the draft *Visiting Team Report* (*VTR)* and send proposed corrections of fact to the NAAB office and a copy to the team chair.

_____ Review the changes adopted by the NAAB office; if necessary, provide a response.

_____ Reimburse the non-voting members and the NAAB office.

_____ Submit the evaluation of the accreditation sequence.

_____ Review the accreditation decision; place the *APR, VTR* and any attachments, and current editions of the *NAAB Conditions for Accreditation* and the *NAAB Procedures for Accreditation* in the architecture library.

_____ If the accreditation decision is unacceptable, assist the chief academic officer of the institution in preparing a request for a reconsideration hearing; if the outcome of the latter is unacceptable and the decision is to deny or withdraw accreditation, assist the chief academic officer in requesting an appeal hearing.

_____ Submit an *Annual Report* every year to maintain accreditation.

For Team Chairs

Visit Preparation

_____ Respond to the invitation and work with the program head to establish the visit schedule.

_____ Schedule and lead the pre-visit conference call with all members of the visiting team.

_____ Review the *APR;* request additional information if necessary.

_____ Make travel arrangements for yourself and notify the program head of your arrival time.

_____ Discuss the content and organization of the team room with the program head.

_____ Work with the program head to develop a visit agenda.

_____ Work with the program head to select non-voting members from among those nominated.

_____ Discuss the provision of hotel meeting space with the program head.

_____ Contact all team members and non-voting members regarding their travel arrangements and Saturday activities; clarify any questions individuals may have.

_____ Make arrangements with the program head for local transportation.

_____ Prepare an orientation session (See the checklist For Team Chair Orientation Sessions with the Team in this appendix.

The Site Visit

_____ Meet the team on Saturday to introduce the members and non-voting members to each other and begin orientation.

_____ Complete orientation; solicit impressions of the *APR* and generate a list of issues and questions to be addressed during the site visit.

_____ Make work assignments in consultation with the team.

_____ Ascertain whether supplemental student work or records are required (see the checklist Requests for Additional Information by the Team Chair in this appendix).

_____ Coordinate the visit activities; revise the agenda, if necessary.

_____ Conduct debriefing sessions each evening with the team members and/or program head.

_____ Conduct accreditation deliberations and ask team members to begin drafting specific sections of the *VTR;* establish target dates for completing the final draft of the report.

_____ Summarize the team's assessment of the program and present the summary at the exit meetings.

The Visit Follow-Up

_____ Prepare and circulate the first draft of the *VTR.*

_____ Contact team members to ensure that their comments will be delivered on schedule.

_____ Incorporate the team's suggested revisions and complete the first draft of the *VTR;* if the revisions are substantial, review them with the team.

_____ Send a disk and hard copy of the signed report to the NAAB office within 30 calendar days of the visit.

_____ Consult with the NAAB office on revisions requested by the program.

_____ Submit a reimbursement request to the NAAB office.

_____ Submit an evaluation of the other visiting team members to the NAAB office.

For Team Members and Non-voting members

Visit Preparation

_____ Respond to the invitation.

_____ Participate in the pre-visit conference call

_____ Become thoroughly familiar with the current editions of the *NAAB Conditions for Accreditation* and the *NAAB Procedures for Accreditation,* the format for the *VTR,* and the team members' resumes.

_____ Make a thorough review of the program's *APR* and generate a list of issues and questions to be addressed during the site visit.

_____ Clarify anything that is unclear with the team chair.

_____ Make travel arrangements for yourself, in accordance with the preference(s) identified by the program. Notify the program head of your arrival time, and confirm arrangements for transportation from the airport.

The Site Visit

_____ Be an active participant in all sessions listed on the agenda.

_____ Complete all tasks assigned by the team chair.

_____ Contribute to the first draft of the *VTR.*

_____ Prepare your reflections on the visit and present them at the exit meetings.

_____ For team members only: Provisionally provide your signature for the *VTR* and your confidential recommendation on the term of accreditation.

The Visit Follow-Up

_____ For team members only: Upon receiving the first draft of the *VTR,* promptly provide the team chair with your comments and suggested corrections.

_____ Confirm the use of your signature on the *VTR* and your confidential recommendation.

_____ Should the final draft contain substantial revisions, promptly provide the team chair with further comments and suggestions.

_____ Submit your travel expenses to the NAAB office for reimbursement.

_____ Submit your evaluation of the other visiting team members to the NAAB office.

For Team Chair Orientation Sessions with the Team

_____ Have team members introduce themselves, citing previous visit experience and areas of expertise.

_____ Explain the benefits of the team's composition: representatives of all the collateral organizations and possibly the public, as well as non-voting members. Emphasize that team members represent different constituencies with different issues.

_____ Explain the NAAB's mission: to ensure minimum compliance with the requirements of the profession and encourage the uniqueness of individual programs.

_____ Review the components of an accreditation review:

— Submission and review of the *APR*

— Completion of the site visit

— Submission and review of the *VTR*

— Accreditation decision by the board

— Reconsideration and appeal process, when requested.

_____ Discuss the purposes of the site visit (including the need to identify concerns not evident in the *APR;* to conduct scheduled and possibly unscheduled confidential interviews).

_____ Review the site visit protocols.

_____ Discuss the NAAB conditions for accreditation (response to constituents, self-assessment, accountability, resources, administration, curriculum, studio culture, and student performance).

_____ Review the two levels of accomplishment (understanding, ability) and the types of evidence.

_____ Explain the need for identifying any necessary supplemental materials early in the visit.

_____ Discuss terms of accreditation and the board's process of making accreditation decisions.

_____ Review responsibilities for contributing to the *VTR* during and after the site visit.

_____ Discuss the format of the *VTR* and the need to be concise.

_____ Establish specific dates for completing the *VTR.*

_____ Come to agreement on how signatures will be obtained for the *VTR* and the confidential recommendation on a term of accreditation.

_____ Review the rules of communication, especially the need for maintaining confidentiality.

_____ Engage the team in reviewing the *APR* and assemble the preliminary list of issues and questions to be addressed during the visit.

_____ Assign tasks and responsibilities.

For Requests for Additional Information by the Team Chair

The team chair may request any of the following data, as may be necessary:

_____ Grade reports from specific semesters or courses

_____ Student evaluations of specific courses

_____ Transcripts of current or recent graduates

_____ Written processes for integrating transfer students into the program at all grade levels; evidence of the application of these processes

_____ Written processes and expectations of faculty performance and advancement, for example, faculty evaluations, and union information

_____ Written advising guidelines for students

_____ Advising assignments for faculty

_____ Written processes for the recruitment, admission, retention, and graduation of students

_____ Committee charges and assignments for faculty

_____ Additional budget information

_____ Other (Specify.)_____

Appendix 7: Expense Reimbursement Procedures and Form

Reimbursement Procedures

All programs will be invoiced by the NAAB for all team travel expenses.

The program is responsible for notifying the NAAB staff not less than 30 days prior to the visit if there are visit-related expenses that cannot be reimbursed according to institution policy (e.g., alcohol served at meals).

The NAAB reimburses each team member for expenses related to a site visit. This includes visits for continuing accreditation, eligibility for candidacy, initial candidacy, initial accreditation, focused evaluations, nomenclature changes, and extensions of term.

The NAAB subsequently invoices the program for these expenses. Reimbursable expenses are hotel and subsistence, local travel to and from the airport and during the visit, and expenses incurred in planning the visit or preparing the report, as well as expenses for parking, tips, and food en route. The program is directly responsible for expenses incurred by its nominated non-voting members. If it wishes, the program may provide direct hotel subsistence and other team necessities on site; such expenses are not reported to the NAAB by team members and are neither reimbursed by the NAAB nor invoiced to the program by the NAAB.

The program is responsible for all expenses for visiting teams. This includes visits for continuing accreditation, eligibility for candidacy, initial candidacy, initial accreditation, focused evaluations, nomenclature changes, and extensions of term.

Immediately following the visit, team members and NAAB non-voting members should complete a reimbursement form and submit original receipts for transportation, meals, hotel, and miscellaneous expenses to the NAAB office. Reimbursement for air travel is for economy coach class only; car rental requires prior approval from the program. The program's non-voting members should make arrangements for reimbursement directly with the program. All reimbursements should be submitted to the NAAB office within 60 days of the visit. Please submit expenses for reimbursement only when you can include original receipts. Attach the receipts for all expenses (except mileage) to the form. Requests for reimbursement submitted after August 15 for spring visits and after January 15 for fall visits will not be honored.

When you have filled out the Expense Reimbursement form, please send it to:

Ms. Ziti Sherman
Financial Manager
NAAB
1735 New York Avenue, N.W.
Washington, DC 20006-5209

...CHITECTURAL ACCREDITING BOARD

...York Avenue NW, Washington, DC 20006

...bursement Request Form - School Visits

Purpose of Trip: _____

4	5	6	7	8	9

within 45 d...

...erson.

ONAL AF...
1735 New

Total Expenses

10

el Advance:

Employee

...zation:

Date: _____

Amount

Date: _____

Approved by: _____

For accounting use only:

Account #	Amount	Account #

...ays.

Appendix 8: NAAB Bylaws

Index