PROCEDURES FOR ACCREDITATION

Professional Degree Programs in Architecture 2015 Edition

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This edition is in effect for all visits scheduled to take place after January 1, 2016.

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SECTION 1. OVERVIEW

About the National Architectural Accrediting Board

The National Architectural Accrediting Board (NAAB) is both a decision-making and policy-generating body composed of a 13-member Board of Directors.

The NAAB is an independent, nonprofit corporation with an office in Washington, DC. The corporation is designated as tax-exempt under USC 26 § 501(c)(3).

The NAAB reserves the right to vary from these published procedures if to do so is in the best interests of a program or programs, or the accreditation process. 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.

Vision, Mission, and Values

From the 1940 Founding Agreement

> "The … societies creating this accrediting board, here record their intent not to create conditions, nor to have conditions created, that will tend toward standardization of educational philosophies or practices, but rather to create and maintain conditions that will encourage the development of practices suited to the conditions which are special to the individual school. The accrediting board must be guided by this intent."

Since 1975, the *NAAB Conditions for Accreditation* have emphasized self-assessment and student performance as central elements of the NAAB model. The directors have maintained their commitment to both of these as core tenets of the NAAB's criteria and procedures.

Vision: The NAAB aspires to be the leader in establishing educational quality assurance standards to enhance the value, relevance, and effectiveness of the architectural profession.

Mission: The NAAB develops and maintains a system of accreditation in professional architectural education that is responsive to the needs of society and allows institutions with varying resources and circumstances to evolve according to their individual needs.

Values: The following principles serve as a guide and inspiration to the NAAB.

1. ***Shared Responsibility*.** The education of an architect is a responsibility shared by the academy and the profession in trust for the broader society and the public good.
2. ***Best Practices.*** The NAAB's accreditation processes are based on best practices in professional and specialized accreditation.
3. ***Program Accountability.*** Architecture degree programs are accountable for the learning of their students. Thus, accreditation by the NAAB is based both on educational outcomes and institutional commitment to continuous improvement.
4. ***Preparing Graduates for Practice.*** A NAAB-accredited degree prepares students to live and work in a diverse world: to think critically; to make informed decisions; to communicate effectively; to engage in life-long learning; and to exercise the unique

knowledge and skills required to work and develop as professionals. Graduates are prepared for architectural internship, set on the pathway to examination and licensure, and prepared to engage in related fields.

5. ***Constant Conditions for Diverse Contexts*****.** *The NAAB Conditions for Accreditation* are broadly defined and achievement-oriented so that programs may meet these standards within the framework of their mission and vision, allowing for initiative and innovation. This imposes conditions on both the NAAB and on architectural programs. The NAAB assumes the responsibility for undertaking a fair, thorough, and holistic evaluation process, relying essentially on the program's ability to demonstrate how within their institutional context they meet all evaluative criteria. The process relies on evaluation and judgment that, being rendered on the basis of qualitative factors, may defy precise substantiation.

6. ***Continuous Improvement through Regular Review*****.** *The NAAB Conditions for Accreditation* are developed through an iterative process that acknowledges and values the contributions of educators, professionals in traditional and non-traditional practice, and students. The NAAB regularly convenes conversations on critical issues (e.g. studio culture) and challenges the other four collateral partners to acknowledge and respect the perspectives of the others.

The 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 preprofessional 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 U.S. jurisdictions 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 a NAAB-accredited degree program includes general studies, professional studies, and optional studies. 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, NAAB student 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.

Accreditation Documents

The *2014 NAAB Conditions for Accreditation* and the *2015 NAAB Procedures 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 govern accreditation actions for the period 2016-2020 (including *Architecture Programs Reports* submitted in September 2015).

The *Procedures* document is a companion to the *2014 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 full accreditation process review. Proposed changes are released for public comment and review at least 120 days prior to the Board meeting at which they are scheduled to be approved.

In addition to accreditation documents, the NAAB publishes other materials that provide advice and best practices to programs and teams preparing for accreditation visits. These are made available on the NAAB website.

Conditions for Accreditation

The *2014 Conditions for Accreditation,* published separately, are the criteria 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 Conference.

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* is scheduled for release in 2019.

SECTION 2. GENERAL INFORMATION

This section covers general information that applies to NAAB processes, particularly visits and visiting teams.

1. Definitions

Term	Definition/Description	Section/Related Documents
Architecture Program Report	The *APR* is 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.	Sections 3 and 5 Guidelines for Preparing an Architecture Program Report
Accreditation, Continuing	Unless specifically noted in the Board's decision, all terms of accreditation are effective on January 1 of the year in which the visit took place. Conversely, all terms of accreditation expire on January 1 of the year in which a visit is scheduled to take place unless and until the NAAB approves a motion for a term of accreditation. Programs that have completed the first term of continuing accreditation following a term of initial accreditation may seek subsequent terms of continuing accreditation.	Sections 3 and 5
Accreditation, Initial	Initial accreditation is probationary in nature and indicates that although deficiencies may be present, the institution has established plans and is making sufficient progress to address or remove the deficiencies by the time of the first visit for continuing accreditation under Section 3.3.	Section 4
Candidacy, Initial	Initial candidacy indicates the program and institution are prepared to implement a Plan for Achieving Initial Accreditation within six years.	Section 4
Candidacy, Continuing	Continuation of candidacy indicates a program is progressing with the implementation of a Plan for Achieving Initial Accreditation.	Section 4

Candidacy, Eligibility	Eligibility for candidacy indicates an institution's Plan for Achieving Initial Accreditation is reasonable and achievable.	Section 4
Candidacy, max term	The maximum period of candidacy is six years. Should a program fail to achieve initial accreditation within the maximum period, it must submit a new candidacy application.	Section 4
Visiting Team	Individuals, nominated by the NAAB and approved by the program, who conduct a visit to review/evaluate a professional degree program in architecture.	Sections 4 and 5
Visiting Team Member	One of the individuals nominated to serve on a visiting team. This individual may be an educator, practitioner, NCARB member board member, or a student.	Sections 3 and 5
Visiting Team Chair	The individual nominated by the NAAB and approved by the executive committee to lead the visiting team. The individual responsible for completing the Visiting Team Report.	Sections 3, 4, and 5
Non-voting Team Member	An individual nominated by the program, in addition to the team assigned by the NAAB, whose role is to add useful perspective to the accreditation process.	Section 5
Visiting Team Report	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 reports the degree to which the program is functioning in the manner described in the *APR*.	Section 2, 4, and 5
Plan for Achieving Initial Accreditation	An analysis of the current status of the program that identifies long-term objectives for establishing and implementing a new NAAB-accredited degree program.	Section 4

Professional Degrees and Curriculum Change	These are changes to the program that require review by the NAAB. Generally, these are major curricular changes that may or may not require a change of title.	Section 6
Nomenclature Change	These are changes to the program that require review by the NAAB. Generally, they are limited to modest curricular changes needed to ensure the newly-titled program meets the NAAB's minimum credit-hour requirements for each degree.	Section 6
Annual Statistical Report	This report captures statistical information on the institution in which an architecture program is located and on the accredited 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 this report 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 (July 1-June 30).	Section 9 (see also, 2014 Conditions for Accreditation, Part III)
Interim Progress Report, Year Two	This is a narrative report, accompanied by evidence, submitted two years after a program receives either a four-year or an eight-year term of continuing accreditation. The report must address all deficiencies cited in the previous VTR, as well as other items.	Section 10
Interim Progress Report, Year Five	This is a narrative report, accompanied by evidence, submitted five years after a program receives an eight-year term of continuing accreditation. The report may address deficiencies cited in the previous VTR, and must identify significant changes to the program since the previous IPR was filed.	Section 10
Confidentiality	The duty of all visiting team members, team chairs, nonvoting team members, NAAB directors, and staff to hold all information designated as confidential	Sections 3, 4, 5, 6, 12, and 13

	and related to the accreditation of a professional degree program in architecture in confidence in perpetuity.	
Reconsideration	A request by a program for reconsideration of a Board action regarding a term of accreditation or of a Board decision to deny or revoke accreditation.	Section 12
Appeal	An appeal by a program regarding denial of a reconsideration decision only in the instance of a revocation decision.	Section 13
Complaint	A request by an individual to consider specific matters within an accredited program and the potential effect of a failure to address the matter on the program's compliance with the NAAB Conditions for Accreditation.	Section 11

2. Report Formats

a. Reports Prepared by Programs

i. Plan for Achieving Initial Accreditation

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 accredited degree program.
2. It is an analysis of the extent to which the proposed accredited 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. Plan for securing resources not already available to the proposed program (e.g., faculty, space, financial support).
    b. Securing institutional approvals for the proposed degree program (if required).
    c. Plan for recruiting and retaining students; including scholarship program, as appropriate

d. Plan for recruiting full-time and adjunct faculty to teach within and support the program

e. Proposed date for enrolling the first cohort or class;

f. Projected date for awarding degrees to the first cohort or class to complete the proposed program.

g. Plan for developing and implementing new courses and/or curricular sequences, including faculty assignments and essential physical resources

h. Plan for external support, funding, alumni engagement, professional community engagement.

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

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

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

    a. Cover Page – this page should include the following information:

        i. Name of Institution

        ii. Degree program proposed (i.e., B. Arch., M. Arch., or D. Arch.), with prerequisites as appropriate (e.g., M. Arch., (preprofessional degree plus 42 graduate credits)).

        iii. Name, address, email, and telephone contact information for the following individuals:

            1. Program administrator

            2. Head of academic unit in which the program will be located

            3. Chief academic officer

            4. President of the institution

    b. Part One – Analysis of the extent to which the proposed program already complies with the following Conditions for Accreditation, and a timeline for when these conditions will be met. (NOTE: programs seeking eligibility are not expected to comply with Part III):

        i. Part I: Sections 1-2

        ii. Part II: Sections 1-4

    c. Part Two – Timeline for Achieving Initial Accreditation

d. Part Three – Supplemental Information

i. 3.1 Course Descriptions (See *2014 Conditions* Guidelines for Preparing APRs)

ii. 3.2 Faculty Resumes (See *2014 Conditions* Guidelines for Preparing APRs.)

ii. **Architecture Program Report** Guidelines for preparing an Architecture Program Report (APR) are published separately from the *Procedures for Accreditation*. Please consult that document for current information regarding preparation of APRs.

1. Adjustments to an APR for Initial Candidacy.

a. The purpose of the APR-IC is to introduce a team, composed of individuals who may have no previous knowledge of the program, to the institution and the proposed program. An APR for initial candidacy should clearly document the program's progress on the Plan for Achieving Initial Accreditation.

b. The program is required to append the Plan, and the eligibility memorandum to the APR for initial candidacy (See Section 4).

2. Adjustments to an APR for Continuation of Candidacy

a. An APR for Continuation of Candidacy is similar to that for initial candidacy.

b. The program is required to append the previous VTR, the eligibility memorandum, and the Plan to the APR.

3. Adjustments to an APR for Initial Accreditation.

a. An APR for Initial Accreditation must introduce a team, composed of individuals with no previous knowledge of the program, to the institution and the proposed program.

b. Further, the APR must document the full realization of the Plan for Achieving Initial Accreditation, including steps that may be taken after initial accreditation is achieved.

c. All previous team reports, the eligibility memorandum, and the Plan must be appended to the APR.

iii. **Branch Campus Questionnaire.** Any program using one or more of the options for offsite learning described in Section 8.4, must submit a Branch Campus Questionnaire as part of any APR. In addition to the questionnaire the program must provide a supplemental narrative description of its branch campuses, additional sites, teaching sites and online learning. The narrative must address the following matters:

1. Curriculum

2. Geographic location
3. Administrative structure
4. Budgetary and hiring authority and responsibilities
5. Faculty access to committee assignments, research and scholarship opportunities, and participation in professional societies
6. Student access to services and equipment, and participation in governance.
7. Physical resources

The responses to the questionnaire and narrative taken together will be used by the team chair and the staff to determine what additional requirements may be added to a visit.

b. Reports Prepared by Visiting Teams

i. **Visiting Team Report.** 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 generic template for *VTRs* can be found in Appendix 2.

1. A VTR template is prepared for each visit. This template is unique to the program being visited and will include the appropriate sections from the previous VTR.
2. 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 describes the degree to which the program is functioning in the manner described in the *APR.* Therefore, the *VTR* must be concise and consistent, it must represent the team's consensus on all items, and include documentation of the following:
    a. The team's general observations regarding the program's unique qualities and context.
    b. The program's deficiencies with respect to the *Conditions*, including the Student Performance Criteria.
    c. Concerns about the program's future performance and/or capacity to meet its long-term strategic objectives based on deficiencies or noncompliance relative to the *Conditions*.
3. **Format**. The *VTR*, generally speaking, includes the following:

a. Section I – Summary of Team Findings

i. **Team Acknowledgments and Observations.** This is a narrative in which the team makes general comments on the program's unique qualities and context, the *APR*, and observations and assessments of the areas listed in 3.4.b. i-iv (above).

ii. **Conditions Not Met**. This is a list of the conditions and student performance criteria that the team determines are not met. The list includes only the number and title of those items not met.

iii. **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.

b. Section II – Compliance with the 2014 Conditions for Accreditation

c. Section III – Appendices

i. **Appendix A**. Conditions Met with Distinction

ii. **Appendix B**. Team SPC Matrix (see report template for more information)

iii. **Appendix C**. The team roster.

d. Section IV – Report Signatures. This page includes the signatures of all team members, including the non-voting member.

ii. **Adjustments to a VTR for Initial Candidacy**. In addition to the above, VTRs for initial and continuation of candidacy must include

1. Commentary by the team on the program's progress against its Plan for Achieving Initial Accreditation.
2. VTRs for initial or continuation of candidacy may also identify SPC as met, not met, or not-yet met.

a. For SPCs in courses that have been offered and for which student work is in the team room for evaluation by the visiting team, the team may determine that the SPC is met or not met.

b. For SPCs in courses that have not yet been offered and for which only syllabi and descriptions are available for evaluation by the team, the team may determine that the SPC is not-yet met.

iii. Adjustments to a VTR for Initial Accreditation. In addition to the above, the team is asked to include comments that may be helpful in preparing for future accreditation visits (if any).

iv. **Confidential Recommendation** This is a separate document. The content is considered confidential in perpetuity and advisory to the Board. It is nonbinding. In it, the team transmits a recommendation on a term of accreditation to the NAAB directors. This recommendation is signed by all members of the team, except the nonvoting team member. The recommendation form is a template that includes the choices available to the team. The team is to complete the form with the name of the institution, the name of the degree(s) and any prerequisites in the same manner as they appear on the cover of the VTR. The team will then select the term of accreditation they wish to recommend and sign the form. This document is to be transmitted not later than 30 calendar days after the visit ends.

Under all circumstances, this document is considered confidential in perpetuity, is advisory only, and is non-binding on the Board.

1. In the case of recommendations for initial candidacy, the team will also include a recommendation as to the length of time until the next visit either for continuing candidacy or initial accreditation. This document is considered confidential in perpetuity and is non-binding on the Board. This document is to be transmitted not later than 30 calendar days after the visit ends.
2. In the case of a recommendation for initial accreditation, the team has only two choices: a three-year term of initial accreditation or to deny initial accreditation and restore the balance of a program's candidacy.

3. Responsibilities

a. Responsibilities of the NAAB office. The NAAB staff is responsible for:

i. Ensuring that the visiting team chair, team members, and non-voting members are informed of their responsibilities.

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

iii. Approving all airline reservations made through the NAAB's travel system.

iv. 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.

v. Billing programs for the expenses of the visiting team. These invoices will be sent not later than July 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:

1. Copies of invoices or itineraries for airfare or other transportation.
2. Copies of receipts for ground transportation, including rental cars.
3. Copies of receipts for all meals and other expenses (except mileage).

b. Responsibilities of the team members. Team members are responsible for:

i. Contacting the NAAB office to confirm their participation in the site visit not less than four weeks before the visit.

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

iii. Reviewing Section 8, Conflict of Interest, and verifying to the NAAB office and the team chair that no conflict of interest exists or disclosing potential conflicts so they can be managed appropriately.

iv. Making air travel arrangements in advance to secure economical fares.

v. Reviewing the *Conditions* and the *Procedures*, the program's *APR*, the template for the *VTR*, and the visiting team members' resumes in advance of the visit.

vi. Participating in two pre-visit conference calls and review of documentary material as described in Section 5.

vii. Actively participating or observing, as assigned, in all aspects of the visit and carrying out all tasks assigned by the visiting team chair with integrity and timeliness, including review of material in the team room.

viii. Participating in writing the draft of the *VTR.*

ix. Completing an initial draft of the VTR prior to the beginning of the exit interviews.

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

xi. 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.

xii. Completing and submitting a reimbursement request in a timely manner.

1. A copy of the reimbursement form can be found on the NAAB website site in the Documents section in the Team Room folder.
2. Requests for reimbursement must be submitted within 30 days of the end of the visit. Requests for reimbursement must include:
    a. Invoice/itinerary for transportation (air or rail).
    b. Receipts for ground transportation, including rental cars.
    c. Receipts for all meals and incidental expenses (except mileage).
3. Any reimbursement item that does not have an accompanying receipt will not be honored and the total amount of the reimbursement will be adjusted accordingly.
4. Requests for reimbursement submitted more than 30 days after the end of the visit must be reviewed by the NAAB executive committee before being processed.
5. In the event an individual has already completed his/her travel reservations and must withdraw from the team, he/she will be invoiced for the expense of the travel.
6. In the event an individual has already completed his/her travel reservations and must reschedule his/her air transportation in order to ensure attendance for the entire visit, he/she will be invoiced for any change fees assessed by the airline.
7. The NAAB will not reimburse team members for alcoholic beverages, personal items, or entertainment.

xiii. Completing the required NAAB team training program prior to being assigned to a visiting team.

xiv. Completing the required NAAB assessment and evaluation survey within 10 days of completing the visit.

c. Responsibilities of Team Chairs

i. The visiting team chair is responsible for the following:

1. Setting 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. Hosting mandatory pre-visit conference calls with the team prior to the visit (see description of these calls under continuing accreditation, Section 5).

6. Preparing the final draft of the *Visiting Team Report* (see above) and sending it to the NAAB offices within 30 days of the last day of the visit.
7. Securing the signatures of all team members on the report.
8. Securing the signatures on the confidential recommendation.
9. Ensuring the team's compliance with the *Procedures for Accreditation* and appropriate standards of conduct during the visit.
10. Attending team chair training.
11. Completing the required NAAB assessment and evaluation survey(s) within 10 days of submitting the VTR.

d. Responsibilities of the school/program. The program is responsible for:

i. Making all hotel and lodging arrangements for the team. This includes ensuring that reasonable accommodation has been made for persons with disabilities. Lodging is to be secured 30 days prior to the beginning of the visit. The information is to be sent to the team chair.

ii. Notifying the NAAB office not less than 30 days prior to the visit of any 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.

iii. 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.

iv. Providing team members with copies of the *APR* in digital format not less than 60 days prior to the first day of the visit.

v. Providing the team room with original work for accreditation purposes.

vi. Ensuring completion of the required NAAB assessment and evaluation survey(s) by the program administrator within 10 days of the end of a visit.

4. Fees, Expenses and Fines.

a. 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, and program changes. Programs will receive invoices, addressed to the program administrator, on or about July 1 following a spring visit and February 1 following a fall visit. Generally, these are sent by USPS and include all required or requested documentation. Programs have 30 days in which to process and pay the invoice.

Accreditation decisions will be not released to the program until all invoices are paid.

b. 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 fine will be included on the invoice for the expenses of the visiting team.

c. Fines for Late Annual Reports. *Annual Statistical Reports* are due each year on November 30. In the event a program fails to complete the annual statistical report on time, including not more than one extension, the program will be assessed a fine of $100.00 per calendar day until the missing report(s) is submitted.

This fine is assessed as a unique invoice sent to the program administrator. Programs have 30 days to process and pay the invoice. Failure to pay the invoice will result in lack of access to the ARS and removal of the program from the NAAB's website listing of accredited programs.

d. Fine for Late Interim Progress Reports. *Interim Progress Reports a*re due on November 30 two years after either a four-year or eight-year term of accreditation is approved. In the event a program fails to submit the *Interim Progress Reports* on time, including not more than one extension, the program will be assessed a fine of $100.00 per calendar day until the missing report is submitted.

This fine is assessed as a unique invoice sent to the program administrator. Programs have 30 days to process and pay the invoice. Failure to pay the invoice will result in suspension of the review process for that program's IPR, lack of access to the ARS, and removal of the program from the NAAB's website listing of accredited programs.

5. Team Member Pool. Individuals may be added to the NAAB team member pool through two processes.

a. Organizational nomination. Individuals may be nominated to the NAAB team member pool by one of the following organizations: ACSA, AIA, NCARB, or AIAS These organizations set the timeline and process by which individuals are selected and nominated for the team member pool. Generally, all organizational nominations must be submitted to the NAAB by April 15.

i. All organizational nominations are to be accompanied by a team member nomination form and resume or vita. (See Appendix 1).

ii. Organizational nominees remain in the pool for a period of four years beginning January 1 of the year after their names were submitted to the NAAB. During this time, they may be called upon for any visit.

iii. All organizational nominees must complete team member training.

b. Self-nominations. Individuals may self-nominate into the NAAB team member pool annually between January 1 and March 31.

i. All self-nominations must include a letter of intent, a nomination form (see Appendix 1), and a resume or vita. The letter must describe how the

candidate's professional and academic experiences have prepared him/her to participate in NAAB activities.

ii. All self-nominations must also have letters of endorsement from at least two of the following:

    1. AIA Component president, national officer, or national director
    2. NCARB member board chair, national officer, or national director.
    3. ACSA national officer or director.
    4. Dean or program administrator at an institution with a NAAB-accredited program
    5. AIAS Chapter president, national officer, or national director.

iii. All self-nominated team members remain in the pool for a period of four years beginning January 1 of the year after they submitted their names to the NAAB. During this time they may be called upon for any visit.

iv. All self-nominated team members must complete team member training.

SECTION 3. TERMS OF ACCREDITATION

Types/terms of accreditation

Although there are minor distinctions among the procedures that apply to initial candidacy, initial accreditation, continuing accreditation, or reinstated accreditation, the sequence is similar for all institutions seeking NAAB action.

Actions on stages and 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 eight votes in favor to pass.

Unless specifically noted in the Board's decision, all terms of accreditation are effective on January 1 of the year in which the visit took place. Conversely, all terms of accreditation expire on January 1 of the year in which a visit is scheduled to take place unless and until the NAAB approves a motion for a term of accreditation.

1. **STAGE I: Candidacy**. 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 reviewing the appropriate sections of this document before proceeding with the development of a candidacy application.

    a. Programs seeking candidacy may be granted a period of candidacy of not less than two years. The program must achieve initial accreditation under Section 2.2 within six years of the effective date of the term of initial candidacy.

    b. The eligibility requirements for initial candidacy are defined in Section 4 of this document.

    c. The maximum period of initial candidacy is six years. Should a program fail to achieve initial accreditation within the maximum period, it must submit a new candidacy application (See Section 4).

2. **STAGE II: Initial accreditation**. All visits for initial accreditation will take place in the fall semester following the graduation of the first cohort of students to complete the full curriculum. The term of initial accreditation will be granted as follows:

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

    b. The eligibility requirements for initial accreditation are defined in Section 4 of this document.

    c. The term of initial accreditation is three years from the year of the visit.

    Schools should work with the NAAB to establish a calendar for candidacy and initial accreditation.

    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.

    Initial accreditation is probationary in nature and indicates that although deficiencies may be present, the institution has established plans and is making sufficient progress to

address or remove the deficiencies by the time of the first visit for continuing accreditation under Section 2.3.

In the event the program fails to achieve initial accreditation, the balance of its candidacy period may be restored. If the remaining period of candidacy is less than two years, the program will be required to submit a new application for initial candidacy, although some steps in the process may be waived.

3. **STAGE III: First Term of Continuing Accreditation Following a Term of Initial Accreditation**.

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

    b. Programs that have achieved a term of initial accreditation may only receive an eight-year term of accreditation under Section 2.4.a as a result of the Board's decision following the first visit for continuing accreditation or accreditation will be revoked.

    c. Failure to receive an eight-year term of accreditation under Section 2.4.a indicates that the program failed to meet the plans established for its initial accreditation, or failed to make sufficient progress to address or remove deficiencies identified during the visit for initial accreditation, or has new deficiencies, such that continuing accreditation is not warranted. Programs that are seeking their first term of continuing accreditation, but fail to receive an-eight-year term, and therefore have the program's accreditation revoked, and which wish to continue to seek accreditation may reapply for initial candidacy under Section 2.1.

4. **STAGE IV: Subsequent Terms of Continuing Accreditation**. Programs that have completed the first term of continuing accreditation and are seeking a subsequent term of continuing accreditation may receive one of the following terms of accreditation, or accreditation may be revoked.

    a. **Eight -Year Term**. This term indicates that deficiencies, if any, are minor, and the intent to correct them is ensured. The program is accredited for an eight-year period.

    b. **Four-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

        Social Equity

        Long-Range Planning

        Assessment

        Human Resources and Human Resource Development

        Physical Resources

        Financial Resources

Information Resources

Student Performance Criteria

Additionally, a program may receive a reduced term if any single SPC has been identified as Not Met for a second, consecutive accreditation visit.

In the event a team finds an SPC Not Met for a second, consecutive visit, the VTR must include a record of the team's efforts to be thorough in its assessment. Further, the program is required to provide a response to the team's assessment when it submits corrections of fact for the VTR (see p. 57-58)

i. Multiple deficiencies in these areas sufficiently affect the quality of the program and a full accreditation review is required after less than eight years. At the next scheduled review following a first four-year term, the program may receive an eight-year term, a second four-year term, or a two-year probationary term.

ii. At the next scheduled review following a second, consecutive four-year term, the program may receive either an eight-year term or a two-year probationary term. No more than two, consecutive four-year terms can be awarded to a program.

d. **Two-Year Probationary Term**. This term indicates that the deficiencies are severe enough to have eroded 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 four-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. At the next scheduled review following a two-year probationary term, the program must receive at least a four-year term of accreditation. Consecutive, two-year probationary terms cannot be awarded to a program

v. If a four-year term follows a two-year probationary term, the program must receive an eight-year term at the next scheduled review or accreditation will be revoked.

e. **Revocation of Accreditation**. Indicates that insufficient progress was made during a two-year probationary term to warrant a four-year term.

Accreditation may also be revoked if the team observes substantial and uncorrectable noncompliance with the NAAB conditions for accreditation during any site visit.

Accreditation may be revoked if no Architecture Program Report is submitted for a visit for continuing accreditation already on the schedule.

Finally, any program that phases out a program without first filing a plan for phasing out the NAAB-accredited degree will be considered to have forfeited accreditation of the professional degree in architecture and accreditation will be revoked. The effective date of revocation will be December 31 of the year in which the institution began the phase-out of the program. (See Section 6 for more information).

SECTION 4. PROCEDURES FOR CANDIDACY AND INITIAL ACCREDITATION

Initial candidacy and initial accreditation for a new professional degree program in architecture requires the completion of five important steps that are reviewed by the NAAB staff and the NAAB directors.

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:

1. Application to establish candidacy status
2. Determination of eligibility
3. Initial candidacy visit
4. Subsequent evaluations toward accreditation
5. Initial Accreditation

Schools should work with the NAAB to establish a calendar for candidacy and initial accreditation.

Consultation & Support

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.

The period of candidacy to initial accreditation may vary, but is no longer than six years. Should a program fail to achieve initial accreditation within the maximum period, it must submit a new candidacy application.

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. A complete application must include the following:
    a. A letter from the institution's chief academic officer announcing the intention to seek candidacy for accreditation for a professional degree program in architecture. The letter should include the specific degree name (i.e., B. Arch., M. Arch., or D. Arch.) along with any prerequisites 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 2014 *NAAB Conditions for Accreditation*, Part II: Section 2.1, Regional Accreditation).
    c. The *Plan for Achieving Initial Accreditation* (see Section 2).
    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 Director, Accreditation, NAAB.

By e-mail: info@naab.org with a copy to forum@naab.org. Please include "Application for Candidacy" and the name of the institution 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 used 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. **Review of the Application**. The executive director or director, accreditation will review the application to determine whether it is complete. Once the application is complete a review panel will be named.

   b. **Membership of the Review Panel**. A review panel consists of the NAAB executive director or the director, accreditation and two members of the Board of Directors with at least one being an educator.

   c. **Responsibilities of the Review Panel**. The panel will review the application and conduct an eligibility visit if necessary and determine whether to recommend that the board accept the program as eligible.

      i. For programs seeking candidacy for a professional degree program in architecture that **do not** currently have a NAAB-accredited degree program:

         1. The application will reviewed by the panel and an eligibility visit will be scheduled. (See paragraph d).

         2. After completion of the eligibility visit a memorandum will be prepared. (See paragraph e.)

      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. The application will be reviewed by the panel and additional information may be requested.

            Once the panel has completed its review of the documentation provided by the institution, a report will be prepared (see paragraph e).

   d. **Eligibility Visit**

      i. **Purpose.** There are three purposes of the eligibility visit.

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

2. To confirm the institutional commitment to the implementation of the *Plan for Achieving Initial Accreditation*.
3. To review the *Conditions* and *Procedures* with the proposed program's administrators, faculty, staff, and students.

ii. **Format**

1. Eligibility visits are to last not more than two days.
2. The visit will be undertaken by any one of the individuals assigned to the review panel.
3. The visit will be scheduled on two consecutive weekdays.
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 division administrators (e.g., department chair and dean) and chief academic officer.
    e. Meetings with the institution's chief academic officer, chief financial officer, and chief advancement officer.
    f. Opportunities to observe classes and studios (if courses are being offered that will be included in the proposed degree program).
    g. A tour of the physical resources that are or will be designated for the program (studios, classrooms, seminar rooms, shops, and labs).
    h. A tour of the library or other information resource center(s) that support the program.
    i. Optional: a meeting with *alumni* of the institution and local architects. This meeting is only recommended for institutions seeking to develop an existing preprofessional program into an accredited professional degree program.

e. **Report from the Review Panel.** Following either the documentary review and, if necessary, the eligibility visit, the panel must submit a memorandum to the Board of Directors that documents observations and conclusions. The report must include the following:

i. A review of the resources committed to the program.

ii. Commitment of the institution to the implementation of the *Plan for Achieving Initial Accreditation*.

iii. Assessment of the readiness of the program to complete a visit for initial candidacy.

iv. In the case where an institution already offers a NAAB-accredited program, this memorandum may cross-reference the findings of the visiting team in the most recent VTR.

v. 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.

f. **Board Action on Eligibility for Initial Candidacy**

i. The panel's recommendation is presented to the Board at its next regularly scheduled meeting.

ii. If the Board approves a motion 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 *Architecture Program Report for Initial Candidacy (APR-IC)* and prepare for an initial candidacy visit as outlined below.

iii. If the Board does not accept the program as eligible for initial candidacy, the program leadership will be advised. The program may submit a new application. There is a one-year waiting period before submitting a new application

g. **Plan for Achieving Initial Accreditation** See Section 2.2 on the format for the Plan.

3. **Initial Candidacy.** Once a program has been accepted as eligible for initial candidacy, a site visit for initial candidacy will be scheduled. With certain exceptions, visits for initial candidacy are similar to those for continuing accreditation. The first step is the preparation of an *Architecture Program Report* for *Initial Candidacy (APR-IC)* and preparation for a visiting team.

a. ***Architecture Program Report* Submitted for Initial Candidacy Visits**

i. **Purpose.** The *Architecture Program Report for Initial Candidacy* (*APR-IC*) is similar to an APR for continuing accreditation. See Section 2.2, Report Formats.

ii. **Submission.** *APRs for Initial Candidacy* are to 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 Plan for Achieving Initial Accreditation or the eligibility memorandum.

2. Electronic versions of the *APR-IC* are to be prepared either in Microsoft Word or Adobe PDF and are limited to 7 MBs.

3. *APR-IC*s are submitted through the NAAB's integrated information management system.

iii. **Re*vie*w and *acc*eptance**

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 staff 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.
3. *APR-IC*s are due in the NAAB offices 180 days before the visit is scheduled to take place.
    a. 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.
    b. 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.
    c. New *APR-IC*s (if they are requested) are due not less than 45 days prior to the dates for visit.

iv. **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 for initial or continuing candidacy**

1. Teams for initial and continuation of candidacy visits are composed of three individuals: an educator, a practitioner, and an individual selected from a pool of former NAAB directors and NAAB staff directors. Either the educator or the practitioner 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 8. To the extent possible, 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.** Visiting team chairs for candidacy visits are selected in the same manner as those for continuing accreditation visits. See Section 5.

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 8). Once the chair has been confirmed, the administrator and the chair work together to select a date for the visit.

iii. **Non-voting member.** 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. See Section 8 for additional information.

v. **Challenges to Team Members**. Programs may challenge no more than one member of a proposed visiting team for initial or continuation of candidacy, under the terms of Section 8, Conflicts of Interest. Such

challenges are to be made in writing within 5 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 the director, accreditation. 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**

   i. The dates for a visit for initial candidacy are set by the team chair and the program administrator in consultation.

   ii. Generally, spring visits take place between the last week of January and the first week of April each year; fall visits take place between the second week of September and the last week of October.

   iii. Once a date has been set and a team proposed, the date cannot be changed.

   iv. Duration of the visit:

      1. Visits for initial candidacy begin on Saturday evening and end the following Tuesday at noon.

      2. 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 Tuesday at noon. The final decision on the length of the visit is made by the team chair in consultation with the program administrator and the NAAB staff.

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

      4. 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 7 for additional information on visits with special circumstances.

d. **Schedule/Agenda for Each Visit for Initial Candidacy.** The visit agenda for initial candidacy is similar to that for continuing accreditation (see Section 5. Differences are noted below: Each visit must include, at a minimum, the following:

   i. **Prior to the Visit:** (See Section 5). Continuing Accreditation.

   ii. **Onsite**

      1. **Tours**. Same as for continuing accreditation (see p. 51)

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

a. **Staff**. Same as for continuing accreditation, see p. 52.

b. **Program Head**. Same as for continuing accreditation, see p. 52.

c. **Entrance Meetings with the School or College Administrator, Chief Academic Officer, Faculty, and Students**. Same as for continuing accreditation, see p. 52. except as noted below.

NOTE: It is very likely that at the time of a visit for initial candidacy, no students will have enrolled in the program. A meeting with students or student leaders is only required during visits for continuation of candidacy or when an institution is augmenting an existing degree program in order to achieve accreditation. When a visit for initial or continuing candidacy includes a meeting with students, these are to be conducted without the presence of any administrators, staff, or faculty, and should be arranged so that all students can attend.

d. **Optional: Contact with Graduates and Local Practitioners**. This meeting is optional. It is only recommended when an institution is proposing to expand an existing preprofessional program into an accredited degree program or during visits for continuation of candidacy. Attendees may include recent and past graduates, local registration board members, and representatives of the AIA chapter.

3. **Review of Student Work**. Visits for initial candidacy are unlikely to include student work, unless the institution is proposing to expand or augment an existing program. In the case where student work is available, team members are individually and jointly responsible for assessing work in the team room and elsewhere.

4. **Observation of Studios, Lectures, and Seminars**. This is only required when courses currently being offered are or will be part of the proposed professional degree program,

5. **Review of Student Records and Transfer Credit Assessment**. This review is the same as for continuing accreditation, see p. 53.

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

7. **Deliberation and Drafting the *VTR***. This is the same as for continuing accreditation, see p. 53.

8. **Exit interviews**. The form and content of exit interviews is the same as for continuing accreditation. See p. 53. The team is

required to leave the institution as soon as the last interview is completed.

e. Team Room. Before the site visit, the program head and visiting team chair discuss the content and organization of the team room.

i. **Purpose**. The purpose of the team room is the same as for visits for continuing accreditation. Please see Section 5 for additional information.

ii. **Contents**. 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 assessment 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 subsequent visits for continuation of candidacy). In all cases, student work should be presented in the form in which it was evaluated by the instructor. Where student work was turned in using electronic format, the program must provide the applications used to create the work in order for the team to review it. 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:

1. **Student Studio Work**. The majority of the visual material should be presented in a format that is easily sorted and reviewed. The 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.

   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 passing assessment to high achievement. Ideally, examples by several different students or teams should be furnished

2. **Course Notebooks**. A notebook must be provided for each required and elective course (i.e., optional studies, See 2014 Conditions), including studio courses. The notebooks for required courses 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. The notebooks for optional studies must include syllabi and other materials the program deems important.

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

These may be presented either in digital or hard copy format. If the notebooks are in digital format, they should be presented either as PDFs on a shared drive or digital platform (e.g., Google Docs or Dropbox), or as an interactive site. The program must provide usernames and passwords to the team, if needed to access the files.

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 *2014 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 secure; 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 the following: a document shredder, viewing/projection equipment as requested by the visiting team chair, Internet access, printer, 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 near the team room for public review.
8. **Faculty Photos**. Faculty photos should be made available to the team either in hard copy or electronically.
9. **Matrices.**
    a. A large copy of the faculty credentials matrix for the current semester as described *The 2014 Conditions for Accreditation Guidelines* should be posted in the team room.
    b. A large copy of the SPC matrix, described in Part II: Section 1. Student Performance Criteria, *Conditions for Accreditation*, should be posted in the team room.
10. **Additional Information**. See Section 5, p. 55.
11. **Optional Faculty Exhibit** (See Section 5, p. 56 of this document, for additional information).

f. ***Candidacy-Visiting Team Report* (*C-VTR*)**

i. **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. The team chair is responsible for completing the draft and collecting additional input or suggested text from the other members of the team.

ii. **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 is sent to the program administrator.

iii. **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. The team chair has 10 calendar days to accept or reject the corrections of fact and resubmit a final *C-VTR*.

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

v. **Dates and deadlines**

1. Every effort is made to make VTRs available for review by the NAAB directors 60 days after a visit ends.

    a. Within 30 days of the last day of the visit: team chair sends draft *C-VTR* and confidential recommendation to NAAB staff.

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

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

    d. Within 10 calendar days of receiving the corrections of fact, the staff and team chair accept or reject corrections and complete the final *C-VTR.*

    e. NAAB staff transmit the final *C-VTR* to the program administrator for an optional response.

    f. 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.

2. At least 21 calendar days before the next meeting of the NAAB Board of Directors, NAAB staff prepare the final report dossier for the directors' review. This package contains the following documents in this order:
    a. An executive summary.
    b. Final *C-VTR*.
    c. Confidential recommendation.
    d. Optional program response.
    e. The Plan for Achieving Initial Accreditation
    f. Eligibility Memorandum

g. **Decision of the Board of Directors**. At its next regularly scheduled meeting, the final report dossier is presented to the Board of Directors for a decision.

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 overnight delivery. 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 must maintain strict confidentiality with respect to materials reviewed, interviews conducted, and team deliberations, including the team's recommendation on a term of initial or continuing 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 all attachments, the current editions of the *Conditions* and the *Procedures* and any addenda. These documents must be hosted on the program's website 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 *2014 Conditions for Accreditation,* Part II: Section 4. Public Information).

iv. The NAAB publishes all *VTRs* at www.naab.org after accreditation decisions are made. These are published with the program's response and without the confidential recommendation of the team.

v. The accreditation decisions for a given year are published in the NAAB's annual report. In addition they are made available to the collateral organizations and the public, and to other organizations 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 submission of Annual Statistical Reports (Section 10) 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.

5. **Procedures for Initial Accreditation**

Once a program has achieved initial candidacy and completed a minimum number of years in candidacy status (see below), 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:

1. Request for initial accreditation
2. Initial accreditation visit

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

Terms of Accreditation and Graduates from the Program.

Terms of initial accreditation may only be three years. See Section 3.2

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 *Guidelines for Certification* in the statement defining the education requirement for an NCARB Certificate.

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.

Programs are strongly urged to keep this in mind when developing timelines for achieving initial accreditation.

a. **Eligibility for Initial Accreditation.**

   i. Programs seeking initial accreditation for a professional degree program in architecture that **do not** currently offer a NAAB-accredited degree program must ***by the time of the visit*** for initial accreditation:

      1. Have completed four years in continuous candidacy.
      2. Have one cohort of students that has completed the entire curriculum of the professional degree program for which accreditation is sought. This class or cohort should expect to graduate in the spring with a subsequent fall visit for initial accreditation.

   ii. Programs that already have at least one NAAB-accredited professional degree program must have:

      1. No less than two years in continuous candidacy.
      2. A full term of accreditation[1] for the pre-existing accredited professional degree program in architecture.
      3. One graduating class that has completed the entire curriculum of the professional degree program for which accreditation is sought.

   iii. 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 (See Condition II.4 and Appendix 1 of *The 2014 NAAB Conditions for Accreditation*).

b. **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.

   i. To initiate the process for achieving initial accreditation, the program must formally request that the NAAB 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.

   ii. In making a request for initial accreditation, the program effectively forfeits any remaining time in the six-year candidacy. See Section 3.2 for more information.

   iii. The request must include the following:

      1. A letter from the chief academic officer of the institution requesting a visit for initial accreditation of the professional degree program in

[1] Programs seeking initial accreditation for a new program that already have an existing NAAB-accredited program must have a full-term of accreditation; this term may be eight or six years depending on the year of the most recent visit for the pre-existing program.

architecture. The letter should include the specific degree name (e.g., B. Arch., M. Arch., or D. Arch.) including prerequisites (e.g., M. Arch. (preprofessional degree plus 60 graduate credits)).

2. A copy of the most recent decision letter from the NAAB.
3. A copy of the most recent decision letter from the recognized, U.S. regional accrediting agency for the institution (see *NAAB 2014 Conditions for Accreditation* Part II, Section 2.1, Regional Accreditation).
4. A brief 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.
5. The request must be submitted in electronic format only.
    a. Requests are limited to 15 pages including all supplemental information.
    b. The request is to be sent either in Microsoft Word or Adobe PDF and is limited to 3 MBs.
6. Applications are to be addressed to the Director, Accreditation, NAAB by email: info@naab.org with a copy to forum@naab.org. Please include "Application for Initial Accreditation Site Visit" and the name of the institution in the subject line.

c. **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.

d. ***Architecture Program Report for Initial Accreditation***

i. **Purpose.** The *Architecture Program Report for Initial Accreditation* (*APR-IA*) is similar to an APR for continuing accreditation. See Section 2.2, Report Formats.

i. **Review and acceptance.** The process for review and acceptance is the same as for visits for continuing accreditation, see Section 5.

ii. **Dates/Deadlines**

1. *APR-IA*s are due in the NAAB offices by March 1 of the calendar year in which the initial accreditation visit is scheduled to take place.
2. New *APR-IA*s (if they are requested) are due not less than 45 days prior to the dates for visit.

iii. **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).

e. **Visiting Teams**

i. **Composition of Teams**

1. Teams for visits for initial accreditation are composed in the same way as teams for continuing accreditation. See Section 5, page 47.

ii. **Team Chair**

1. **Role.** See Section 2.3 for a description of the role of the team chair.

2. **Selection**. Visiting team chairs are selected in the same manner as those for visiting for continuing accreditation. See Section 5.

iii. **Non-voting members.** Nonvoting team members are permitted on teams visiting for initial accreditation. See Section 5, pp. 48-49 for additional information about nonvoting team members.

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 8 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 8, Conflicts of Interest. Such challenges are to be made in writing within five calendar 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 the director, accreditation. 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.

f. **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 first week of September and the last weekend in October each year.

3. Once a team has been assembled and proposed, the dates for a visit cannot be changed except under extreme circumstances.

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 7 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 5 for this information.

iii. **Team Room.** The purpose, contents, access, standards, and equipment for a team room for a visit for initial accreditation are the same as for a visit for continuing accreditation. See Section 5 for this information.

iv. **Optional Faculty Exhibits**. The program may provide evidence through a faculty exhibit[2] 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*. If a program provides such an exhibit, it should only include highlights of faculty scholarly and professional development and achievement over the past five years or since the application for candidacy was submitted.

g. ***Visiting Team Report (VTR*)**. See Section 2.2 for information about the Visiting Team Report.

i. **Format**. The format for the VTR is the same as that for continuing accreditation. (See Section 2.2)

ii. **Confidential Recommendation**. The confidential recommendation is the same as that for continuing accreditation. See Section 2.2. This document is signed by all members of the team, except the nonvoting member. (See Section 3.2 for the term of initial accreditation). This document is confidential in perpetuity and non-binding on the Board. It must be transmitted not more than 30 days after the visit ends.

iii. **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.

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

[2] 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.

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.

v. **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 may review the corrections of fact with the team chair. The staff have 10 calendar days to accept or reject the corrections of fact and resubmit a final *VTR*.

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

vii. **Dates and deadlines** The NAAB strives to complete the review and preparation of all VTRs within 60 days of the end of a visit.

1. 30 days after the visit ends: team chair sends draft *VTR* and confidential recommendation 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 dossier for Board review. This dossier contains these documents in the following order:
    a. An executive summary.
    b. The final *VTR*.
    c. Confidential recommendation.
    d. Program response, if one is submitted.
    e. All previous visiting team reports
    f. The Plan for Achieving Initial Accreditation

g. Eligibility Memorandum

h. **Decision of the Board of Directors**. At its next regularly scheduled meeting, the final report dossier is presented to the Board of Directors for a decision.

i. **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 overnight delivery. The institution has 14 calendar days from the receipt of a decision letter to request reconsideration. See Section 13.

j. **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.

k. 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.

l. **Public Disclosure of Accreditation Outcomes**

   i. 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 *Interim Reports* and the NAAB response to the *Interim Report*. These documents must be housed together and be freely accessible to all; this may be accomplished by publishing online.

   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 *VTR*.

   iii. 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 website.

   iv. The NAAB publishes 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 published in the NAAB's annual report. In addition they are made available to the collateral organizations and the public, and to other organizations upon request.

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

6. **First Term of Continuing Accreditation Following Initial Accreditation:** Programs that achieve a three-year term of initial accreditation must receive an eight-year term of accreditation as a result of the Board's decision following the first visit for continuing accreditation or accreditation may be revoked.

   The team for a first visit for continuing accreditation subsequent to a term of initial accreditation will be composed of experienced team members and, to the extent possible, may include a former NAAB director.

SECTION 5. 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 made by the NAAB 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 Statistical Reports* (See Section 9) and an *Interim Progress Report* (See Section 10).

1. **Architecture Program Report**

    b. **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.

    c. **Content**. The *APR* is, largely, a narrative document that is comprehensive and self-analytical. Guidelines and instructions for preparing APRs are published separately from this document. Programs are required to use the templates provided by the NAAB for preparing APRs and related supplemental information. See www.naab.org for more information.

    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 staff to do one of the following:

            1. Accept the *APR* and schedule the site 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.

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    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 staff to do one of the following:

            1. Accept the *APR* and schedule the site 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 November 15, 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 uploaded 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 spring 2016 the *APR* is due September 7, 2015).

   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.

2. **Visiting Teams**

a. **Composition of Teams**

For 2016 Visits Only	**Under Consideration Beginning in 2017**
For visits conducted in 2016, teams will be 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. In 2016, the NAAB will continue to evaluate the use of three-person teams on visits for continuing accreditation and whether the duration of visits can be reduced. A final decision on these two matters will be made by the NAAB based	Teams will be composed of three individuals: one educator, one practitioner, and one student.

on an evaluation of pilot visits conducted in 2015 and 2016. A final decision on this item can be expected in July 2016.	

i. {see above}

ii. One member of the team will be nominated by the NAAB Executive Committee to serve as the team chair.

iii. Teams are composed by the NAAB staff after the date for the visit has been set by the team chair and the program administrator.

iv. The NAAB seeks 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 8.

v. Every effort is made to assemble teams in such a way as to ensure that no more than one person, excluding the student, is on his or her first visit. This is not always possible.

vi. 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.

vii. 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.

viii. 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.

b. **Team Chair**

i. **Role**. The role of the team chair is described in Section 2.3.

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, as well as, evaluation of their performance on previous visits and the quality of previous VTRs. NAAB staff notify program administrators once a chair has been nominated. The administrator may challenge the nomination for potential conflicts of interest (See Section 8). Once the chair has been confirmed, the administrator and the chair work together to select a date for the visit.

a. **Nonvoting member**

iii. **Role**. To add useful perspective to the accreditation review process, the program is permitted to nominate one non-voting member to the visiting team.

iv. **Selection and Approval**

1. The program administrator may nominate one nonvoting member.
2. The nomination must be sent to the director, accreditation. The nomination must be accompanied by a resume or vitae and a brief description of the relationship between the individual and the program.
3. The nonvoting team member will be approved by the director, accreditation or the executive director in consultation with the visiting team chair.
4. Nonvoting team members cannot be proposed less than 21 days before the start of a visit.
5. A nonvoting member may be an educator, practitioner, a member of the architecture community, or an *alumnus/a* who is able to offer insight into the program's unique qualities or history.
6. The following may not participate as non-voting team members:
    a. Individuals who have graduated since the previous site visit are considered *per se* to have a real conflict of interest and may not participate on a visiting team in any capacity.
    b. Any individual who had or has a contractual or consulting relationship to the program at any time, whether paid or voluntary
    c. An individual who previously visited the program as a member of a NAAB visiting team.
7. In order to avoid real or perceived conflicts of interest, programs are prohibited from compensating a nonvoting team member other than reimbursing him/her for expenses directly related to participating in the visit.
8. Nonvoting team members may only be nominated after a program has approved the membership of the official visiting team.
9. No person may serve as a nonvoting team member for any visit more than once in any three-year period.
10. Any nonvoting team member must read the NAAB Conditions and Procedures, read the APR, and complete an online training program before the visit begins.
11. Nonvoting team members who fail to comply with the expectations or responsibilities of participating in a NAAB visit may be dismissed by the visiting team chair prior to the end of the visit. In

the event a nonvoting team member is dismissed from the team, the team chair shall notify the program administrator and the NAAB executive director.

12. Occasionally, for training purposes, the NAAB may ask the program and the team chair to accept a special, additional, nonvoting member. These individuals may be NAAB directors or NAAB staff members who have never experienced a visit.

    The NAAB may refer other pre-approved individuals requesting opportunities to serve as nonvoting team members directly to programs. These may include administrators from programs seeking candidacy or initial accreditation, foreign visitors, representatives of affiliated accrediting agencies, and volunteer leaders or staff from collateral organizations. Invitations to these individuals to serve on visiting teams must be made by the program administrator and approved by the team chair.

    Programs that agree to include a NAAB-requested or NAAB referred individual as a nonvoting team member may nominate an additional nonvoting team member.

v. **Participation**

1. The nonvoting member(s) must participate throughout the entire site visit. They are expected to assume the responsibilities expected from team members, participate in the activities of the team and undertake tasks assigned by the team chair.
2. Nonvoting members do not participate in the team's deliberations over the recommendation on the term of accreditation.
3. Nonvoting members may be present at the last team work session solely at the discretion of the visiting team chair.
4. All nonvoting members must agree in advance to abide by the principles of confidentiality as outlined in the NAAB Procedures and by the Conflict of Interest policies in Section 8.

c. **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 8 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 8, Conflicts of Interest. Such challenges are to be made in writing within five calendar 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 the director, accreditation. 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 in advance to by the team chair and the program administrator with advice from the NAAB staff. See Section 7 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 except under extreme circumstances. See Section 7 for additional information.

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

        i. **Prior to the Visit**

            1. **Team Conference Call #1**. Team members and non-voting members participate in a mandatory pre-visit conference call. During the call, the visiting team reviews the *APR, Conditions*, and *Procedures*, discusses visit protocols, and establishes expectations for how the team will work. Travel plans (arrivals/departures, hotel information, ground transportation) are also reviewed at this time. Team members discuss their initial reactions to the *APR*, raise any initial concerns, and identify and prioritize the questions to be addressed during the documentary review (see below) and later, during the visit. This call will take place 30 days prior to the start of the visit.

            2. **Team Conference Call #2**. Team members participate in a second, mandatory pre-visit conference call to review the results of the documentary review (see below), identify missing materials or documents, prepare questions to be addressed during the visit, and identify any other areas of inquiry. At this time, the visiting

team chair outlines team assignments and may revise details of the agenda. This call will take place 14 days before the visit.

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

4. **Documentary Review**. This is a review of reports, tables, and other documentary material prepared and presented in support of the program's compliance with the following *Conditions:*

    a. Administrative Structure

    b. Governance

    c. Social Equity

    d. Learning Culture

    e. Long-Range Planning

    f. Assessment

    g. Human Resources and Human Resources Development

    h. Financial Resources (to the extent possible)[3]

    i. Information Resources

    j. Professional Degrees and Curriculum

    k. Public Information

    l. Annual Statistical Reports

    m. Interim Progress Reports

    This material is to be presented either in PDFs or other online format and made available to the team not less than 30 days 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.

    b. Team Room. This tour should include an explanation of how the team room is organized

    c. Library/Information Resources. The library tour includes a meeting with the architecture librarian and visual

[3] The program administrator and the team chair will agree on matters of content and format for financial information. Team members are reminded that financial information may be considered sensitive and confidential by the program or the institution. This is especially true for private institutions.

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, librarians, 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 meetings are often held daily.

    c. **Meetings with the School or College Administrator, 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, 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. **Optional Meeting with Graduates and Local Practitioners**. This meeting is optional. Attendees may include graduates of the program, employers, local registration board members, and representatives of the local AIA chapter.

    f. **Review of Student Work**. Team members are individually and jointly responsible for assessing student work.

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

h. **Review of Student Records and Transfer Credit Assessment**. These are files to be reviewed as part of the team's assessment of Condition II.3. They should be presented in compliance with FERPA.

i. **Debriefing Sessions**. The team meets daily to evaluate its progress, adjust assignments, and assess the need for additional information.

j. **Team Deliberations and Drafting the *VTR***. The last two work sessions of the site visit are set aside for the team to deliberate on the outcomes of the visit, determine its recommendation, and draft the VTR. 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.

k. **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. The purpose of these interviews is to communicate the following:

    i. the conditions met with distinction,

    ii. the conditions not met,

    iii. 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 is as follows:

    i. Exit interview with the program administrator, one hour. Questions and answers of clarification are permitted; the team chair will lead any response.

    ii. 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.

    iii. 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.

iv. Exit interview with the students, faculty, and staff of the program, 30 minutes; questions and answers are not permitted.

The team is required 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, to the extent possible, located in the same building as the program. It is for the exclusive use of the team.

ii. **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.

iii. **Contents**. Before the site visit, the program head and visiting team chair discuss the content and organization of the team room. The room must contain fully labeled and easily accessible samples of student work. Exhibits must include examples of both the minimum passing assessment and high achievement; be of sufficient quantity to demonstrate that all graduates are meeting the performance criteria; have been executed since the previous site visit; and span no less than two previous academic years . In all cases, student work should be presented in the form in which it was evaluated by the instructor. If work was reviewed electronic format, the program is expected to provide the applications used to create the work in order for the team to review it. The team room must contain the following:

1. **Student Studio Work**. The graphic or visual material must be presented in a format that is easily sorted and reviewed. The studio work must represent the full range of approaches taken and assignments made by various faculty. In addition to final projects, in-progress work (e.g., drawings, models, related assignments, and student journals) may be included.

   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 passing assessment to high achievement. Ideally, examples by several different students or teams should be furnished.

2. **Course Notebooks**. A notebook must be provided for each required and elective course (i.e., optional studies, see 2014 Conditions), including studio courses. The notebooks for required courses must contain syllabi, project statements or assignments, handouts, bibliographies, weekly activities, 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. The notebooks for optional studies courses should contain syllabi and any other material the program deems important.

   These may be presented in digital format or hard copy format. If the notebooks are in digital format they should be presented either as PDFs on a shared drive or digital platform (e.g., Google Docs or Dropbox), or as an interactive site. The program must provide usernames and passwords to the team, if needed, to access the files.

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 *2014 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 secure; 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 chair's invitation.

6. **Equipment**. The room must contain the following: a document shredder, viewing/projection equipment as requested by the visiting team chair, Internet access, printer, 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 near the team room for public review.

8. **Faculty Photos**. Faculty photos should be made available to the team either in hard copy or electronically.

9. **Matrices.**

   a. A large copy of the faculty credentials matrix for the current semester as described in Part I: Section 2 should be posted in the team room.

   b. A large copy of the SPC matrix, described in Part II: Section 1. Student Performance Criteria, *2014 Conditions for Accreditation*, should be posted in the team room.

10. **Additional Instructions**.

    a. Dual Programs and Additional Teaching Sites. 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.

    b. Assignments. 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.

    c. Displays Outside the Team Room. 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 passing assessment to high achievement should be omitted in public displays.

d. **Optional Faculty Exhibit**. The program may provide evidence through a faculty exhibit[4] 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 *2014 Conditions for Accreditation*. If included in the program's preparation for the visit, this exhibit should include highlights of faculty professional scholarship and professional development and achievement since the last accreditation visit.

4. **Visiting Team Report (VTR)**

    a. See Section 2.2 for the content and format of the VTR.

    b. **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.

    c. **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.

[4] 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.

d. **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 will review the corrections of fact with the team chair. The team chair has 10 calendar days to accept or reject the corrections of fact and resubmit a final *VTR*.

   In the event a team has assessed an SPC as Not Met for a second, consecutive visit, the program is required to provide a response to the team's assessment when it submits its corrections of fact.

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

5. **Confidential Recommendation**. In a separate document, the team transmits a 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 3 for terms that may be recommended). The content of this document remains confidential in perpetuity. The recommendation is non-binding on the Board. This document is to be transmitted separately from the *VTR* not later than 30 calendar days after the visit ends.

6. **Dates and deadlines**

   a. Every effort is made to make VTRs available for review by the NAAB directors 60 days after a visit ends.

      i. Within 30 days of the last day of the visit: team chair sends draft *VTR* and confidential recommendation to NAAB staff.

      ii. NAAB staff completes the initial edits and corrections in consultation with the chair, and 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 staff and team chair accept or reject corrections and complete the final *VTR.*

      v. NAAB staff transmit 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.

   b. Not later than 21 calendar days before the next meeting of the NAAB Board of Directors, NAAB staff prepare the final report dossier for the directors' review. This dossier contains four separate documents. They are:

      i. An executive summary

      ii. The final *VTR*

      iii. Confidential recommendation

      iv. Program response, if one is submitted

v. All previously submitted Interim Progress Reports (See Section 10).

7. **Decision of the Board of Directors**. At its next regularly scheduled meeting, the final report dossier is presented to the Board of Directors for a decision.

8. **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 overnight delivery. 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 13).

9. **Confidentiality**. The team and any nonvoting member 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.

10. **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 *Interim Report(s)* and the NAAB decision letter(s) for *Interim Report(s)*. These documents must be housed together on the program's website 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 *2014 Conditions for Accreditation,* Part II: Section 4 – Public Information*).*

    d. The NAAB publishes 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 NAAB's annual report. 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.

11. **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. This additional team member will not affect the ability of the program to nominate a non-voting member.

    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.

        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 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.

            5. Part III: The program must demonstrate that all NAAB-accredited programs are in compliance with Conditions III.1 and III.2

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 6. SUBSTANTIVE CHANGES REQUIRING REVIEW BY THE NAAB

Occasionally, programs or institutions may seek to make substantive changes that may affect the NAAB-accredited degree program.

These changes may include making a curricular change that does not require a change of title, consolidation or merging of institutions that offer a NAAB-accredited program, the addition of tracks for completion of the NAAB-accredited degree, or changing the title(s) of the NAAB-accredited degree program they offer (e.g., B. Arch. to M. Arch.).

Substantive changes that must be reviewed by the NAAB, prior to implementation by the program or institution include the following:

- Professional Degrees and Curriculum Changes:
    - Changes to the curriculum of an existing program or track for completing the program that affects the admissions requirements of a program (e.g., shifting from a Single-Institution M. Arch. to an M. Arch. that requires a preprofessional undergraduate degree for admission).
    - Changes to the curriculum that effectively "splits" an accredited single-institution program into a multi-degree sequence that concludes with an accredited graduate degree and which may require an undergraduate degree for admission (e.g., changing from a B. Arch. to an M. Arch. that requires a preprofessional degree for admission).
    - A program change that requires a significant change in pedagogy or approach to delivering the professional degree (e.g., moving from traditional, on campus learning to fully online learning).
- Nomenclature change proposals are limited to the following:
    - Programs seeking to convert an existing B.Arch. already in excess of 150 credits to a single-institution 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, single institution 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.
- Institutional changes:
    - Changes to the institution that offers the accredited degree program. These include consolidation or merging with another institution
    - Physical relocation of a program within a single institution with multiple, additional teaching sites or remote sites (e.g., an institution consolidating the professional program at an additional teaching site or from multiple sites to a single location).
- The addition of new tracks to existing accredited programs.

- Phasing out an existing NAAB-accredited program.

Any program seeking to make a substantive change must first consult the NAAB to determine which of the following procedures is appropriate or whether the changes are sufficiently expansive to constitute a new, proposed program that may be required to pursue candidacy and initial accreditation. In the event the program must pursue candidacy and initial accreditation, the Board may approve an accelerated schedule.

Generally, review and approval of substantive changes follow this sequence:

- Letter of application to the NAAB.
- Submission of a proposal or description of the change
- Review of the application and additional material
- Decision by the NAAB directors.

If approved, substantive changes may not be applied retroactively.

a. Substantive Changes

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

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

ii. A copy of the most recent decision letter from the NAAB .

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

iv. Implementation Plan. This plan must identify a course of action for implementation of the substantive change within not more than two academic years after receiving approval from the NAAB. The plan must include the following:

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

b. Developing and implementing new courses and/or curricular sequences, if necessary.

c. Proposed last academic year in which students will be admitted to the program in its current configuration.

d. Plans for ensuring that students in the existing configuration are able to complete the program on time.

e. Proposed first academic year in which students may enroll in the new program configuration.

f. Proposed academic year in which the first cohort of students will complete the newly configured program.

g. A plan for communicating with current students, newly admitted students, faculty, staff, alumni and the state registration/licensing board if the program change is approved by the NAAB. NOTE: If approved, program changes may not be applied retroactively.

h. A timeline showing all key dates for the institutional change, including, but not limited to:

i. State-required approvals

ii. Regional accrediting agency-required approvals

iii. Effective dates

1. Last academic year for which students will be enrolled in the existing program or institutional configuration

2. First academic year for which students to be enrolled under the new program or institutional configuration

3. Last academic year in which students will graduate from the existing program or institutional configuration

4. First academic year in which students will graduate from the new program or institutional configuration.

v. Documentation specific to the type of change proposed (see below).

vi. Applications for substantive changes may be sent by email only and are to be addressed to the director, accreditation at the NAAB. They may be submitted at any time.

1. Applications are limited to 50 pages and 2 MBs.

2. They are to be in either Word or Adobe PDF.

3. By e-mail: info@naab.org with a copy to forum@naab.org. Please include “Application for Substantive Change – [Name of Institution]” in the subject line.

b. **Substantive Change Review Panel**

i. The NAAB will assign a team of three persons: a current NAAB Director, a member of the most recent visiting team, one experienced team member or team chair (with the exception of the NAAB director, the other two panelists will be selected to ensure that one is an educator and the other, a practitioner).

ii. One of the three will be designated by the NAAB directors as the panel chair.

iii. There are no non-voting team members on panels to review substantive change requests.

c. **Responsibilities of the Panel Chair**

i. Coordinate the review of documents with the other members of the team.

ii. Coordinate the initial assessment of the materials and make a recommendation to the NAAB staff as to whether a visit is required (see below).

iii. Communicate with the NAAB staff and the program on the details of the visit, if required.

iv. Prepare the final *Substantive Change Report*.

d. **Substantive Change Sequence**

i. The panel will review the application and materials together with the most recent *VTR*.

ii. The panel will confer, using any reasonable means, to determine whether the documentary evidence is sufficient for making a recommendation to the NAAB directors. The panel will reach an initial decision from among the following:

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

2. Based on a review of the documentary evidence, the panel determines that the program must provide additional or supplemental materials before a recommendation can be made and no visit is necessary.

3. The panel determines based on a review of all documentary evidence provided that a visit is necessary to review additional evidence or to confer with program administrators and other institutional leaders.

iii. If the panel determines that no visit is necessary.

1. The panel chair requests the additional materials from the program, if necessary.

2. The panel may choose to consult with program or institutional administrators by conference call in order to ask questions and seek clarification.

3. Once the panel has assembled the necessary materials and agrees it has sufficient evidence on which to make a recommendation, the panel chair will prepare a report using the *Substantive Change Report* template. The report must be confined to the analysis of the proposal and the program's preparation to implement the change.

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

5. The panel will prepare, as a separate document, a confidential recommendation to the Board, signed by all members of the panel. This document is confidential in perpetuity and is non-binding on the Board.

6. The final copy of the report, with the recommendation of the panel will be sent to the NAAB Board for action at its next regularly scheduled meeting.

iv. If the panel determines a visit is necessary.

1. The panel chair will consult with the program administrator to set a date for a one-day Substantive Change visit. Visits are to take place on a weekday when classes are in session and students are on campus.
2. The scope of the visit is limited to the preparation by the institution or academic unit to implement the substantive changes.
3. The panel chair and program administrator will consult on the schedule for the visit. Generally, visits should include the following:
    a. Entrance and exit meetings with the program administrator.
    b. Meetings with institutional administrators with responsibility for implementation of the changes (e.g., department chair or dean).
    c. Meetings with faculty.
    d. Meetings with students.
    e. Review of documents and other evidence deemed appropriate by the program or requested by the panel chair to demonstrate the program's readiness to implement the changes.
4. The program should be prepared to provide the reviewer with a secure work space for use during their time on campus.
5. Upon the conclusion of the visit, the panel chair will consult with the other members of the panel and prepare a report using the *Substantive Change Report* template.
6. The NAAB will provide a copy of the report to the program to correct errors of fact or omissions.
7. The final copy of the report, with the recommendation of the review panel will be sent to the NAAB Board for action.
8. The program, if it wishes, may submit a written response to the final report when it submits corrections of fact.

e. **Recommendations for Substantive Change Proposals.** The panel may make one of three recommendations to the NAAB Board of Directors. Please note, these do not apply to Phase-Out Plans (see pp. 69-70)

i. Approve the change and leave the existing visit schedule unchanged.

ii. Approve the change and advance the time for the next visit for continuing accreditation while allowing adequate time for the program to prepare.

iii. Deny the change.

In the event the change is approved, the panel will recommend a specific date by which the existing program will be fully phased out, including appropriate "teach out dates." In the event the professional degrees and curriculum change results in a new degree title, a date after which the new title will be considered the accredited degree will be reported to NCARB.

f. **Final Decision**. The responsibility for the final decision rests with the NAAB directors.

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

   ii. Decisions of the NAAB regarding substantive changes are not subject to reconsideration or appeal.

g. **Additional Materials Required for Substantive Change Proposals.** In addition to the items listed above (a.i-a.v), the following materials are also required. These are specific to the type of change being proposed.

   i. Professional Degree and Curriculum Change proposals must include the following:

      1. Description of the current degree program.

         a. This should be similar to the program's response to Condition II.2.2 Professional Degrees and Curriculum in its most recent *Architecture Program Report*.[5]

         b. The matrix for Condition II.1 Student Performance Criteria, for the current degree program.

      2. Proposed new degree program or curriculum configuration.

         a. A description of the changes that will made to the program while also ensuring it conforms to NAAB and institutional requirements including:

         b. A narrative that responds to the requirements of Condition II.2.2.

         c. A new matrix for Student Performance Criteria for the accredited program under its new configuration

         d. Any prerequisites.

         e. Assessment of the effect of the proposed changes on Conditions I.2.1-I.2.5

   ii. Merger or Consolidation of Institutions

   NOTE: In the event the merger or consolidation affects NAAB-accredited programs at both institutions, the NAAB may request additional material.

[5] Condition II.2.2 (*2014 Conditions*) is similar to II.2.1 from the *2009 Conditions*.

Under this circumstance, please consult with the NAAB early in the process to determine the scope and scale of the review.

1. A description of the current program using *2014 Conditions* I.1
2. A description of the resources currently supporting the program (*2014 Conditions I.2.1-I.2.5*)
3. A description of the effect of the proposed change on the program's compliance with *2014 Conditions I.2.1-I.2.5*
4. An assessment of the implications for the existing program on the following:
    a. Mission of the program (I.1)
    b. Learning Culture (I.2)
    c. Social Equity (I.3)
    d. Defining Perspectives (I.5)
    e. Long Range Planning (I.6)
    f. Self-Assessment (I.7)
    g. Resources (I.2)
    h. Enrollment

iii. New or additional tracks for completing the NAAB-accredited degree program.

1. Proposals for new or additional tracks for completing a NAAB-accredited degree program must include all of the same materials as for a Professional Degrees and Curriculum Change (see above).
2. An assessment of the implications of the new track for the existing program.

iv. Nomenclature Change

1. Programs seeking approval of a nomenclature change request must have the following:
    a. A full term of continuing accreditation[6].
    b. Condition II.2 of the *2014 or 2009 Conditions for Accreditation Curricular Framework* must have been met in the last accreditation visit and *VTR*.
    c. No element of Condition II.3 the *2014 or 2009 Conditions for Accreditation* may be listed as a cause for concern in the most recent *VTR*.

[6] See note under Section 3, initial accreditation.

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

2. The proposal for the nomenclature change must include the following:

   a. Description of the current degree program that includes:

      i. The program's response Condition II.2.2 Professional Degrees and Curriculum from the most recent *Architecture Program Report*.

      ii. The SPC matrix for Condition II.1 for the current degree program.

   b. Proposed new degree nomenclature.

      i. A description of any changes that must be made to the program in order to conform to NAAB and institutional requirements including:

      ii. A new response to Condition II.2.2.

      iii. A new SPC matrix for the accredited program under its new title.

      iv. Any prerequisites.

b. 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 institution will cease awarding the accredited degree.

Any institution that intends to eliminate a NAAB-accredited degree must provide the following by June 30 of the year in which a decision to phase-out a degree was made:

a. A letter from the chief academic officer of the institution requesting approval of the phase-out plan and extension of the current term of accreditation to the teach-out date.

b. Copies of all correspondence with the appropriate state agencies and regional accrediting agencies regarding the decision to phase-out the NAAB-accredited degree.

c. Implementation Plan. The plan must include the following:

   1. Teach-out date for the program[7]. This is the date after which the university will no longer award the degree.

   2. Summary of courses to be offered and faculty assigned during the phase-out with a corresponding SPC matrix.

   3. Summary of resources to be used to support students and faculty during the phase-out.

[7]The teach-out date will be reported to the National Council of Architectural Registration Boards. Degrees awarded after the teach-out date will not be considered NAAB-accredited.

4. Last academic year in which students were admitted to the program in its current configuration.
5. Table showing the number of students currently enrolled and their projected dates for graduation.
6. Plans for ensuring that students currently enrolled in the NAAB-accredited degree program are able to complete the program by the teach-out date.
7. Analysis of the number of students who may not complete the program by the teach-out date and plans for advising them and ensuring they can complete a NAAB-accredited degree.
8. A plan for communicating with students, faculty, staff, alumni and the state registration/licensing board; copies of all communications with the above-listed groups
9. Evidence the program has publicly announced the phase out of the program in all its promotional materials, including websites.

d. **Action on Phase-Out Plans.** Phase-out plans will be reviewed by the full board. The Board may take one of two actions; these depend on the proximity of the teach-out date to the date of the next visit:

1. If the teach-out date is less than two years from the date of the next visit, the board can approve the phase-out plan and extend the term of accreditation to the teach-out date.
2. If the teach-out date is more than two years from the date of the next visit, the board can approve the phase-out plan and leave the date of the next visit in place.

During a phase-out period, students 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.

Any program that phases out a program without first filing a plan for phasing out the NAAB-accredited degree will be considered to have forfeited accreditation of the professional degree in architecture and accreditation will be revoked. The effective date of revocation will be December 31 of the year in which the institution began the phase-out of the program. (See Section 6 for more information).Program and institution administrators are strongly encouraged to contact the NAAB before beginning any phase-out process.

c. Confidentiality

Panels must maintain strict confidentiality with respect to materials reviewed, interviews conducted, and panel deliberations, including the panel's recommendation on a substantive change request in perpetuity. The panel 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 panel 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 7. 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, initial candidacy, or continuation of candidacy. The process for requesting a postponement is the same in all cases. A program may only request a postponement one time in any accreditation cycle.

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

   a. **Procedure for Requesting a Postponement:**

      Not later than July 1 in the year prior to a regularly scheduled visit for continuing accreditation 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 2016 may be postponed to Fall 2016). 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(s) of the postponement to the program and institution.

      iv. A brief description of the benefit(s) 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 July 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. Requests to postpone visits may be submitted after the due date only when a catastrophic event renders the program incapable of hosting the visit as scheduled. Under this circumstance, the program is required to contact the executive director prior to submitting the request.

      vii. Requests 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 forum@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. In the event of such a request, the program is advised to contact the NAAB executive director immediately.

2. **Request to Advance the Date for a Regularly Scheduled Visit for Initial Accreditation**. Occasionally programs in candidacy for accreditation may wish to advance the date for a visit for initial accreditation from the fall semester to the preceding spring.

   a. **Procedure for Requesting an Advancement:** The procedure for requesting a spring visit for initial accreditation is as follows:

      i. A written request to advance the visit for initial accreditation from the institution's chief academic officer is sent to the NAAB. This request must include:

         1. A brief description of the reason(s) for requesting the earlier date.
         2. A brief description of the benefit of advancing the date to the program and institution.
         3. A brief description of the benefit of advancing the date to the accreditation process.

      ii. Requests to advance the date for visits originally scheduled for the fall must be received in the NAAB offices no later than close of business on July 1 one year prior to the originally scheduled visit for initial accreditation.

      iii. 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 Advancing Regularly Scheduled Visit – [Name of Institution]" in the subject line.

   b. **Action on the Request**. Decisions to grant or deny a request for advancing the date of a visit for initial accreditation 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.

3. **Early Termination of a Visit**

a. Visits may be terminated only under extreme circumstances or catastrophic conditions. These include the following:

    1. Incomplete team due to illness or extended travel delay
    2. Poor preparation by the program
    3. The team room is inadequate or incomplete
    4. The program is unable to provide adequate information when requested by the team
    5. Inadequate facilities and arrangements for the team
    6. Inability to follow schedule in an appropriate way
    7. Failure by any member of the team to comply substantially with established accreditation procedures
    8. Unanticipated crisis beyond the control of the program, institution or team (e.g., weather emergency, state or national emergencies, or illness or death)

b. The determination that the visit is compromised and that termination is likely, must be made by the entire team and only after consultation with the program, university administrators, and the NAAB executive director. If a team agrees that a visit is sufficiently compromised, the team chair calls an immediate meeting with the program administrator, his/her superior, and the institution's chief academic officer to outline the choices available to the program.

c. The following options are available:

    1. Terminate the visit, to be rescheduled at a later time,
    2. Continue the visit, after evaluating the potential consequences to the outcome or potential disruption to the procedures

d. If a visit must be terminated and rescheduled because of the program's failure to prepare appropriately, the chief academic officer of the institution is notified that accreditation may lapse as a result.

4. **Request for Reinstating Accreditation**

A request for reinstatement following revocation or in the event a program's accreditation expires 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 Section 4. For programs requesting reinstatement, the minimum period of candidacy is one year.

5. **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 Requiring Separate Accreditation**. 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 as Part of a Single Accredited Program.** 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 and/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 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 as Part of a Single Accredited Program.** 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 as Part of a Single Accredited Program**. 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 (credit hours) of the total NAAB-accredited curriculum is delivered online or the on-campus residency requirement is less than six weeks. In such cases, the online program will be considered an additional site providing that the online and on-ground curricula are the same.

b. **Determination of Accreditation Status for Remote Locations or Additional Sites.** In the *APR* submitted for a visit for continuing accreditation, the program must include its responses to the Branch Campus Questionnaire found in Appendix 4 and a narrative description of its remote locations, 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 team chair and the staff to determine which category to assign and what additional requirements may be added to the visit. The program will be notified no later than January 1 as to what adjustments may be needed for the visit. 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 5. 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 may be included in the regularly scheduled visit to the accredited program. The site visit may be extended by up to two 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 one other member of the team. (NOTE: Teaching sites located outside the U.S. may be visited by the team

chair only; 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.

ii. Programs initiating or altering additional sites, teaching sites or online learning must provide this information in the *Interim Progress Report,* 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.

SECTION 8. CONFLICTS OF INTEREST

The NAAB and its volunteer leaders are dedicated to serving in the most honorable and ethical manner possible. Among the NAAB's responsibilities is to provide assurances that debates, decision making, and governance at the NAAB is conducted in an objective and bias-free context. Thus, the NAAB seeks to avoid both real and perceived conflicts of interest in its procedures, deliberations, and accrediting decisions.

No person shall take part as a visiting team member[8] 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.

1. **Definitions**. The following are considered conflicts of interest:
    a. Being an employee, current or former student, or graduate of the program being evaluated or the institution in which it is located.
    b. Having a close association with currently employed administrative or faculty personnel in the program or at the institution at which the program is located (e.g., a spouse or former colleague).
    c. Having a member of the one's immediate family (including the spouse, former spouse, child, parent, or sibling and the immediate family of the spouse, child, or sibling) currently enrolled in or seeking enrollment in the program or the institution at which it is located (e.g., a son or daughter enrolled in the institution or program).
    d. Having a member of the one's immediate family (including the spouse, former spouse, child, parent, or sibling and the immediate family of the spouse, child, or sibling) employed by or currently seeking employment with the institution in which the program is located.
    e. Being a donor or providing other resources and support to the program or institution at which it is located.
    f. Having had a limited relationship (paid or unpaid) with the program being evaluated as a temporary employee, visiting faculty member, award recipient, speaker on more than one occasion, volunteer teacher or mentor, or consultant within the 10 years prior to the visit.
    g. Having sought (successfully or unsuccessfully) at any time in the 10 years prior to the visit permanent employment or a relationship of the types set forth above.
    h. 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 (e.g., through written or recorded remarks or materials).

[8] There are special provisions for nonvoting team members regarding their status as alumni or former employees of a NAAB-accredited program. Please see page 77 below and Section 5, pp. 47-48 for additional information.

2. **Team Member Disclosure**

   a. Team members must disclose all conflicts of interest, real or potential, to the NAAB staff, the visiting team chair, and the program administrator no less than 5 days after being assigned to a team in order to determine whether the assigned individual should or should not participate on a specific team.

   b. The NAAB will not assign an individual to serve on a visiting team to evaluate a program if it appears that the individual has a real or potential conflict of interest that would raise a question as to that individual's objectivity in evaluating the program.

   c. Team members, including nonvoting 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[9]. Before serving as a team 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.

   d. 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 the team.

3. **NAAB Director Disclosure**

   a. The NAAB directors are required to disclose conflicts of interest annually. These disclosures are kept on file in the NAAB offices.

   b. Further, NAAB directors are required to recuse themselves from deliberating and voting on a specific accreditation decision if a conflict of interest, real or perceived, exists.

   c. In the event that a NAAB director has a direct relationship with a program currently under review, that director is excluded from all decision-making and is barred from reading the VTR and the team's recommendation.

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

[9] Nonvoting members are sometimes *alumni* or individuals otherwise considered "friends" of the program. These relationships do not, necessarily preclude an individual from serving as a nonvoting member, however, they must be identified and reported to the NAAB office and the team chair prior to an individual's being approved as a nonvoting member on a team. These relationships are to be documented in the *VTR* under Team Comments.

SECTION 9. ANNUAL STATISTICAL REPORTS

Continuing accreditation and candidacy is subject to the submission of *Annual Statistical Reports*.

Annual Statistical Reports are submitted online through the NAAB's Annual Report Submission (ARS) system (http://ars.naab.org) and are due by November 30 of each year. For specific information or instructions on how to complete *Annual Statistical Reports*, please refer to the ARS website.

1. **Annual Statistical Report**

    a. **Content.** This report captures statistical information on the institution in which an architecture program is located and on the accredited 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) [10]. Much of the information requested this report 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. **Submission.** *Annual Statistical Reports* are submitted through the NAAB's Annual Report Submission system and are due on November 30.

    c. **Fine for Late Annual Statistical Report.** *Annual Statistical Reports* are due each year on November 30. In the event a program fails to complete an annual statistical 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 Statistical Report* is submitted. This fine will be assessed when the report is submitted.

    d. **Failure to Submit an Annual Statistical Report**. If an acceptable *Annual Statistical Report* is not submitted to the NAAB by the deadline, the NAAB may advise the chief academic officer and program administrator of the failure to comply. In the event the program fails to request an extension and fails to submit an acceptable *Annual Statistical Report* by January 31, 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.*

[10]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/

SECTION 10: INTERIM PROGRESS REPORT

Continuing accreditation is subject to the submission of a narrative, interim progress report submitted at defined intervals after an eight-year or four-year term of continuing accreditation is approved.

Programs with two-year probationary terms are exempt from this requirement.

Annual statistical reports (Section 10) are still required, regardless of a program's interim reporting requirements

Interim Progress Reports are due on November 30 at defined intervals after the most recent visit and are also submitted through the ARS (see Section 9).

1. **Interim Progress Report.**
    a. For Programs with Eight-Year Terms: Any program receiving an eight-year term of accreditation must submit two interim progress reports.
        i. The first is due on November 30 two years after the most recent visit and shall address all sections in the interim report template (see note in Appendix 3).
        ii. The second report is due on November 30 five years after the most recent visit and shall address at least Section 3 of the template, although additional information may be requested by the NAAB (see below).
        iii. **Content:** This is a narrative report supported by evidence as outlined in the instructions, which covers three areas:
            1. The program's response or progress in addressing not-met Conditions or SPC or Causes of Concern from the most recent VTR.
            2. Significant changes to the program or the institution since the last visit.
            3. Changes to the program's responses to Conditions I.1-I.5 since the previous Architecture Program Report was submitted. In this section, the program must clearly distinguish new or amended text from that provided in the template.
    b. For Programs with Four-Year Terms: Any program receiving a four-year term of accreditation must submit one interim progress report.
            1. This report is due November 30 two years after the most recent visit and shall address all sections in the interim report template (see note in Appendix 3).
            2. Content: This is a narrative report supported by evidence as outlined in the instructions, which covers three areas:
                a. The program's response or progress in addressing not-met Conditions or SPC or Causes of Concern from the most recent VTR.

b. Significant changes to the program or the institution since the last visit

c. Changes to the program's responses to Conditions I.1-I.5 since the previous APR was submitted. In this section, the program must clearly distinguish new or amended text from that provided in the template.

c. **Submission:** *Interim Progress Reports* are due on November 30. They are submitted electronically through the ARS in Word or PDF. Reports must use the template (see note in Appendix 3). Files may not exceed 5 MBs.

d. **Review for Programs with Eight-Year Terms.**

i. *Two-Year Interim Progress Reports* are reviewed by a panel of at least three people: one current NAAB director, one former NAAB director, and one experienced team chair[11]. This panel will be assembled by the staff. The panel may make one of three recommendations to the Board regarding the acceptance of the first interim report:

1. Accept the interim report as having demonstrated satisfactory progress toward addressing deficiencies identified in the most recent VTR; only the mandatory section of the fifth-year report is required. The annual statistical report (Section 9) is still required.

2. Accept the interim report as having demonstrated progress toward addressing deficiencies identified in the most recent VTR; the fifth year report must include additional materials or address additional sections. The annual statistical report (Section 9) is still required.

3. Reject the interim report as having not demonstrated sufficient progress toward addressing deficiencies and advance the next accreditation sequence by at least one calendar year but not more than three years, therefore shortening the term of accreditation. 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.* The annual statistical report (Section 9) is still required.

ii. *Five-Year Interim Progress Reports* are also reviewed by a panel composed in the same manner as described above. The panel may make one of two recommendations to the Board regarding the acceptance of the report:

1. Accept the interim fifth-year report as having demonstrated satisfactory progress toward addressing deficiencies identified in the most recent VTR;

[11] The experienced team chair will not have participated on a team during the year in which the original decision on a term of accreditation was made.

2. Reject the fifth-year interim report as having not demonstrated sufficient progress toward addressing deficiencies and advance the next accreditation sequence by at least one but not more than three calendar years. 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.*
3. The annual statistical report (Section 9) is still required in either case.

e. **Review for Programs with Four-Year Terms**. *Two-Year Interim Progress Reports* are reviewed by the same panel that review two-year IPRs from programs with eight-year terms. This panel will be assembled by the staff. The panel may make one of two recommendations to the Board regarding the acceptance of the first interim report:

1. Accept the interim report as having demonstrated satisfactory progress toward addressing deficiencies identified in the most recent VTR. There are no additional requirements or documentation required for the APR. The annual statistical report (Section 9) is still required.
2. Accept the interim report as having demonstrated progress toward addressing deficiencies identified in the most recent VTR; the next APR must include additional materials or address additional sections. The annual statistical report (Section 9) is still required.

f. **Failure to Submit.** If an acceptable interim progress report is not submitted to the NAAB by the deadline, the NAAB may advise the chief academic officer and program administrator of the failure to comply. If the program fails to submit an acceptable IPR by January 31, the NAAB Executive Committee may consider advancing the program's next accreditation visit by at least one calendar year, but not more than three years.

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

h. **Decision.** The panel's recommendation on any interim progress report will be forwarded to the Board at the next regularly scheduled meeting.

1. The responsibility for the final decision rests with the NAAB Board of Directors.
2. Decisions of the NAAB on an interim progress report are not subject to reconsideration or appeal.

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 1101 Connecticut Avenue, NW, Washington, DC must include the following:
    a. A description of the specific nature or subject 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 subject of the complaint.
    c. A reference to the specific *Conditions for Accreditation* that may be compromised as a result of the program's failure to address the subject of the complaint.
    d. 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:
    a. Take no action.
    b. Require the program to address the matter of the complaint in the next *Interim Progress Report* and subsequent *APR*.
    c. Append the complaint and response to the next *VTR,* or other report (See Section 6), 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 prior to the most recent visit 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 revoke accreditation. When making a request for reconsideration, the program must 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:

- 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 *Interim Progress Report*s.

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 executive director.
    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, UPS, or FedEx.
    e. All days refer to regular calendar days, exclusive of national holidays.
2. **Reconsideration Sequence**
    a. Upon receiving the request, the NAAB executive director advises the president that a reconsideration request has been received.
    b. The NAAB president assigns a NAAB director 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 director shall have had no prior involvement with the program.
    c. The NAAB director 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.
    d. In the event the request is based on the failure of the Board to comply with established procedures, the Board representative sends the request for reconsideration to the executive director and requests a written response to the assertions of failure by the Board to comply with established procedure.

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

f. The written analysis is sent to the chief academic officer of the institution, the visiting team chair, and the executive director.

g. 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.

h. 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 executive director's response.

        6. The Board representative's analysis.

    iii. If the team chair has subsequently become a NAAB director, he/she is excused from the deliberations.

    iv. The NAAB directors review the record and determine whether to reconsider the accreditation decision. At least eight 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 eight 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 representative.

i. 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 will present their position, confining it to issues of either incorrect or insufficient factual information and/or evidence that the visiting team or the Board failed to comply with accreditation procedures and such failure affected the accreditation decision.
      5. Within the same limits, the visiting team chair and the president of NAAB may present the position of the team and the Board, respectively.
      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 eight 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 granting the 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 eight 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. APPEAL OF A RECONSIDERATION DECISION

Programs may appeal denial of a reconsideration decision only in the instance of a revocation decision. 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 to deny the reconsideration request was not supported by sufficient factual evidence cited in the record.
- The Board of Directors failed to comply substantially with NAAB procedures and such departure significantly affected the decision to deny the reconsideration request

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

Neither the program nor the NAAB may raise issues in the appeal that were not raised in the request for reconsideration.

An appeal is conducted by persons selected to represent educators, practitioners, and students or recent graduates.

1. **Initiating the Appeal**
    a. To initiate an appeal hearing, the chief academic officer must send a written request within 14 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 executive director.
    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 Board's failure to comply with NAAB procedures and that such failure significantly affected the reconsideration decision.
    d. The request must be sent by certified mail, return receipt requested but UPS, or FedEx.
    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 original accreditation decision.
2. **Appeal Sequence**
    a. Selecting the Appeal Panel
        i. The AIA, ACSA, AIAS, and NCARB are informed that an appeal has been filed and asked to submit to the NAAB president a list of persons who are full-time educators, full-time practitioners, current students, or recent graduates (not more than one year following graduation), who are willing to serve on an appeal panel; and who have never been involved with either the institution or the reconsideration decision under appeal.

ii. The NAAB president draws from these lists to propose an appeal panel composed of five persons: two educators, two practitioners, and one student..

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 executive director that the panel is acceptable or challenges no more than two proposed members. In the latter case, the NAAB executive director will appoint replacements, after which the membership of the appeal panel is final.

v. The NAAB president, in consultation with the executive director, 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*, materials reviewed or presented during the reconsideration hearing, the institution's response to the reconsideration decision, and the NAAB's response to the program's assertions.

ii. The appeal panel chair reviews the record, the format for the hearing 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 (See Section 12), the visiting team chair, the NAAB executive director, and not more than three 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(s) of the institution first presents the institution's position, confining it to issues of incorrect or insufficient factual information cited by the NAAB in support of the decision to deny the reconsideration request and/or evidence that failure of the Board to comply with NAAB procedures significantly affected the reconsideration decision.

iv. A representative of the NAAB presents the Board's position, confining it to responding to the assertions of the program regarding information used to make the reconsideration request and/or evidence that the Board complied with NAAB procedures in making the reconsideration decision.

v. The appeal panel chair may question any attendee.

vi. The appeal panel chair calls a recess so the panel may consider whether to receive or request additional material for the record.

vii. The NAAB's representative makes a closing statement.

viii. The institution's representative makes a closing statement, which concludes the appeal hearing, after which the institution's representatives and the NAAB's representatives are excused.

d. Appeal Decision

i. The panel convenes in executive session to rule on whether the reconsideration decision is upheld.

1. If the reconsideration decision is upheld, the following occurs:

a. The appeal panel chair prepares a statement to be signed by the members of the appeal panel, stating the reconsideration 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 reconsideration 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 to deny a reconsideration request and/or those lapses in compliance by the Board with NAAB procedures that significantly affected the reconsideration 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 executive director forwards the report to the chief academic officer of the institution.

d. The NAAB immediately takes steps to correct factual evidence as specified in the appeal panel report and to have the NAAB make a new reconsideration decision in light of the corrections. This new reconsideration decision is subject to appeal, as if it were an original reconsideration 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 preparing documents, special services requested at the hearing,

meeting rooms and for the travel, meals, and lodging of its representatives and for support and travel of 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. Sequence Infographics

Sequence for Candidacy and Initial Accreditation

Application to Establish Candidacy Status

- Application for Initial Candidacy compiled by institution:
  - *Letter from Chief Academic Officer*
  - *Recent decision letter from regional accrediting agency*
  - *Plan for Achieving Initial Accreditation (PAIA)*

Application to be limited to 75 pages including all supplemental info, sent as MS Word or Adobe PDF (3MB).

Determination of Eligibility

- Review of Application for Initial Candidacy by NAAB
- Establishment of 3-person Application Review Panel
- Eligibility visit
- Report from the Application Review Panel to the NAAB Board of Directors
- NAAB Board of Directors determines whether to accept the program as eligible for initial candidacy

Eligibility Visit: Max 2 days by 1 member of the Review Panel

Initial Candidacy Visit

- Preparation of Architecture Program Report for Initial Candidacy (APR-IC)
- NAAB Visiting Team organized
- Date for visit scheduled
- Visit Schedule:
  - *Tours*
  - *Meetings: staff, Program Head, School Administrator, CAO, faculty, and students*
  - *Review of students' work*
  - *Observations of studios' lectures and seminars*
  - *Review student records*
  - *Debriefing session*
  - *Exit interviews*
- Preparation of Candidacy – Visiting Team Report (C-VTR)
- C-VTR review by NAAB staff
- Decision by NAAB Directors whether to grant initial candidacy

APR-IC: 250 pages (excl. PAIA and Eligibility Memorandum), sent as MS Word or Adobe PDF (7MB).

Visit: Sat evening – Tues noon

Subsequent Evaluations

- Submission of annual statistical reports
- Visits at 2-year intervals until initial accreditation is achieved
- Format of panel visit is the same as for initial candidacy

Initial Accreditation

- Initial Accreditation Request:
  - *Letter from Chief Academic Officer*
  - *Recent decision letter from NAAB*
  - *Recent decision letter from regional accrediting agency*
  - *Assessment of PAIA*
- Preparation of Architecture Program Report for Initial Accreditation (APR-IA)
- NAAB Visiting Team organized and scheduled
- Visit: Format of visit same as for Continuing Accreditation
- Preparation of Accreditation - Visiting Team Report (VTR)
- VTR reviewed by NAAB staff
- Decision by NAAB Board of Directors whether to grant initial accreditation
- Public disclosure of accreditation outcomes

Initial Accreditation Request limited to 15 pages, sent as MS Word or Adobe PDF (3MB).

Visits in fall semester or quarter following graduation of first students to complete program.

Visits: Sat evening – Wed noon

Sequence for Continuing Accreditation

Architectural Program Report

- Architectural Program Report (APR) compiled by the institution
- Template for the APR is available from NAAB

APRs must be uploaded on or before September 7 of the calendar year immediately preceding the year accreditation is set to expire.

Review of Architectural Program Report

- Review of APR by NAAB
- Team Chair nominated
- Review of APR by Team Chair and subsequent recommendation:

a) Accept APR and schedule site visit

b) Accept APR, schedule site visit, and request further information

c) Require additional information prior to scheduling site visit

d) Reject APR and require a new report

If more information or a new report is requested, it must be received by NAAB before November 15.

Site Visit

- NAAB Visiting Team organized
- Date for visit scheduled
- Team notified of program
- Team preparation:
  - *Conference call*
  - *Team training (if applicable)*
  - *Documentary review*
- Visit Schedule:
  - *Tours: Resources, Team room, Library/Info resources*
  - *Meetings: staff, Program Head, School Administrator, CAO, faculty, and students*
  - *Review of students' work*
  - *Observations of studios' lectures and seminars*
  - *Review student records*
  - *Debriefing session*
  - *Exit interviews*
- Drafting of Visiting Team Report (VTR)

Visiting Team: 3-4 people

Visits: Sat evening – Wed noon,
usually between last week of January to first week of April

The Program may nominate 1 non-voting member to the visiting team (See Sec. 5).

Visiting Team Report Submission

- Submission of VTR by Team Chair
- Term of Accreditation by Team Chair – confidential recommendation
- VTR reviewed by NAAB staff
- VTR transmitted to Program Administrator for Correction of Fact
- Correction of Fact by Program Administrator
- Final-VTR transmitted to Program Administrator
- Optional Response by Program Administrator
- Final-VTR prepared for NAAB Board of Directors

Team Chair submits VTR and confidential recommendation for term of accreditation to NAAB within 30 days of site visit.

Within 10 days of receipt, Correction of Fact from Program Administrator to be delivered to NAAB.

Final-VTR transmitted to Program Administrator within 10 days of receipt of Correction of Fact.

Within 10 days of receipt of Final VTR, Optional Response by Program Administrator to be delivered to NAAB.

Decision by NAAB Directors

- NAAB Board Review:
  - *Executive Summary*
  - *Final-VTR*
  - *Confidential recommendation on term of accreditation.*
  - *Program response (if provided)*
  - *All previously submitted Interim Progress Reports*
- Decision made by the NAAB Board of Directors
- Decision of NAAB Board of Directors transmitted to President of Institution and Program Administrator
- Public disclosure of accreditation outcomes

Decision of the NAAB BOD will be transmitted within 14 days.

Institution has 14 days from receipt of decision to request reconsideration.

APPENDICES

1. Team Member Nomination Forms
2. History of the NAAB
3. Report Templates
4. Branch Campuses Questionnaire
5. Reimbursement Policy
6. List of acronyms and abbreviations

National Architectural Accrediting Board, Inc.

TEAM MEMBER POOL NOMINATION

JANUARY 1, 2016-JANUARY 1, 2020

Name: **Date:**

Address (Home): **Address (Office/Professional):**

Telephone (preferred): **Email (preferred):**

Team Member Designation: Please select one of the following. You will be designated in the team member pool as either an educator or practitioner. Please select the designation that most closely describes your current role in the profession:

- ☐ **Educator** (more than 50% of time spent as a full-time educator, member of a faculty, program administrator, or institutional leader)
- ☐ **Practitioner** (more than 50% of time spent working as a licensed professional)

Educational Credentials:

Institution	Years Attended	Degree Awarded

Teaching Experience (since 2004):

Institution	Years Attended	Degree Awarded

Practice Experience (since 2004):

Firm	Years Affiliated	Location(s)

Supplemental Experience (since 2004): (For educators, this section could include experience in practice, whether you are an Architect Licensing Advisor, participation in committees or task forces appointed by the AIA, AIAS, ACSA, or NCARB. For practitioners, this section could include experience teaching as an adjunct or other part-time appointment, service to an institution with a NAAB-accredited program, as well as service on committees or task forces appointed by the AIA, AIAS, ACSA, or NCARB.):

Firm/Institution	Years Affiliated	Nature of the affiliation

Licenses/Registration (this is a list of the U.S. jurisdictions in which you are currently registered to practice)**:**

Other (Include additional information about your experience or education that supplement or complement information already provided on this form):

Individuals in either category should indicate the following:

- ☐ **NCARB Member Board Member** Please check this box if you are a current or former member of an NCARB member board)

- ☐ **IDP Mentor or Supervisor** Please indicate whether you have experience as an IDP supervisor or mentor

National Architectural Accrediting Board, Inc.

TEAM MEMBER POOL NOMINATION: STUDENTS

JANUARY 1, 2016-JANUARY 1, 2017

Name: **Date:**

Address (Home): **Address (Office/Professional):**

Telephone (preferred): **Email (preferred):**

Team Member Designation: You will be designated in the team member pool as a student if you are currently enrolled in a NAAB-accredited program or are a recent graduate and currently enrolled in IDP. NAAB reserves the right to confirm your enrollment in IDP with the National Council of Registration Boards

Educational Credentials:

Institution	Years Attended	Degree Awarded

Intern Development Program Experience:

- ☐ Currently enrolled (Please provide your Council Record number:)
- ☐ Not currently enrolled

Supplemental Experience (since 2004): (Please include information about your affiliation with the AIAS, Freedom x Design; other community services projects or programs; councils or governing bodies within your program:

Organization/Project	Years Affiliated	Nature of the affiliation

Other (Include additional information about your experience or education that supplement or complement information already provided on this form):

Appendix 2: History of the NAAB

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.

Appendix 3: Report Templates

A. Visiting Team Report
B. Substantive Change Report

NOTE: The following templates are available online at www.naab.org:

Architecture Program Report (Section 2)

Interim Progress Report (Section 10)

Name of University
School of Architecture

2016 Visiting Team Report

B. Arch

M. Arch

The National Architectural Accrediting Board
Date of Visit

Vision: The NAAB aspires to be the leader in establishing educational quality assurance standards to enhance the value, relevance, and effectiveness of the architectural profession.

Mission: The NAAB develops and maintains a system of accreditation in professional architecture education that is responsive to the needs of society and allows institutions with varying resources and circumstances to evolve according to their individual needs.

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V. Signatures of the Visiting Team

I. Summary of Visit

a. Acknowledgements and Observations

b. Conditions Not Achieved (list number and title)

II. Progress Since the Previous Site Visit

2004/9 Condition/Criterion [quoted in full] [NOTE: This section will be completed by the NAAB staff for each visit]

Previous Team Report (2010):

Previous FE Team Report (2013):

2016 Visiting Team Assessment:

III. Compliance with the Conditions for Accreditation

PART ONE (I): INSTITUTIONAL SUPPORT AND COMMITMENT TO CONTINUOUS IMPROVEMENT

This part addresses the commitment of the institution, its faculty, staff, and students to the development and evolution of the program over time.

PART ONE (I): SECTION 1 – IDENTITY & SELF-ASSESSMENT

I.1.1 History and Mission: The program must describe its history, mission and culture and how that history, mission, and culture shape the program's pedagogy and development.

- Programs that exist within a larger educational institution must also describe the history and mission of the institution and how that shapes or influences the program.
- The program must describe its active role and relationship within its academic context and university community. This includes the program's benefits to the institutional setting, and how the program as a unit and/or individual faculty members participate in university-wide initiatives and the university's academic plan. This also includes how the program as a unit develops multi-disciplinary relationships and leverage opportunities that are uniquely defined within the university and its local context in the surrounding community.

2016 Analysis/Review: Instructions to the team: write a brief summary of the program's history and mission based on material provided in the APR and information gathered during the visit. Limit: ½ page.

I.1.2 Learning Culture: The program must demonstrate that it provides a positive and respectful learning environment that encourages optimism, respect, sharing, engagement, and innovation between and among the members of its faculty, student body, administration, and staff in all learning environments both traditional and non-traditional.

- The program must have adopted a written studio culture policy that also includes a plan for its implementation, including dissemination to all members of the learning community, regular evaluation, and continuous improvement or revision. In addition to the matters identified above, the plan must address the values of time management, general health and well-being, work-school-life balance, and professional conduct.
- The program must describe the ways in which students and faculty are encouraged to learn both inside and outside the classroom through individual and collective learning opportunities that include, but are not limited to field trips, participation in professional societies and organizations, honor societies, and other program-specific or campus-wide and community-wide activities.

2016 Analysis/Review: Instructions to the team: write a brief summary of the program's learning culture based on material provided in the APR and information gathered during the visit. Limit: ½ page.

I.1.3 Social Equity: The program must have a policy on diversity and inclusion that is communicated to current and prospective faculty, students, and staff and is reflected in the distribution of the program's human, physical, and financial resources.

- The program must describe its plan for maintaining or increasing the diversity of its faculty, staff, and students as compared with the diversity of the faculty, staff, and students of the institution during the next two accreditation cycles.
- The program must document that institutional, college or program-level policies are in place to further Equal Employment Opportunity/Affirmative Action (EEO/AA), as well as any other diversity initiatives at the program, college or institutional-level.

2016 Analysis/Review: Instructions to the team: write a brief summary of the program's learning culture based on material provided in the APR and information gathered during the visit. Limit: ½ page.

2016 Team Assessment: [NOTE: This commentary/assessment must identify the evidence or the source of the evidence the team used to make the assessment.]

I.1.4 Defining Perspectives: The program must describe how it is responsive to the following perspectives or forces that impact the education and development of professional architects. . Each program is expected to address these perspectives consistently and to further identify, as part of its long-range planning activities, how these perspectives will continue to be addressed in the future.

A. **Collaboration and Leadership**. The program must describe its culture for successful individual and team dynamics, collaborative experiences and opportunities for leadership roles. Architects serve clients and the public, engage allied disciplines and professional colleagues, and rely on a spectrum of collaborative skills to work successfully across diverse groups and stakeholders.

B. **Design**. The program must describe its approach for developing graduates with an understanding of design as a multi-dimensional protocol for both problem resolution and the discovery of new opportunities that will create value. Graduates should be prepared to engage in design activity as a multi-stage process aimed to address increasingly complex problems, engage a diverse constituency, and provide value and an improved future.

C. **Professional Opportunity.** The program must describe its approach for educating students on the breadth of professional opportunity and career paths for architects in both traditional and non-traditional settings; in local and global communities.

D. **Stewardship of the Environment**. The program must describe its approach for developing graduates who are prepared to both understand and take responsibility for stewardship of the environmental and the natural resources that are significantly compromised by the act of building and constructed human settlements.

E. **Community and Social Responsibility**. The program must describe its approach to developing graduates who are prepared to be active, engaged citizens able to understand what it means to be a professional member of society and to act on that understanding. The social responsibility of architects lies in part in the belief that architects can create better places, and further that architectural design can create a civilized place by making communities more livable. A program's response to social responsibility must include nurturing a calling to civic engagement to positively influence the development, conservation or changes to the built and natural environment

2016 Analysis/Review: Instructions to the team: write a brief summary of the program's learning culture based on material provided in the APR and information gathered during the visit. Limit: ½ page.

I.1.5 Long-Range Planning: The program must demonstrate that it has identified multi-year objectives for continuous improvement with a ratified planning document and / or planning process. . In addition, the program must demonstrate that data is collected routinely, and from multiple sources to identify patterns and trends, so as to inform its future planning and strategic decision-making. The program must describe how planning at the program level is part of larger strategic plans for the unit, college and university.

2016 Analysis/Review: Instructions to the team: write a brief summary of the program's learning culture based on material provided in the APR and information gathered during the visit. Limit: ½ page.

I.1.6 Assessment

A. Program Self-Assessment Procedures: The program must demonstrate that it regularly assesses the following:

- How well the program is progressing towards its mission and stated objectives.
- Progress against its defined multi-year objectives.
- Progress in addressing deficiencies and causes of concern identified at the time of the last visit.
- Strengths, challenges and opportunities faced by the program while continuously improving learning opportunities.

The program must also demonstrate that results of self-assessments are regularly used to advise and encourage changes and adjustments to promote student success.

B. Curricular Assessment and Development: The program must demonstrate a well-reasoned process for curricular assessment and adjustments and must identify the roles and responsibilities of the personnel and committees involved in setting curricular agendas and initiatives including the curriculum committee, program coordinators, and department chairs or directors.

2016 Analysis/Review: Instructions to the team: write a brief summary of the program's learning culture based on material provided in the APR and information gathered during the visit. Limit: ½ page.

PART ONE (I): SECTION 2 – RESOURCES

I.2.1 Human Resources & Human Resource Development:

The program must demonstrate that it has appropriate human resources to support student learning and achievement. This includes full and part-time instructional faculty, administrative leadership, and technical, administrative, and other support staff.

- The program must demonstrate that it balances the workloads of all faculty to support a tutorial exchange between the student and teacher that promotes student achievement
- The program must demonstrate that an Intern Development Program (IDP) Educator Coordinator has been appointed, is trained in the issues of IDP, has regular communication with students, is fulfilling the requirements as outlined in the IDP Educator Coordinator position description and, regularly attends IDP Coordinator training and development programs.
- The program must demonstrate that faculty and staff have opportunities to pursue professional development that contributes to program improvement.
- The program must describe the support services available to students in the program, including but not limited to academic and personal advising, career guidance, and internship or job placement.

[ ] Demonstrated

[ ] Not Demonstrated

2016 Team Assessment: [NOTE: This commentary/assessment must identify the evidence or the source of the evidence the team used to make the assessment.]

I.2.2 Physical Resources: The program must describe the physical resources available and how they support the pedagogical approach and student achievement.

Physical resources include, but are not limited to the following:

- Space to support and encourage studio-based learning.
- Space to support and encourage didactic and interactive learning including labs, shops, and equipment.
- Space to support and encourage the full range of faculty roles and responsibilities including preparation for teaching, research, mentoring, and student advising.
- Information resources to support all learning formats and pedagogies in use by the program.

If the program's pedagogy does not require some or all of the above physical resources, for example, if online course delivery is employed to complement or supplement onsite learning, then the program must describe the effect (if any) that online, onsite, or hybrid formats have on digital and physical resources.

[ ] Described

[ ] Not Described

2016 Team Assessment: [NOTE: This commentary/assessment must identify the evidence or the source of the evidence the team used to make the assessment.]

I.2.3 Financial Resources: The program must demonstrate that it has appropriate financial resources to support student learning and achievement.

[ ] Demonstrated

[ ] Not Demonstrated

2016 Team Assessment: [NOTE: This commentary/assessment must identify the evidence or the source of the evidence the team used to make the assessment.]

I.2.4 Information Resources: The program must demonstrate that all students, faculty, and staff have convenient, equitable access to literature and information, as well as appropriate visual, and digital resources that support professional education in the field of architecture.

Further, the program must demonstrate that all students, faculty, and staff have access to architectural librarians and visual resource professionals who provide information services that teach and develop the research, evaluative, and critical thinking skills necessary for professional practice and lifelong learning.

[ ] Demonstrated

[ ] Not Demonstrated

2016 Team Assessment: [NOTE: This commentary/assessment must identify the evidence or the source of the evidence the team used to make the assessment.]

I.2.5 Administrative Structure & Governance:

- **Administrative Structure:** The program must describe its administrative structure, and identify key personnel, within the context of the program and school, college and institution.
- **Governance**: The program must describe the role of faculty, staff, and students in both program and institutional governance structures. The program must describe the relationship of these structures to the governance structures of the academic unit and the institution.

[ ] Described

[ ] Not Described

2016 Team Assessment: [NOTE: This commentary/assessment must identify the evidence or the source of the evidence the team used to make the assessment.]

CONDITIONS FOR ACCREDITATION

PART TWO (II): EDUCATIONAL OUTCOMES AND CURRICULUM

This part has four sections that address the following:

- **STUDENT PERFORMANCE**. This section includes the Student Performance Criteria (SPC). Programs must demonstrate that graduates are learning at the level of achievement defined for each of the SPC listed in this part. Compliance will be evaluated through the review of student work
- **CURRICULAR FRAMEWORK**. This section addresses the program and institution relative to regional accreditation, degree nomenclature, credit hour requirements, general education and access to optional studies.
- **EVALUATION OF PREPARATORY EDUCATION**. The NAAB recognizes that students entering an accredited program from a preprofessional program and those entering an accredited program from a non-preprofessional degree program have different needs, aptitudes and knowledge bases. In this section, programs will be required to demonstrate the process by which incoming students are evaluated and to document that the SPC expected to have been met in educational experiences in non-accredited programs have indeed been met.
- **PUBLIC INFORMATION**. The NAAB expects accredited degree programs to provide information to the public regarding accreditation activities and the relationship between the program and the NAAB, admissions and advising, and career information, as well as accurate public information concerning the accredited and non-accredited architecture programs.

Programs demonstrate their compliance with Part Two in four ways:

- A narrative report that briefly responds to each request to “describe, document, or demonstrate.”
- A review of evidence and artifacts by the visiting team, as well as through interviews and observations conducted during the visit.
- A review of student work that demonstrates student achievement of the SPC at the required level of learning.
- A review of websites, links, and other materials.

PART TWO (II): EDUCATIONAL OUTCOMES AND CURRICULUM

PART TWO (II): SECTION 1 – STUDENT PERFORMANCE -- EDUCATIONAL REALMS & STUDENT PERFORMANCE CRITERIA

II.1.1 Student Performance Criteria: The SPC are organized into realms to more easily understand the relationships between individual criteria.

Instructions to the team:

1. *When an SPC is MET, the team is required to identify the course or courses where evidence of student accomplishment was found.*
2. *If an SPC is NOT MET, the team must include a narrative that indicates the reasoning behind the team's assessment.*
3. *After completing the VTR, the team must prepare an SPC matrix (using a blank provided by the program) that identifies the courses in which the team found the evidence of student achievement. The team's matrix is to be appended to the VTR as Appendix 2.*

Realm A: Critical Thinking and Representation: Graduates from NAAB-accredited programs must be able to build abstract relationships and understand the impact of ideas based on the research and analysis of multiple theoretical, social, political, economic, cultural and environmental contexts. This includes using a diverse range of media to think about and convey architectural ideas including writing, investigative skills, speaking, drawing and model making.

Student learning aspirations for this realm include:

- Being broadly educated.
- Valuing lifelong inquisitiveness.
- Communicating graphically in a range of media.
- Assessing evidence.
- Comprehending people, place, and context.
- Recognizing the disparate needs of client, community, and society.

A.1 Professional Communication Skills: *Ability* to write and speak effectively and use appropriate representational media both with peers and with the general public.

[ ] Met

[ ] Not Met

2016 Team Assessment: Evidence of student achievement at the prescribed level was found in work prepared for [couse(s) number(s) and title(s)].

A.2 Design Thinking Skills: *Ability to* raise clear and precise questions, use abstract ideas to interpret information, consider diverse points of view, reach well-reasoned conclusions, and test alternative outcomes against relevant criteria and standards.

[ ] Met

[ ] Not Met

2016 Team Assessment: Evidence of student achievement at the prescribed level was found in work prepared for [couse(s) number(s) and title(s)].

A.3 Investigative Skills : *Ability to* gather, assess, record, and comparatively evaluate relevant information and performance in order to support conclusions related to a specific project or assignment.

[ ] Met

[ ] Not Met

2016 Team Assessment: Evidence of student achievement at the prescribed level was found in work prepared for [couse(s) number(s) and title(s)].

A.4 Architectural Design Skills: *Ability to* effectively use basic formal, organizational and environmental principles and the capacity of each to inform two- and three-dimensional design.

[ ] Met

[ ] Not Met

2016 Team Assessment: Evidence of student achievement at the prescribed level was found in work prepared for [couse(s) number(s) and title(s)].

A.5 Ordering Systems: *Ability to apply* the fundamentals of both natural and formal ordering systems and the capacity of each to inform two- and three-dimensional design.

[ ] Met

[ ] Not Met

2016 Team Assessment: Evidence of student achievement at the prescribed level was found in work prepared for [couse(s) number(s) and title(s)].

A.6 Use of Precedents: *Ability* to examine and comprehend the fundamental principles present in relevant precedents and to make informed choices regarding the incorporation of such principles into architecture and urban design projects.

[ ] Met

[ ] Not Met

2016 Team Assessment: Evidence of student achievement at the prescribed level was found in work prepared for [couse(s) number(s) and title(s)].

A.7 History and Culture: *Understanding* of the parallel and divergent histories of architecture and the cultural norms of a variety of indigenous, vernacular, local, regional, settings in terms of their political, economic, social, and technological factors..

[ ] Met

[ ] Not Met

2016 Team Assessment: Evidence of student achievement at the prescribed level was found in work prepared for [couse(s) number(s) and title(s)].

A.8 Cultural Diversity and Social Equity*: Understanding* of the diverse needs, values, behavioral norms, physical abilities, and social and spatial patterns that characterize different cultures and individuals and the responsibility of the architect to ensure equity of access to buildings and structures.

[ ] Met

[ ] Not Met

2016 Team Assessment: Evidence of student achievement at the prescribed level was found in work prepared for [couse(s) number(s) and title(s)].

Realm A. General Team Commentary: [The team must provide a brief narrative that describes the overall review of student achievement in all elements of Realm D.]

Realm B: Building Practices, Technical Skills and Knowledge: Graduates from NAAB-accredited programs must be able to comprehend the technical aspects of design, systems and materials, and be able to apply that comprehension to architectural solutions. Additionally the impact of such decisions on the environment must be well considered.

Student learning aspirations for this realm include:

- Creating building designs with well-integrated systems.
- Comprehending constructability.
- Integrating the principles of environmental stewardship.
- Conveying technical information accurately

B.1 Pre-Design: *Ability* to prepare a comprehensive program for an architectural project, which must include an assessment of client and user needs, an inventory of spaces and their requirements, an analysis of site conditions (including existing buildings), a review of the relevant building codes and standards, including relevant sustainability requirements, and assessment of their implications for the project, and a definition of site selection and design assessment criteria.

[ ] Met

[ ] Not Met

2016 Team Assessment: Evidence of student achievement at the prescribed level was found in work prepared for [couse(s) number(s) and title(s)].

B.2 Site Design: *Ability* to respond to site characteristics including urban context and developmental patterning, historical fabric, soil, topography, climate, building orientation, and watershed in the development of a project design.

[ ] Met

[ ] Not Met

2016 Team Assessment: Evidence of student achievement at the prescribed level was found in work prepared for [couse(s) number(s) and title(s)].

B.3. Codes and Regulations: *Ability* to design sites, facilities and systems consistent with the principles of life-safety standards, accessibility standards, and other codes and regulations.

[ ] Met

[ ] Not Met

2016 Team Assessment: Evidence of student achievement at the prescribed level was found in work prepared for [couse(s) number(s) and title(s)].

B.4 Technical Documentation: *Ability* to make technically clear drawings, prepare outline specifications, and construct models illustrating and identifying the assembly of materials, systems, and components appropriate for a building design.

[ ] Met

[ ] Not Met

2016 Team Assessment: Evidence of student achievement at the prescribed level was found in work prepared for [couse(s) number(s) and title(s)].

B.5 Structural Systems: *Ability to demonstrate* the basic principles of structural systems and their ability to withstand gravity, seismic, and lateral forces, as well as the selection and application of the appropriate structural system."

[ ] Met

[ ] Not Met

2016 Team Assessment: Evidence of student achievement at the prescribed level was found in work prepared for [couse(s) number(s) and title(s)].

B.6 Environmental Systems: *Understanding* the principles of environmental systems' design, how systems can vary by geographic region, and the tools used for performance assessment. This must include active and passive heating and cooling, indoor air quality, solar systems, lighting systems, and acoustics.

[ ] Met

[ ] Not Met

2016 Team Assessment: Evidence of student achievement at the prescribed level was found in work prepared for [couse(s) number(s) and title(s)].

B.7 Building Envelope Systems and Assemblies: *Understanding* of the basic principles involved in the appropriate selection and application of building envelope systems relative to fundamental performance, aesthetics, moisture transfer, durability, and energy and material resources.

[ ] Met

[ ] Not Met

2016 Team Assessment: Evidence of student achievement at the prescribed level was found in work prepared for [couse(s) number(s) and title(s)].

B.8 Building Materials and Assemblies: *Understanding* of the basic principles utilized in the appropriate selection of interior and exterior construction materials, finishes, products, components and assemblies based on their inherent performance including environmental impact and reuse.

[ ] Met

[ ] Not Met

2016 Team Assessment: Evidence of student achievement at the prescribed level was found in work prepared for [couse(s) number(s) and title(s)].

B.9 Building Service Systems: *Understanding* of the basic principles and appropriate application and performance of building service systems including mechanical, plumbing, electrical, communication, vertical transportation security, and fire protection systems.

[ ] Met

[ ] Not Met

2016 Team Assessment: Evidence of student achievement at the prescribed level was found in work prepared for [couse(s) number(s) and title(s)].

B.10 Financial Considerations: *Understanding* of the fundamentals of building costs, which must include project financing methods and feasibility, construction cost estimating, construction scheduling, operational costs, and life-cycle costs.

[ ] Met

[ ] Not Met

2016 Team Assessment: Evidence of student achievement at the prescribed level was found in work prepared for [couse(s) number(s) and title(s)].

Realm B. General Team Commentary: [The team must provide a brief narrative that describes the overall review of student achievement in all elements of Realm D.]

Realm C: Integrated Architectural Solutions: Graduates from NAAB-accredited programs must be able to synthesize a wide range of variables into an integrated design solution. This realm demonstrates the integrative thinking that shapes complex design and technical solutions.

Student learning aspirations in this realm include:

- Synthesizing variables from diverse and complex systems into an integrated architectural solution.
- Respond to environmental stewardship goals across multiple systems for an integrated solution.
- Evaluating options and reconciling the implications of design decisions across systems and scales.

C.1 Integrative Design: *Ability* to make design decisions within a complex architectural project while demonstrating broad integration and consideration of environmental stewardship, technical documentation, accessibility, site conditions, life safety, environmental systems, structural systems, and building envelope systems and assemblies.

[ ] Met

[ ] Not Met

2016 Team Assessment: Evidence of student achievement at the prescribed level was found in work prepared for [couse(s) number(s) and title(s)].

C.2 Evaluation and Decision Making: *Ability* to demonstrate the skills associated with making integrated decisions across multiple systems and variables in the completion of a design project. This includes problem identification, setting evaluative criteria, analyzing solutions, and predicting the effectiveness of implementation.

[ ] Met

[ ] Not Met

2016 Team Assessment: Evidence of student achievement at the prescribed level was found in work prepared for [couse(s) number(s) and title(s)].

Realm C. General Team Commentary: [The team must provide a brief narrative that describes the overall review of student achievement in all elements of Realm D.]

Realm D: Professional Practice. Graduates from NAAB-accredited programs must understand business principles for the practice of architecture, including management, advocacy, and acting legally, ethically and critically for the good of the client, society and the public.

Student learning aspirations for this realm include:

- Comprehending the business of architecture and construction..
- Discerning the valuable roles and key players in related disciplines.

- Understanding a professional code of ethics, as well as legal and professional responsibilities.

D.1 Stakeholder Roles In Architecture: *Understanding* of the relationship between the client, contractor, architect and other key stakeholders such as user groups and the community, in the design of the built environment. Understanding the responsibilities of the architect to reconcile the needs of those stakeholders

[ ] Met

[ ] Not Met

2016 Team Assessment: Evidence of student achievement at the prescribed level was found in work prepared for [couse(s) number(s) and title(s)].

D.2 Project Management: *Understanding* of the methods for selecting consultants and assembling teams, identifying work plans, project schedules and time requirements, and recommending project delivery methods.

[ ] Met

[ ] Not Met

2016 Team Assessment: Evidence of student achievement at the prescribed level was found in work prepared for [couse(s) number(s) and title(s)].

D.3 Business Practices: *Understanding* of the basic principles of business practices within the firm including financial management and business planning, marketing, business organization, and entrepreneurialism.

[ ] Met

[ ] Not Met

2016 Team Assessment: Evidence of student achievement at the prescribed level was found in work prepared for [couse(s) number(s) and title(s)].

D.5 Legal Responsibilities: *Understanding* the architect's responsibility to the public and the client as determined by regulations and legal considerations involving the practice of architecture and professional service contracts.

[ ] Met

[ ] Not Met

2016 Team Assessment: Evidence of student achievement at the prescribed level was found in work prepared for [couse(s) number(s) and title(s)].

D.6 Professional Ethics: *Understanding* of the ethical issues involved in the exercise of professional judgment in architectural design and practice, and understanding the role of the AIA Code of Ethics in defining professional conduct.

[ ] Met

[ ] Not Met

2016 Team Assessment: Evidence of student achievement at the prescribed level was found in work prepared for [couse(s) number(s) and title(s)].

Realm D. General Team Commentary: [The team must provide a brief narrative that describes the overall review of student achievement in all elements of Realm D.]

PART TWO (II): SECTION 2 – CURRICULAR FRAMEWORK

II.2.1 Institutional Accreditation:

In order for a professional degree program in architecture to be accredited by the NAAB, the institution must meet one of the following criteria:

1. The institution offering the accredited degree program must be or be part of an institution accredited by one of the following U.S. regional institutional accrediting agencies for higher education: the Southern Association of Colleges and Schools (SACS); the Middle States Association of Colleges and Schools (MSACS); the New England Association of Schools and Colleges (NEASC); the North Central Association of Colleges and Schools (NCACS); the Northwest Commission on Colleges and Universities (NWCCU); and the Western Association of Schools and Colleges (WASC);
2. Institutions located outside the U.S. and not accredited by a U.S. regional accrediting agency, may request NAAB accreditation of a professional degree program in architecture only with explicit, written permission from all applicable national education authorities in that program's country or region. Such agencies must have a system of institutional quality assurance and review. Any institution in this category that is interested in seeking NAAB accreditation of a professional degree program in architecture must contact the NAAB for additional information.

[ ] Met

[ ] Not Met

2016 Team Assessment: [NOTE: This commentary/assessment must identify the evidence or the source of the evidence the team used to make the assessment.]

II.2.2 Professional Degrees and Curriculum: The NAAB accredits the following professional degree programs with the following titles: the Bachelor of Architecture (B. Arch.), the Master of Architecture (M. Arch.), and the Doctor of Architecture (D. Arch.). The curricular requirements for awarding these degrees must include professional studies, general studies, and optional studies.

The B. Arch., M. Arch., and/or D. Arch. are titles used exclusively with NAAB-accredited professional degree programs.

Any institution that uses the degree title B. Arch., M. Arch, or D. Arch. for a non-accredited degree program must change the title. Programs must initiate the appropriate institutional processes for changing the titles of these non-accredited programs by June 30, 2018.

The number of credit hours for each degree is specified in the *Conditions*. Every accredited program must conform to the minimum credit hour requirements.

[ ] Met

[ ] Not Met

2016 Team Assessment: [NOTE: This commentary/assessment must identify the evidence or the source of the evidence the team used to make the assessment.]

PART TWO (II): SECTION 3 – EVALUATION OF PREPARATORY EDUCATION

The program must demonstrate that it has a thorough and equitable process to evaluate the preparatory or preprofessional education of individuals admitted to the NAAB-accredited degree program.

- Programs must document their processes for evaluating a student's prior academic coursework related to satisfying NAAB student performance criteria when a student is admitted to the professional degree program.
- In the event a program relies on the preparatory educational experience to ensure that admitted students have met certain SPC, the program must demonstrate it has established standards for ensuring these SPC are met and for determining whether any gaps exist.
- The program must demonstrate that the evaluation of baccalaureate degree or associate degree content is clearly articulated in the admissions process, and that the evaluation process and its implications for the length of professional degree program can be understood by a candidate prior to accepting the offer of admission. See also, Condition II.4.6.

[ ] Met

[ ] Not Met

2016 Team Assessment: [NOTE: This commentary/assessment must identify the evidence or the source of the evidence the team used to make the assessment.]

PART TWO (II): SECTION 4 – PUBLIC INFORMATION

The NAAB expects programs to be transparent and accountable in the information provided to students, faculty, and the general public. As a result, the following seven conditions require all NAAB-accredited programs to make certain information publicly available online. .

[ ] Met

[ ] Not Met

2016 Team Assessment: [NOTE: This commentary/assessment must identify the evidence or the source of the evidence the team used to make the assessment.]

II.4.1 Statement on NAAB-Accredited Degrees

All institutions offering a NAAB-accredited degree program or any candidacy program must include the *exact language* found in the *NAAB Conditions for Accreditation*, Appendix 1 in catalogs and promotional media.

[ ] Met

[ ] Not Met

2016 Team Assessment: [NOTE: This commentary/assessment must identify the evidence or the source of the evidence the team used to make the assessment.]

II.4.2 Access to NAAB Conditions and Procedures

The program must make the following documents electronically available to all students, faculty and the public:

The 2014 NAAB Conditions for Accreditation

The Conditions for Accreditation in effect at the time of the last visit (2009 or 2004 depending on the date of the last visit)

The NAAB Procedures for Accreditation (edition currently in effect)

[ ] Met

[ ] Not Met

2016 Team Assessment: [NOTE: This commentary/assessment must identify the evidence or the source of the evidence the team used to make the assessment.]

II.4.3 Access to Career Development Information

The program must demonstrate that students and graduates have access to career development and placement services that assist them in developing, evaluating, and implementing career, education, and employment plans.

[ ] Met

[ ] Not Met

2016 Team Assessment: [NOTE: This commentary/assessment must identify the evidence or the source of the evidence the team used to make the assessment.]

II.4.4 Public Access to APRs and VTRs

In order to promote transparency in the process of accreditation in architecture education, the program is required to make the following documents electronically available to the public:

- All Interim Progress Reports (and narrative, Annual Reports submitted 2009-2012)

- All NAAB responses to Interim Progress Reports (and NAAB Responses to narrative Annual Reports submitted 2009-2012)
- The most recent decision letter from the NAAB
- The most recent *APR*[1]
- The final edition of the most recent *Visiting Team Report*, including attachments and addenda

[ ] Met

[ ] Not Met

2016 Team Assessment: [NOTE: This commentary/assessment must identify the evidence or the source of the evidence the team used to make the assessment.]

II.4.5 ARE Pass Rates

NCARB publishes pass rates for each section of the Architect Registration Examination by institution. This information is considered useful to prospective students as part of their planning for higher/post-secondary education in architecture. Therefore, programs are required to make this information available to current and prospective students and the public by linking their websites to the results.

[ ] Met

[ ] Not Met

2016 Team Assessment: [NOTE: This commentary/assessment must identify the evidence or the source of the evidence the team used to make the assessment.]

II.4.6. Admissions and Advising

The program must publicly document all policies and procedures that govern how applicants to the accredited program are evaluated for admission. These procedures must include first-time, first-year students as well as transfers within and outside the institution.

This documentation must include the following:

- Application forms and instructions
- Admissions requirements, admissions decisions procedures, including policies and processes for evaluation of transcripts and portfolios (where required), and decisions regarding remediation, and advanced standing
- Forms and process for the evaluation of pre-professional degree content
- Requirements and forms for applying for financial aid and scholarships
- Student diversity initiatives.

[ ] Met

[ ] Not Met

2016 Team Assessment: [NOTE: This commentary/assessment must identify the evidence or the source of the evidence the team used to make the assessment.]

II.4.7 Student Financial Information

- The program must demonstrate that students have access to information and advice for making decisions regarding financial aid.

[1] This is understood to be the APR from the previous visit, not the APR for the visit currently in process.

- The program must demonstrate that students have access to an initial estimate for all tuition, fees, books, general supplies, and specialized materials that may be required during the full course of study for completing the NAAB-accredited degree program.

[ ] Met

[ ] Not Met

2016 Team Assessment: [NOTE: This commentary/assessment must identify the evidence or the source of the evidence the team used to make the assessment.]

PART THREE (III): – ANNUAL AND INTERIM REPORTS

III.1 Annual Statistical Reports: The program is required to submit annual statistical reports in the format required by the NAAB Procedures.

The program must certify that all statistical data it submits to NAAB has been verified by the institution and is consistent with institutional reports to national and regional agencies, including the Integrated Postsecondary Education Data System of the National Center for Education Statistics.

[ ] Met

[ ] Not Met

2016 Team Assessment: [NOTE: This commentary/assessment must identify the evidence or the source of the evidence the team used to make the assessment.]

III.2 Interim Progress Reports. The program must submit interim progress reports to the NAAB (See Section 11, *NAAB Procedures for Accreditation,* 2012 Edition, Amended*).*
[ ] Met

[ ] Not Met

2016 Team Assessment: [NOTE: This commentary/assessment must identify the evidence or the source of the evidence the team used to make the assessment.]

IV. Appendices:

Appendix 1. Conditions Met with Distinction

(list number and title; include comments that describe the basis for the team's assessment)

Appendix 2. Team SPC Matrix

The team is required to complete an SPC matrix that identifies the course(s) in which student work demonstrated the program's compliance with Part II. Section 1.

The program is required to provide the team with a blank matrix that identifies courses by number and title on the y axis and the NAAB SPC on the x axis. This matrix is to be completed in Excel and converted to Adobe PDF and the added to the final VTR.

Appendix 3. The Visiting Team

Team Chair, Educator
Norma Slarkek, FAIA
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Practitioner
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Nonvoting team member
Jane Doe
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V. Report Signatures

Respectfully Submitted,

Norma Sklarek, FAIA **Team Chair**	**Educator**
Frank Lloyd Wright, AIA **Team member**	**Practitioner**
Mary Louise Bethune, Assoc. AIA, LEED AP **Team member**	**Student**
Jane Doe **Team Member**	**Nonvoting team member**

Confidential Recommendation

Upon consideration of the terms of accreditation in Section 3 of the *2015 NAAB Procedures for Accreditation*, including an assessment of compliance with the *2014 NAAB Conditions for Accreditation*, the team unanimously recommends to the NAAB Directors:

Institution, Academic/Administrative Unit:

Degree Title (include prerequisites and number of credits required):

- ☐ Eight-year term of accreditation
- ☐ Four-year term of accreditation
- ☐ Two-year probationary term of accreditation
- ☐ Revocation of accreditation
- ☐ Initial candidacy
- ☐ Continuation of Candidacy
- ☐ Initial Accreditation (three years beginning January 1 of the year in which the visit took place)

Norma Sklarek, FAIA
Team Chair

Frank Lloyd Wright, AIA
Team member

Thomas Jefferson, AIA
Team member

Mary Louise Bethune, Assoc. AIA
Team member

Name of University
School of Architecture

2016 Visiting Team Report (Initial or Continuation of Candidacy)

B. Arch

M. Arch

The National Architectural Accrediting Board
Date of Visit

Vision: The NAAB aspires to be the leader in establishing educational quality assurance standards to enhance the value, relevance, and effectiveness of the architectural profession.

Mission: The NAAB develops and maintains a system of accreditation in professional architecture education that is responsive to the needs of society and allows institutions with varying resources and circumstances to evolve according to their individual needs.

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I. Summary of Visit

a. Acknowledgements and Observations

b. Conditions Not Achieved (list number and title)

Not Met	Not Yet Met	In Progress	Not Applicable

II. Progress on the Plan for Achieving Initial Accreditation

III. Progress Since the Previous Site Visit

2004/9 Condition/Criterion [quoted in full] [NOTE: This section will be completed by the NAAB staff for each visit]

Previous Team Report (2010):

Previous FE Team Report (2013):

2016 Visiting Team Assessment:

III. Compliance (or Plans for Compliance) with the Conditions for Accreditation

PART ONE (I): INSTITUTIONAL SUPPORT AND COMMITMENT TO CONTINUOUS IMPROVEMENT

This part addresses the commitment of the institution, its faculty, staff, and students to the development and evolution of the program over time.

PART ONE (I): SECTION 1 – IDENTITY & SELF-ASSESSMENT

I.1.1 History and Mission: The program must describe its history, mission and culture and how that history, mission, and culture shape the program's pedagogy and development.

- Programs that exist within a larger educational institution must also describe the history and mission of the institution and how that shapes or influences the program.
- The program must describe its active role and relationship within its academic context and university community. This includes the program's benefits to the institutional setting, and how the program as a unit and/or individual faculty members participate in university-wide initiatives and the university's academic plan. This also includes how the program as a unit develops multi-disciplinary relationships and leverage opportunities that are uniquely defined within the university and its local context in the surrounding community.

2016 Analysis/Review: Instructions to the team: write a brief summary of the program's history and mission based on material provided in the APR and information gathered during the visit. Limit: ½ page.

I.1.2 Learning Culture: The program must demonstrate that it provides a positive and respectful learning environment that encourages optimism, respect, sharing, engagement, and innovation between and among the members of its faculty, student body, administration, and staff in all learning environments both traditional and non-traditional.

- The program must have adopted a written studio culture policy that also includes a plan for its implementation, including dissemination to all members of the learning community, regular evaluation, and continuous improvement or revision. In addition to the matters identified above, the plan must address the values of time management, general health and well-being, work-school-life balance, and professional conduct.
- The program must describe the ways in which students and faculty are encouraged to learn both inside and outside the classroom through individual and collective learning opportunities that include, but are not limited to field trips, participation in professional societies and organizations, honor societies, and other program-specific or campus-wide and community-wide activities.

2016 Analysis/Review: Instructions to the team: write a brief summary of the program's learning culture based on material provided in the APR and information gathered during the visit. Limit: ½ page.

I.1.3 Social Equity: The program must have a policy on diversity and inclusion that is communicated to current and prospective faculty, students, and staff and is reflected in the distribution of the program's human, physical, and financial resources.

- The program must describe its plan for maintaining or increasing the diversity of its faculty, staff, and students as compared with the diversity of the faculty, staff, and students of the institution during the next two accreditation cycles.
- The program must document that institutional, college or program-level policies are in place to further Equal Employment Opportunity/Affirmative Action (EEO/AA), as well as any other diversity initiatives at the program, college or institutional-level.

2016 Analysis/Review: Instructions to the team: write a brief summary of the program's learning culture based on material provided in the APR and information gathered during the visit. Limit: ½ page.

2016 Team Assessment: [NOTE: This commentary/assessment must identify the evidence or the source of the evidence the team used to make the assessment.]

I.1.4 Defining Perspectives: The program must describe how it is responsive to the following perspectives or forces that impact the education and development of professional architects. . Each program is expected to address these perspectives consistently and to further identify, as part of its long-range planning activities, how these perspectives will continue to be addressed in the future.

A. **Collaboration and Leadership**. The program must describe its culture for successful individual and team dynamics, collaborative experiences and opportunities for leadership roles. Architects serve clients and the public, engage allied disciplines and professional colleagues, and rely on a spectrum of collaborative skills to work successfully across diverse groups and stakeholders.

B. **Design**. The program must describe its approach for developing graduates with an understanding of design as a multi-dimensional protocol for both problem resolution and the discovery of new opportunities that will create value. Graduates should be prepared to engage in design activity as a multi-stage process aimed to address increasingly complex problems, engage a diverse constituency, and provide value and an improved future.

C. **Professional Opportunity.** The program must describe its approach for educating students on the breadth of professional opportunity and career paths for architects in both traditional and non-traditional settings; in local and global communities.

D. **Stewardship of the Environment**. The program must describe its approach for developing graduates who are prepared to both understand and take responsibility for stewardship of the environmental and the natural resources that are significantly compromised by the act of building and constructed human settlements.

E. **Community and Social Responsibility**. The program must describe its approach to developing graduates who are prepared to be active, engaged citizens able to understand what it means to be a professional member of society and to act on that understanding. The social responsibility of architects lies in part in the belief that architects can create better places, and further that architectural design can create a civilized place by making communities more livable. A program's response to social responsibility must include nurturing a calling to civic engagement to positively influence the development, conservation or changes to the built and natural environment

2016 Analysis/Review: Instructions to the team: write a brief summary of the program's learning culture based on material provided in the APR and information gathered during the visit. Limit: ½ page.

I.1.5 Long-Range Planning: The program must demonstrate that it has identified multi-year objectives for continuous improvement with a ratified planning document and / or planning process. . In addition, the program must demonstrate that data is collected routinely, and from multiple sources to identify patterns and trends, so as to inform its future planning and strategic decision-making. The program must describe how planning at the program level is part of larger strategic plans for the unit, college and university.

2016 Analysis/Review: Instructions to the team: write a brief summary of the program's learning culture based on material provided in the APR and information gathered during the visit. Limit: ½ page.

I.1.6 Assessment

A. Program Self-Assessment Procedures: The program must demonstrate that it regularly assesses the following:

- How well the program is progressing towards its mission and stated objectives.
- Progress against its defined multi-year objectives.
- Progress in addressing deficiencies and causes of concern identified at the time of the last visit.
- Strengths, challenges and opportunities faced by the program while continuously improving learning opportunities.

The program must also demonstrate that results of self-assessments are regularly used to advise and encourage changes and adjustments to promote student success.

B. Curricular Assessment and Development: The program must demonstrate a well-reasoned process for curricular assessment and adjustments and must identify the roles and responsibilities of the personnel and committees involved in setting curricular agendas and initiatives including the curriculum committee, program coordinators, and department chairs or directors.

2016 Analysis/Review: Instructions to the team: write a brief summary of the program's learning culture based on material provided in the APR and information gathered during the visit. Limit: ½ page.

PART ONE (I): SECTION 2 – RESOURCES

I.2.1 Human Resources & Human Resource Development:

The program must demonstrate that it has appropriate human resources to support student learning and achievement. This includes full and part-time instructional faculty, administrative leadership, and technical, administrative, and other support staff.

- The program must demonstrate that it balances the workloads of all faculty to support a tutorial exchange between the student and teacher that promotes student achievement
- The program must demonstrate that an Intern Development Program (IDP) Educator Coordinator has been appointed, is trained in the issues of IDP, has regular communication with students, is fulfilling the requirements as outlined in the IDP Educator Coordinator position description and, regularly attends IDP Coordinator training and development programs.
- The program must demonstrate that faculty and staff have opportunities to pursue professional development that contributes to program improvement.
- The program must describe the support services available to students in the program, including but not limited to academic and personal advising, career guidance, and internship or job placement.

[ ] Demonstrated

[ ] Not Demonstrated

[ ] In Progress

2016 Team Assessment: [NOTE: This commentary/assessment must identify the evidence or the source of the evidence the team used to make the assessment.]

I.2.2 Physical Resources: The program must describe the physical resources available and how they support the pedagogical approach and student achievement.

Physical resources include, but are not limited to the following:

- Space to support and encourage studio-based learning.
- Space to support and encourage didactic and interactive learning including labs, shops, and equipment.
- Space to support and encourage the full range of faculty roles and responsibilities including preparation for teaching, research, mentoring, and student advising.
- Information resources to support all learning formats and pedagogies in use by the program.

If the program's pedagogy does not require some or all of the above physical resources, for example, if online course delivery is employed to complement or supplement onsite learning, then the program must describe the effect (if any) that online, onsite, or hybrid formats have on digital and physical resources.

[ ] Demonstrated

[ ] Not Demonstrated

[ ] In Progress

2016 Team Assessment: [NOTE: This commentary/assessment must identify the evidence or the source of the evidence the team used to make the assessment.]

I.2.3 Financial Resources: The program must demonstrate that it has appropriate financial resources to support student learning and achievement.

[ ] Demonstrated

[ ] Not Demonstrated

[ ] In Progress

2016 Team Assessment: [NOTE: This commentary/assessment must identify the evidence or the source of the evidence the team used to make the assessment.]

I.2.4 Information Resources: The program must demonstrate that all students, faculty, and staff have convenient, equitable access to literature and information, as well as appropriate visual, and digital resources that support professional education in the field of architecture.

Further, the program must demonstrate that all students, faculty, and staff have access to architectural librarians and visual resource professionals who provide information services that teach and develop the research, evaluative, and critical thinking skills necessary for professional practice and lifelong learning.

[ ] Demonstrated

[ ] Not Demonstrated

[ ] In Progress

2016 Team Assessment: [NOTE: This commentary/assessment must identify the evidence or the source of the evidence the team used to make the assessment.]

I.2.5 Administrative Structure & Governance:

- **Administrative Structure:** The program must describe its administrative structure, and identify key personnel, within the context of the program and school, college and institution.
- **Governance**: The program must describe the role of faculty, staff, and students in both program and institutional governance structures. The program must describe the relationship of these structures to the governance structures of the academic unit and the institution.

[ ] Demonstrated

[ ] Not Demonstrated

[ ] In Progress

2016 Team Assessment: [NOTE: This commentary/assessment must identify the evidence or the source of the evidence the team used to make the assessment.]

CONDITIONS FOR ACCREDITATION

PART TWO (II): EDUCATIONAL OUTCOMES AND CURRICULUM

This part has four sections that address the following:

- **STUDENT PERFORMANCE**. This section includes the Student Performance Criteria (SPC). Programs must demonstrate that graduates are learning at the level of achievement defined for each of the SPC listed in this part. Compliance will be evaluated through the review of student work
- **CURRICULAR FRAMEWORK**. This section addresses the program and institution relative to regional accreditation, degree nomenclature, credit hour requirements, general education and access to optional studies.
- **EVALUATION OF PREPARATORY EDUCATION**. The NAAB recognizes that students entering an accredited program from a preprofessional program and those entering an accredited program from a non-preprofessional degree program have different needs, aptitudes and knowledge bases. In this section, programs will be required to demonstrate the process by which incoming students are evaluated and to document that the SPC expected to have been met in educational experiences in non-accredited programs have indeed been met.
- **PUBLIC INFORMATION**. The NAAB expects accredited degree programs to provide information to the public regarding accreditation activities and the relationship between the program and the NAAB, admissions and advising, and career information, as well as accurate public information concerning the accredited and non-accredited architecture programs.

Programs demonstrate their compliance with Part Two in four ways:

- A narrative report that briefly responds to each request to “describe, document, or demonstrate.”
- A review of evidence and artifacts by the visiting team, as well as through interviews and observations conducted during the visit.
- A review of student work that demonstrates student achievement of the SPC at the required level of learning.
- A review of websites, links, and other materials.

PART TWO (II): EDUCATIONAL OUTCOMES AND CURRICULUM

PART TWO (II): SECTION 1 – STUDENT PERFORMANCE -- EDUCATIONAL REALMS & STUDENT PERFORMANCE CRITERIA

II.1.1 Student Performance Criteria: The SPC are organized into realms to more easily understand the relationships between individual criteria.

Instructions to the team:

1. *When an SPC is MET, the team is required to identify the course or courses where evidence of student accomplishment was found.*
2. *If an SPC is NOT MET, the team must include a narrative that indicates the reasoning behind the team's assessment.*
3. *If an SPC is NOT YET MET, the team must include a brief narrative that incidates that the programs has not yet deliverd the course(s) in which SPC are expected to be met by the time of initial accreditation.*
4. *After completing the VTR, the team must prepare an SPC matrix (using a blank provided by the program) that identifies the courses in which the team found the evidence of student achievement. The team's matrix is to be appended to the VTR as Appendix 2.*

Realm A: Critical Thinking and Representation: Graduates from NAAB-accredited programs must be able to build abstract relationships and understand the impact of ideas based on the research and analysis of multiple theoretical, social, political, economic, cultural and environmental contexts. This includes using a diverse range of media to think about and convey architectural ideas including writing, investigative skills, speaking, drawing and model making.

Student learning aspirations for this realm include:

- Being broadly educated.
- Valuing lifelong inquisitiveness.
- Communicating graphically in a range of media.
- Assessing evidence.
- Comprehending people, place, and context.
- Recognizing the disparate needs of client, community, and society.

A.1 Professional Communication Skills: *Ability* to write and speak effectively and use appropriate representational media both with peers and with the general public.

[ ] Met

[ ] Not Met

[ ] Not Yet Met

2016 Team Assessment: Evidence of student achievement at the prescribed level was found in work prepared for [couse(s) number(s) and title(s)].

A.2 Design Thinking Skills: *Ability to* raise clear and precise questions, use abstract ideas to interpret information, consider diverse points of view, reach well-reasoned conclusions, and test alternative outcomes against relevant criteria and standards.

[ ] Met

[ ] Not Met

[ ] Not Yet Met

2016 Team Assessment: Evidence of student achievement at the prescribed level was found in work prepared for [couse(s) number(s) and title(s)].

A.3 Investigative Skills : *Ability to* gather, assess, record, and comparatively evaluate relevant information and performance in order to support conclusions related to a specific project or assignment.

[ ] Met

[ ] Not Met

[ ] Not Yet Met

2016 Team Assessment: Evidence of student achievement at the prescribed level was found in work prepared for [couse(s) number(s) and title(s)].

A.4 Architectural Design Skills: *Ability to* effectively use basic formal, organizational and environmental principles and the capacity of each to inform two- and three-dimensional design.

[ ] Met

[ ] Not Met

[ ] Not Yet Met

2016 Team Assessment: Evidence of student achievement at the prescribed level was found in work prepared for [couse(s) number(s) and title(s)].

A.5 Ordering Systems: *Ability to apply* the fundamentals of both natural and formal ordering systems and the capacity of each to inform two- and three-dimensional design.

[ ] Met

[ ] Not Met

[ ] Not Yet Met

2016 Team Assessment: Evidence of student achievement at the prescribed level was found in work prepared for [couse(s) number(s) and title(s)].

A.6 Use of Precedents: *Ability* to examine and comprehend the fundamental principles present in relevant precedents and to make informed choices regarding the incorporation of such principles into architecture and urban design projects.

[ ] Met

[ ] Not Met

[ ] Not Yet Met

2016 Team Assessment: Evidence of student achievement at the prescribed level was found in work prepared for [couse(s) number(s) and title(s)].

A.7 History and Culture: *Understanding* of the parallel and divergent histories of architecture and the cultural norms of a variety of indigenous, vernacular, local, regional, settings in terms of their political, economic, social, and technological factors..

[ ] Met

[ ] Not Met

[ ] Not Yet Met

2016 Team Assessment: Evidence of student achievement at the prescribed level was found in work prepared for [couse(s) number(s) and title(s)].

A.8 Cultural Diversity and Social Equity*: Understanding* of the diverse needs, values, behavioral norms, physical abilities, and social and spatial patterns that characterize different cultures and individuals and the responsibility of the architect to ensure equity of access to buildings and structures.

[ ] Met

[ ] Not Met

[ ] Not Yet Met

2016 Team Assessment: Evidence of student achievement at the prescribed level was found in work prepared for [couse(s) number(s) and title(s)].

Realm A. General Team Commentary: [The team must provide a brief narrative that describes the overall review of student achievement in all elements of Realm D.]

Realm B: Building Practices, Technical Skills and Knowledge: Graduates from NAAB-accredited programs must be able to comprehend the technical aspects of design, systems and materials, and be able to apply that comprehension to architectural solutions. Additionally the impact of such decisions on the environment must be well considered.

Student learning aspirations for this realm include:

- Creating building designs with well-integrated systems.
- Comprehending constructability.
- Integrating the principles of environmental stewardship.
- Conveying technical information accurately

B.1 Pre-Design: *Ability* to prepare a comprehensive program for an architectural project, which must include an assessment of client and user needs, an inventory of spaces and their requirements, an analysis of site conditions (including existing buildings), a review of the relevant building codes and standards, including relevant sustainability requirements, and assessment of their implications for the project, and a definition of site selection and design assessment criteria.

[ ] Met

[ ] Not Met

[ ] Not Yet Met

2016 Team Assessment: Evidence of student achievement at the prescribed level was found in work prepared for [couse(s) number(s) and title(s)].

B.2 Site Design: *Ability* to respond to site characteristics including urban context and developmental patterning, historical fabric, soil, topography, climate, building orientation, and watershed in the development of a project design.

[ ] Met

[ ] Not Met

[ ] Not Yet Met

2016 Team Assessment: Evidence of student achievement at the prescribed level was found in work prepared for [couse(s) number(s) and title(s)].

B.3. Codes and Regulations: *Ability* to design sites, facilities and systems consistent with the principles of life-safety standards, accessibility standards, and other codes and regulations.

[ ] Met

[ ] Not Met

[ ] Not Yet Met

2016 Team Assessment: Evidence of student achievement at the prescribed level was found in work prepared for [couse(s) number(s) and title(s)].

B.4 Technical Documentation: *Ability* to make technically clear drawings, prepare outline specifications, and construct models illustrating and identifying the assembly of materials, systems, and components appropriate for a building design.

[ ] Met

[ ] Not Met

[ ] Not Yet Met

2016 Team Assessment: Evidence of student achievement at the prescribed level was found in work prepared for [couse(s) number(s) and title(s)].

B.5 Structural Systems: *Ability to demonstrate* the basic principles of structural systems and their ability to withstand gravity, seismic, and lateral forces, as well as the selection and application of the appropriate structural system."

[ ] Met

[ ] Not Met

[ ] Not Yet Met

2016 Team Assessment: Evidence of student achievement at the prescribed level was found in work prepared for [couse(s) number(s) and title(s)].

B.6 Environmental Systems: *Understanding* the principles of environmental systems' design, how systems can vary by geographic region, and the tools used for performance assessment. This must include active and passive heating and cooling, indoor air quality, solar systems, lighting systems, and acoustics.

[ ] Met

[ ] Not Met

[ ] Not Yet Met

2016 Team Assessment: Evidence of student achievement at the prescribed level was found in work prepared for [couse(s) number(s) and title(s)].

B.7 Building Envelope Systems and Assemblies: *Understanding* of the basic principles involved in the appropriate selection and application of building envelope systems relative to fundamental performance, aesthetics, moisture transfer, durability, and energy and material resources.

[ ] Met

[ ] Not Met

[ ] Not Yet Met

2016 Team Assessment: Evidence of student achievement at the prescribed level was found in work prepared for [couse(s) number(s) and title(s)].

B.8 Building Materials and Assemblies: *Understanding* of the basic principles utilized in the appropriate selection of interior and exterior construction materials, finishes, products, components and assemblies based on their inherent performance including environmental impact and reuse.

[ ] Met

[ ] Not Met

[ ] Not Yet Met

2016 Team Assessment: Evidence of student achievement at the prescribed level was found in work prepared for [couse(s) number(s) and title(s)].

B.9 Building Service Systems: *Understanding* of the basic principles and appropriate application and performance of building service systems including mechanical, plumbing, electrical, communication, vertical transportation security, and fire protection systems.

[ ] Met

[ ] Not Met

[ ] Not Yet Met

2016 Team Assessment: Evidence of student achievement at the prescribed level was found in work prepared for [couse(s) number(s) and title(s)].

B.10 Financial Considerations: *Understanding* of the fundamentals of building costs, which must include project financing methods and feasibility, construction cost estimating, construction scheduling, operational costs, and life-cycle costs.

[ ] Met

[ ] Not Met

[ ] Not Yet Met

2016 Team Assessment: Evidence of student achievement at the prescribed level was found in work prepared for [couse(s) number(s) and title(s)].

Realm B. General Team Commentary: [The team must provide a brief narrative that describes the overall review of student achievement in all elements of Realm D.]

Realm C: Integrated Architectural Solutions: Graduates from NAAB-accredited programs must be able to synthesize a wide range of variables into an integrated design solution. This realm demonstrates the integrative thinking that shapes complex design and technical solutions.

Student learning aspirations in this realm include:

- Synthesizing variables from diverse and complex systems into an integrated architectural solution.
- Respond to environmental stewardship goals across multiple systems for an integrated solution.
- Evaluating options and reconciling the implications of design decisions across systems and scales.

C.1 Integrative Design: *Ability* to make design decisions within a complex architectural project while demonstrating broad integration and consideration of environmental stewardship, technical documentation, accessibility, site conditions, life safety, environmental systems, structural systems, and building envelope systems and assemblies.

[ ] Met

[ ] Not Met

[ ] Not Yet Met

2016 Team Assessment: Evidence of student achievement at the prescribed level was found in work prepared for [couse(s) number(s) and title(s)].

C.2 Evaluation and Decision Making: *Ability* to demonstrate the skills associated with making integrated decisions across multiple systems and variables in the completion of a design project. This includes problem identification, setting evaluative criteria, analyzing solutions, and predicting the effectiveness of implementation.

[ ] Met

[ ] Not Met

[ ] Not Yet Met

2016 Team Assessment: Evidence of student achievement at the prescribed level was found in work prepared for [couse(s) number(s) and title(s)].

Realm C. General Team Commentary: [The team must provide a brief narrative that describes the overall review of student achievement in all elements of Realm D.]

Realm D: Professional Practice. Graduates from NAAB-accredited programs must understand business principles for the practice of architecture, including management, advocacy, and acting legally, ethically and critically for the good of the client, society and the public.

Student learning aspirations for this realm include:

- Comprehending the business of architecture and construction..
- Discerning the valuable roles and key players in related disciplines.
- Understanding a professional code of ethics, as well as legal and professional responsibilities.

D.1 Stakeholder Roles In Architecture: *Understanding* of the relationship between the client, contractor, architect and other key stakeholders such as user groups and the community, in the design of the built environment. Understanding the responsibilities of the architect to reconcile the needs of those stakeholders

[ ] Met

[ ] Not Met

[ ] Not Yet Met

2016 Team Assessment: Evidence of student achievement at the prescribed level was found in work prepared for [couse(s) number(s) and title(s)].

D.2 Project Management: *Understanding* of the methods for selecting consultants and assembling teams, identifying work plans, project schedules and time requirements, and recommending project delivery methods.

[ ] Met

[ ] Not Met

[ ] Not Yet Met

2016 Team Assessment: Evidence of student achievement at the prescribed level was found in work prepared for [couse(s) number(s) and title(s)].

D.3 Business Practices: *Understanding* of the basic principles of business practices within the firm including financial management and business planning, marketing, business organization, and entrepreneurialism.

[ ] Met

[ ] Not Met

[ ] Not Yet Met

2016 Team Assessment: Evidence of student achievement at the prescribed level was found in work prepared for [couse(s) number(s) and title(s)].

D.5 Legal Responsibilities: *Understanding* the architect's responsibility to the public and the client as determined by regulations and legal considerations involving the practice of architecture and professional service contracts.

[ ] Met

[ ] Not Met

[ ] Not Yet Met

2016 Team Assessment: Evidence of student achievement at the prescribed level was found in work prepared for [couse(s) number(s) and title(s)].

D.6 Professional Ethics: *Understanding* of the ethical issues involved in the exercise of professional judgment in architectural design and practice, and understanding the role of the AIA Code of Ethics in defining professional conduct.

[ ] Met

[ ] Not Met

[ ] Not Yet Met

2016 Team Assessment: Evidence of student achievement at the prescribed level was found in work prepared for [couse(s) number(s) and title(s)].

Realm D. General Team Commentary: [The team must provide a brief narrative that describes the overall review of student achievement in all elements of Realm D.]

PART TWO (II): SECTION 2 – CURRICULAR FRAMEWORK

II.2.1 Institutional Accreditation:

In order for a professional degree program in architecture to be accredited by the NAAB, the institution must meet one of the following criteria:

1. The institution offering the accredited degree program must be or be part of an institution accredited by one of the following U.S. regional institutional accrediting agencies for higher education: the Southern Association of Colleges and Schools (SACS); the Middle States Association of Colleges and Schools (MSACS); the New England Association of Schools and Colleges (NEASC); the North Central Association of Colleges and Schools (NCACS); the Northwest Commission on Colleges and Universities (NWCCU); and the Western Association of Schools and Colleges (WASC);
2. Institutions located outside the U.S. and not accredited by a U.S. regional accrediting agency, may request NAAB accreditation of a professional degree program in architecture only with explicit, written permission from all applicable national education authorities in that program's country or region. Such agencies must have a system of institutional quality assurance and review. Any institution in this category that is interested in seeking NAAB accreditation of a professional degree program in architecture must contact the NAAB for additional information.

[ ] Met

[ ] Not Met

2016 Team Assessment: [NOTE: This commentary/assessment must identify the evidence or the source of the evidence the team used to make the assessment.]

II.2.2 Professional Degrees and Curriculum: The NAAB accredits the following professional degree programs with the following titles: the Bachelor of Architecture (B. Arch.), the Master of Architecture (M. Arch.), and the Doctor of Architecture (D. Arch.). The curricular requirements for awarding these degrees must include professional studies, general studies, and optional studies.

The B. Arch., M. Arch., and/or D. Arch. are titles used exclusively with NAAB-accredited professional degree programs.

Any institution that uses the degree title B. Arch., M. Arch, or D. Arch. for a non-accredited degree program must change the title. Programs must initiate the appropriate institutional processes for changing the titles of these non-accredited programs by June 30, 2018.

The number of credit hours for each degree is specified in the *Conditions*. Every accredited program must conform to the minimum credit hour requirements.

[ ] Met

[ ] Not Met

2016 Team Assessment: [NOTE: This commentary/assessment must identify the evidence or the source of the evidence the team used to make the assessment.]

PART TWO (II): SECTION 3 – EVALUATION OF PREPARATORY EDUCATION

The program must demonstrate that it has a thorough and equitable process to evaluate the preparatory or preprofessional education of individuals admitted to the NAAB-accredited degree program.

- Programs must document their processes for evaluating a student's prior academic coursework related to satisfying NAAB student performance criteria when a student is admitted to the professional degree program.
- In the event a program relies on the preparatory educational experience to ensure that admitted students have met certain SPC, the program must demonstrate it has established standards for ensuring these SPC are met and for determining whether any gaps exist.
- The program must demonstrate that the evaluation of baccalaureate degree or associate degree content is clearly articulated in the admissions process, and that the evaluation process and its implications for the length of professional degree program can be understood by a candidate prior to accepting the offer of admission. See also, Condition II.4.6.

[ ] Met

[ ] Not Met

[ ] In Progress

2016 Team Assessment: [NOTE: This commentary/assessment must identify the evidence or the source of the evidence the team used to make the assessment.]

PART TWO (II): SECTION 4 – PUBLIC INFORMATION

The NAAB expects programs to be transparent and accountable in the information provided to students, faculty, and the general public. As a result, the following seven conditions require all NAAB-accredited programs to make certain information publicly available online. .

II.4.1 Statement on NAAB-Accredited Degrees

All institutions offering a NAAB-accredited degree program or any candidacy program must include the *exact language* found in the *NAAB Conditions for Accreditation*, Appendix 1 in catalogs and promotional media.

[ ] Met

[ ] Not Met

[ ] Not Yet Met

[ ] Not Applicable

2016 Team Assessment: [NOTE: This commentary/assessment must identify the evidence or the source of the evidence the team used to make the assessment.]

II.4.2 Access to NAAB Conditions and Procedures

The program must make the following documents electronically available to all students, faculty and the public:

The 2014 NAAB Conditions for Accreditation

The Conditions for Accreditation in effect at the time of the last visit (2009 or 2004 depending on the date of the last visit)

The NAAB Procedures for Accreditation (edition currently in effect)

[ ] Met

[ ] Not Met

[ ] Not Yet Met

[ ] Not Applicable

2016 Team Assessment: [NOTE: This commentary/assessment must identify the evidence or the source of the evidence the team used to make the assessment.]

II.4.3 Access to Career Development Information

The program must demonstrate that students and graduates have access to career development and placement services that assist them in developing, evaluating, and implementing career, education, and employment plans.

[ ] Met

[ ] Not Met

[ ] Not Yet Met

[ ] Not Applicable

2016 Team Assessment: [NOTE: This commentary/assessment must identify the evidence or the source of the evidence the team used to make the assessment.]

II.4.4 Public Access to APRs and VTRs

In order to promote transparency in the process of accreditation in architecture education, the program is required to make the following documents electronically available to the public:

- All Interim Progress Reports (and narrative, Annual Reports submitted 2009-2012)
- All NAAB responses to Interim Progress Reports (and NAAB Responses to narrative Annual Reports submitted 2009-2012)
- The most recent decision letter from the NAAB
- The most recent *APR*[1]
- The final edition of the most recent *Visiting Team Report*, including attachments and addenda

[ ] Met

[ ] Not Met

[ ] Not Yet Met

[ ] Not Applicable

2016 Team Assessment: [NOTE: This commentary/assessment must identify the evidence or the source of the evidence the team used to make the assessment.]

II.4.5 ARE Pass Rates

NCARB publishes pass rates for each section of the Architect Registration Examination by institution. This information is considered useful to prospective students as part of their planning for higher/post-secondary education in architecture. Therefore, programs are required to make this information available to current and prospective students and the public by linking their websites to the results.

[ ] Met

[ ] Not Met

[ ] Not Yet Met

[ ] Not Applicable

2016 Team Assessment: [NOTE: This commentary/assessment must identify the evidence or the source of the evidence the team used to make the assessment.]

II.4.6. Admissions and Advising

The program must publicly document all policies and procedures that govern how applicants to the accredited program are evaluated for admission. These procedures must include first-time, first-year students as well as transfers within and outside the institution.

This documentation must include the following:

- Application forms and instructions
- Admissions requirements, admissions decisions procedures, including policies and processes for evaluation of transcripts and portfolios (where required), and decisions regarding remediation, and advanced standing
- Forms and process for the evaluation of pre-professional degree content
- Requirements and forms for applying for financial aid and scholarships
- Student diversity initiatives.

[ ] Met

[ ] Not Met

[1] This is understood to be the APR from the previous visit, not the APR for the visit currently in process.

[ ] Not Yet Met

[ ] Not Applicable

2016 Team Assessment: [NOTE: This commentary/assessment must identify the evidence or the source of the evidence the team used to make the assessment.]

II.4.7 Student Financial Information

- The program must demonstrate that students have access to information and advice for making decisions regarding financial aid.
- The program must demonstrate that students have access to an initial estimate for all tuition, fees, books, general supplies, and specialized materials that may be required during the full course of study for completing the NAAB-accredited degree program.

[ ] Met

[ ] Not Met

[ ] Not Yet Met

[ ] Not Applicable

2016 Team Assessment: [NOTE: This commentary/assessment must identify the evidence or the source of the evidence the team used to make the assessment.]

PART THREE (III): – ANNUAL AND INTERIM REPORTS

III.1 Annual Statistical Reports: The program is required to submit annual statistical reports in the format required by the NAAB Procedures.

The program must certify that all statistical data it submits to NAAB has been verified by the institution and is consistent with institutional reports to national and regional agencies, including the Integrated Postsecondary Education Data System of the National Center for Education Statistics.

[ ] Met

[ ] Not Met

2016 Team Assessment: [NOTE: This commentary/assessment must identify the evidence or the source of the evidence the team used to make the assessment.]

III.2 Interim Progress Reports. The program must submit interim progress reports to the NAAB (See Section 11, *NAAB Procedures for Accreditation,* 2012 Edition, Amended*).*
[ ] Met

[ ] Not Met

2016 Team Assessment: [NOTE: This commentary/assessment must identify the evidence or the source of the evidence the team used to make the assessment.]

IV. Appendices:

Appendix 1. Conditions Met with Distinction

(list number and title; include comments that describe the basis for the team's assessment)

Appendix 2. Team SPC Matrix

The team is required to complete an SPC matrix that identifies the course(s) in which student work demonstrated the program's compliance with Part II. Section 1.

The program is required to provide the team with a blank matrix that identifies courses by number and title on the y axis and the NAAB SPC on the x axis. This matrix is to be completed in Excel and converted to Adobe PDF and the added to the final VTR.

Appendix 3. The Visiting Team

Team Chair, Educator
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Nonvoting team member
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V. Report Signatures

Respectfully Submitted,

Norma Sklarek, FAIA **Team Chair**	**Educator**
Frank Lloyd Wright, AIA **Team member**	**Practitioner**
Mary Louise Bethune, Assoc. AIA, LEED AP **Team member**	**Student**
Jane Doe **Team Member**	**Nonvoting team member**

Confidential Recommendation

Upon consideration of the terms of accreditation in Section 3 of the *2015 NAAB Procedures for Accreditation*, including an assessment of compliance with the *2014 NAAB Conditions for Accreditation*, the team unanimously recommends to the NAAB Directors:

Institution, Academic/Administrative Unit:

Degree Title (include prerequisites and number of credits required):

- ☐ Eight-year term of accreditation
- ☐ Four-year term of accreditation
- ☐ Two-year probationary term of accreditation
- ☐ Revocation of accreditation
- ☐ Initial candidacy
- ☐ Continuation of Candidacy
- ☐ Initial Accreditation (three years beginning January 1 of the year in which the visit took place)

Norma Sklarek, FAIA
Team Chair

Frank Lloyd Wright, AIA
Team member

Thomas Jefferson, AIA
Team member

Mary Louise Bethune, Assoc. AIA
Team member

Substantive Change Panel Report - Under Development

Appendix 4. 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 5: Reimbursement Policy

The program is responsible for all expenses for visiting teams. This includes visits for continuing accreditation, eligibility for candidacy, initial candidacy, continuation of candidacy, initial accreditation, and substantive changes.

All programs will be invoiced by the NAAB for all team travel expenses after team members are reimbursed by the NAAB.

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.

The NAAB reimburses each team member for expenses related to a site visit. This includes visits for continuing accreditation, eligibility for candidacy, initial candidacy, continuation of candidacy, initial accreditation, and substantive changes.

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 member. 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 not reimbursed by the NAAB nor invoiced to the program by the NAAB.

Immediately following the visit, team members and NAAB non-voting members must complete a reimbursement form (available online) and submit original receipts for transportation, meals, hotel, and miscellaneous expenses to the NAAB office.

The NAAB will not reimburse team members for alcoholic beverages, personal items, cleaning, laundry, or entertainment.

Reimbursement for air travel is for economy coach class only and only for the dates of the visit; 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 30 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 more than 30 days after a visit ends must be reviewed by the NAAB executive committee before being processed.

When you have filled out the expense reimbursement form, please send it to:

Ms. Ziti Sherman
Director, Finance and Administration
NAAB
zsherman@naab.org
1101 Connecticut Avenue, NW
Suite 410
Washington, DC 20036

Appendix 6. List of Acronyms and Abbreviations

ACSA	Association of Collegiate Schools of Architecture
AIA	The American Institute of Architects
AIAS	The American Institute of Architecture Students
APR	Architecture Program Report
APR-IC	Architecture Program Report for Initial Candidacy
APR-IA	Architecture Program Report for Initial Accreditation
ARE	Architect Registration Examination
FERPA	Federal Educational Records Privacy Act
IDP	Intern Development Program
NAAB	National Architectural Accrediting Board
NCARB	National Council of Architectural Registration Boards
NVTM	Non-voting team member
SPC	Student Performance Criterion or Student Performance Criteria
VTR	Visiting Team Report
VTR-IC	Visiting Team Report for Initial Candidacy
VTR-IA	Visiting Team Report for Initial Accreditation

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