NAAB®

2020 Procedures for Accreditation
The National Architectural Accrediting Board

"Draft 1"
September 9, 2019

The September 9, 2019 "Draft 1" of the NAAB *2020 Procedures for Accreditation* is the result of discussions at the Accreditation Review Forum 2019 (ARForum19) by the Boards of Directors of the 5 collateral organizations (ACSA, AIA, AIAS, NAAB, NCARB) and comments on "Draft 0" received during the 60-day public comment and review period prior to ARForum19. This document is to be read alongside the September 9, 2019 "Draft 1" of the NAAB *2020 Conditions for Accreditation*.

There is a final 75-day public comment and review period beginning on September 9, 2019 and ending on November 22, 2019 at 5:00PM EST.

Please send comments to forum@naab.org with the subject line "2020 Documents."

Preamble

The National Architectural Accrediting Board (NAAB) is both a decision-making and policy-generating body composed of a 13-member Board of Directors. It is an independent, nonprofit corporation designated as tax-exempt under USC 26 § 501(c)(3). The NAAB is the only agency recognized by registration boards in U.S. jurisdictions to accredit professional degree programs in architecture. The NAAB Board of Directors has at least (3) regular meetings per year.

The two major documents which govern accreditation are the NAAB *Conditions for Accreditation* and the NAAB *Procedures for Accreditation.* The *Conditions for Accreditation* define the standards that professional degree programs in architecture are expected to meet. The *2020 Conditions for Accreditation* apply to all programs seeking continued accreditation, initial candidacy, continuation of candidacy, or initial accreditation whose visits occur after January 1, 2022. Schools whose visits are in 2021 have the option to use the *2020 Conditions* or the *2014 Conditions*.

The NAAB 2020 *Procedures for Accreditation* outline the procedures that programs and visiting teams must follow in order to ensure a uniform accrediting process, including requirements for Annual Reports. This document is subsequently reviewed and edited at two-year intervals. Schools using the *2020 Conditions* are required to follow the *2020 Procedures*. Schools with visits in 2021 who select the option of using the *2014 Conditions* will use the *2015 Procedures.*

The NAAB reserves the right to vary from these published *Procedures* if it is in the best interests of a program or programs, or the accreditation process. The Board of Directors has delegated responsibility for implementation of these *Procedures* to the NAAB executive director.

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1. Terms of Accreditation

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 decision regarding the term of accreditation by the NAAB Board of Directors.

Although there are minor distinctions among the procedures that apply to eligibility, initial candidacy, continuation of candidacy, initial accreditation or continuing 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 further motion for a term of accreditation.

1.1. STAGE 1: Eligibility

The first step towards accreditation for a professional degree program in architecture is an eligibility application (see Section 5.2). Its purpose is to outline a plan and timeline to complete the steps necessary for initial accreditation, in consultation with the NAAB. The NAAB will schedule an eligibility visit unless the institution already offers an accredited degree in the same location. Once determined by NAAB to be eligible for accreditation, the institution must prepare an Architectural Program Report to apply for Initial Candidacy.

1.2. STAGE II: Candidacy

After receiving an eligibility decision by NAAB, the institution must develop a detailed plan and candidacy application (see Section 5). The NAAB strongly encourages institutions to seek guidance from the NAAB when reviewing the appropriate sections of this document before proceeding with the development of a candidacy application, and to work with the NAAB to establish a calendar for candidacy and initial accreditation.

1.2.1 Programs seeking candidacy may be granted an initial period of candidacy of not less than two years. The program applies for continuing candidacy every two years and must achieve accreditation within six years of the effective date of the term of initial candidacy.

1.2.2 Should a program fail to achieve initial accreditation within the maximum period, it must submit a new candidacy application.

1.3. STAGE III: Initial Accreditation

The earliest a visit for initial accreditation can take place is in the fall semester following the graduation of the first cohort of students to complete the full curriculum. The NAAB will grant the term of accreditation based on the following:

1.3.1 The eligibility requirements for initial accreditation as defined in Section 5.6.

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

1.3.3 The term of initial accreditation is three years from January 1 of the year of the visit.

Initial accreditation is probationary in nature and indicates that, although deficiencies may be present, the institution has established plans and is making sufficient progress toward addressing or removing the deficiencies by the time of the first visit for continuing accreditation.

1.4. STAGE IV: First Term of Continuing Accreditation Following a Term of Initial Accreditation

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

1.4.2 Programs that have achieved a term of initial accreditation may only receive an eight-year term of accreditation or an eight-year term with a *Plan to Correct*; if either term is not granted, accreditation will be revoked.

1.4.3 Failure to receive an eight-year term of accreditation indicates that the program failed to meet the plans established for its initial accreditation, failed to make sufficient progress toward addressing or removing deficiencies identified during the visit for initial accreditation, or has new deficiencies, such that continuing accreditation is not warranted. Programs still seeking accreditation may reapply for initial candidacy.

1.5. STAGE V: Subsequent Terms of Continuing Accreditation

Programs that have completed the first eight-year term of continuing accreditation and are seeking a subsequent term of continuing accreditation may receive one of the following terms of accreditation:

1.5.1 **Eight-Year Term**. This term indicates that the program has met all *Conditions*. The program is accredited for an eight-year period.

1.5.2 **Eight-Year Term with a *Plan to Correct***. This term indicates that the program has unmet *Conditions* and has submitted an adequate *Plan to Correct*, outlining the specific actions and dates that the program will take within the next two years to correct the *Conditions Not Met*. The deadline to submit a *Plan to Correct* is June 30 after the visit. If the Board finds the initial plan to be insufficient, a revised *Plan to Correct* is due by September 15. The *Plan to Correct* status of the eight-year term continues until:
- The program provides a narrative as part of its next two Program Annual Reports updating the NAAB on the actions and results that it has taken to correct their deficiencies.
- As part of the third Program Annual Report, or in an earlier report, the program has submitted documentation substantiating the changes made. After review (see 8.2), if the Board finds that the program has remedied its *Conditions Not Met*, the Board votes to eliminate the *Plan to Correct* status and the program continues its remaining time in the eight-year term.
- If the Board finds that the program has not met its obligations as self-defined in its *Plan to Correct*, the program's accreditation term will be reduced and a full visit will be required five years from the year in which the visit occurred. This indicates that the program continues to have unmet *Conditions* and that the program did not supply sufficient evidence to indicate that it had corrected the *Conditions Not Met*.

1.5.3 **Two-Year Probationary Term.** This term indicates that the program had unmet *Conditions* and:
- Did not submit a *Plan to Correct* and therefore will receive a 2-year term or a revocation of accreditation, or
- Submitted a *Plan to Correct* by the June 30 deadline, and a revised *Plan to Correct* by the September 30 deadline, but the Board found both plans to be insufficient. The program will receive a two-year probationary term and must show cause for the continuance of its accreditation.
- At its next scheduled review, the program must receive either an Eight-Year Term or an Eight-Year Term with a *Plan to Correct*, or the NAAB will revoke accreditation. If this happens, and the institution still wants to be accredited, it must go through the candidacy process.

1.5.4 **Revocation of Accreditation**. This indicates that the program has made insufficient progress during a Two-Year Probationary period. Accreditation may also be revoked:
- If the team observes and the NAAB finds substantial and uncorrectable noncompliance

with the *NAAB Conditions for Accreditation* during any visit.

- If no *Architectural Program Report* (APR) is submitted for a visit for continuing accreditation already on the schedule.
- If any institution phases out a NAAB-accredited degree without first filing a plan with the NAAB for phasing out the degree, the NAAB will consider this a forfeiture of accreditation and will revoke accreditation of the degree. 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 7).

Except in the foregoing instances, the NAAB does not revoke continuing accreditation except following a Two-Year Probationary Term.

2. Responsibilities and Conflict of Interest
(Days as used throughout this document means calendar days.)

2.1. Responsibilities of the School/Program
The program is responsible for:

2.1.1   Submitting an APR to NAAB by the deadline specified in these *Procedures*.

2.1.2   Providing team members with copies of the final APR in the format specified by the NAAB not less than 60 days prior to the first day of the visit.

2.1.3   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 in advance and such information is to be sent to the team chair at least 30 days prior to the beginning of the visit.

2.1.4   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.

2.1.5   Arranging for all ground transportation during the visit, including transportation to and from the airport and all local transportation, unless otherwise agreed to by the program administrator and the team chair.

2.1.6   Providing supporting materials and student work examples as required by the NAAB in Section 4 of these *Procedures*.

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

2.1.8   Submitting a *Plan to Correct*, if needed, to NAAB by the required deadlines.

2.2. Responsibilities of the NAAB Office
The NAAB staff is responsible for:

2.2.1   Communicating to the program the names of the team chair and of team members in a timely manner.

2.2.2   Ensuring that the visiting team chair, team members, and observers are informed of their responsibilities.

2.2.3   Providing the team chair and team members with the *Conditions* and the *Procedures*, and a template for completion of the VTR not less than 45 days prior to the visit.

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

2.2.5   Communicating with team members on behalf of the program. Team members are advised not to communicate with the program and one another directly; this is the responsibility of the NAAB

staff and the team chair.

2.2.6 Communicating with the program on corrections of fact in the VTR and *Plans to Correct* before the VTR goes to the Board.

2.2.7 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:
- Copies of invoices or itineraries for air travel or other transportation.
- Copies of receipts for ground transportation, including rental cars.
- Copies of receipts for all meals and other expenses (except mileage).

2.3. Responsibilities of the Team Chairs

The visiting team chair is responsible for the following:

2.3.1 Attending team chair training.

2.3.2 Reviewing the APR and identifying needs for additional information, or requesting changes to the APR.

2.3.3 Setting the date for the visit with the program administrator.

2.3.4 Developing the agenda for the visit with the program administrator.

2.3.5 Consulting with the program administrator on the format and content of the team room as well as materials to be furnished electronically in advance of the visit.

2.3.6 Hosting mandatory pre-visit conference calls with the team prior to the visit.

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

2.3.8 Preparing the final draft of the *Visiting Team Report* and sending it to the NAAB office within 14 days of the last day of the visit.

2.3.9 Transmitting the Confidential Report within 14 days to the NAAB office.

2.3.10 Securing the signatures of all team members on the report and of all voting team members on the Confidential Report page.

2.3.11 Completing the required NAAB assessment and evaluation survey(s) within 10 days of submitting the VTR.

2.4. Responsibilities of the Team Members

All team members are responsible for:

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

2.4.2 Contacting the NAAB office to confirm their participation in the site visit not less than <u>eight weeks before the visit.</u>

2.4.3 Reviewing Conflicts of Interest below, and verifying to the NAAB office and the team chair that no conflict of interest exists, or disclosing uncertainties so they can be decided by the NAAB.

2.4.4 Reviewing the anti-harassment and confidentiality agreement policies.

2.4.5 Making air travel arrangements no later than 21 days before the visit to secure economical fares.

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

2.4.7   Holding information in the strictest confidence as specified in these *Procedures*.

2.4.8   Reviewing the *Conditions* and the *Procedures,* the program's APR*,* Program Annual Reports, the template for the VTR, advanced materials assigned by the Team Chair, and the visiting-team-members' resumes in advance of the visit. Team members should not communicate with the program and one another directly; this is the responsibility of the NAAB staff and the team chair.

2.4.9   Participating in two pre-visit conference calls and reviewing documentary material.
- **Team Conference Call #1**. Team members, including the observers, participate in a mandatory pre-visit conference call. During the call, the visiting team reviews the APR, the *Conditions*, and the *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 and, later, during the visit. This call will take place at least 30 days prior to the start of the visit.
- **Team Conference Call #2**. Team members, including the observers, participate in a second, mandatory pre-visit conference call to review the results of the documentary review, 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 generally take place at least 14 days before the visit.

2.4.10 Actively participating in or observing all aspects of the visit and any pre-visit activities and carrying out all tasks assigned by the visiting team chair with integrity and timeliness, including review of material in the team room. All members of the team are expected to participate in the visit the entire time.

2.4.11 Participating in writing the draft of the VTR.

2.4.12 Completing an initial draft of the VTR prior to the end of the visit.

2.4.13 Promptly suggesting any revisions to the VTR to the team chair*.*

2.4.14 Completing and submitting a reimbursement request in a timely manner.
- a) A copy of the reimbursement form can be found on the NAAB website on the Visiting Teams page.
- b) Requests for reimbursement must be submitted within 30 days of the end of the visit. Requests for reimbursement must include:
  - i Invoice/itinerary for transportation (air or rail).
  - ii Receipts for ground transportation, including rental cars.
  - iii Receipts for all meals and incidental expenses (except mileage).
- c) 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.
- d) 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.
- e) In the event that an individual has already completed travel reservations and must withdraw from the team, the individual will be invoiced for the expense of the travel.
- f) In the event that an individual has already completed travel reservations and must reschedule air transportation in order to ensure attendance for the entire visit, the individual will be invoiced for any change fees assessed by the airline.
- g) The NAAB will not reimburse team members for alcoholic beverages, personal items, or entertainment.

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

2.5. Conflicts of Interest

No person shall take part as a visiting team member and no Board member shall participate in accrediting deliberations or a decision if they cannot evaluate a program objectively and without bias, even if none of the categories for automatic disqualification 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.

2.5.1 **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. The sole exception is a team observer nominated by the program who is an employee of the institution outside of the unit in which the program is housed who can bring a perspective on institutional culture.

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 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 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 the person 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).

2.5.2 **Team Member Disclosure**

2.5.2.A Team members including observers, are responsible for determining and reporting whenever they have a conflict of interest. All team members will be furnished a document by the NAAB setting forth the conflict of interest provisions above and requesting that within 10 days they either state that no provisions apply to them or not. NAAB staff shall forward such document to the visiting team chair, and the program administrator.

2.5.2.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 conflict of interest that would raise a question as to that individual's objectivity in evaluating the program.

2.5.2.C An individual, in determining whether he/she should participate as a team member shall consider, even in the absence of a conflict of interest, whether the potential appearance of a conflict of interest is sufficient to dictate the individual's withdrawal from the team.

2.5.3 **NAAB Director Disclosure**

2.5.3.A The NAAB directors are required to disclose conflicts of interest annually. These disclosures are kept on file in the NAAB office.

2.5.3.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.

2.5.3.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 that is necessary on short notice.

Any program may challenge any member of a visiting team designated by the NAAB only on the basis of a conflict of interest. Challenges are to be made in writing within ten days of receiving notice of the designation of a team chair, visiting team member or observer. Challenges will be reviewed by the NAAB executive director and the associate director. When challenges are found meritorious by the NAAB executive director, a new team member and/or observer will be assigned. Challenges will not be accepted after the ten-day period.

3. Procedures for Continuing Accreditation

For programs seeking continuing accreditation, the sequence is as follows:

1) The program submits an *Architecture Program Report*.
2) The NAAB assigns a visiting team and a review of materials by the team is done digitally and through a site visit**.**
3) The visiting team submits a report to the NAAB Board.
4) The program submits, if needed, a *Plan to Correct* any deficiencies
5) The Board makes the decision on a term of accreditation.

Once the Board has made a decision regarding a term of accreditation, continuing accreditation is subject to the submission of *Program Annual Reports* (see Section 8) that provide statistical information, actions on *Plan to Correct*, and any changes within the program.

3.1 Architecture Program Report (APR)

The *Architecture Program Report* (APR) serves as a self-study for the program and evidence of its compliance with the Conditions. It is the principal source-document for conducting the visit, addressing each of the Conditions including the Program and Student Performance Criteria.

Instructions for preparing APRs are published separately from this document. Programs must use the templates provided by the NAAB for preparing APRs and related supplemental information; see the Guide to the Preparation of an Architectural Program Report at www.naab.org for more information. All material prepared for accreditation visits to programs outside the United States and its territories must be provided in English, including the Architecture Program Report, supplemental material, and student work to be reviewed by the visiting team.

3.1.1 Review and Acceptance of the APR.
3.1.1.A   The APR is first reviewed by the NAAB staff to ensure that it is complete.
3.1.1.B   The APR is then reviewed by the team chair for completeness and clarity, and to identify issues that affect the size of the team or length and locales of the site visit. Within 30 days of receipt of the APR the chair must provide a completed APR form to the staff, recommending one of the following:
  a) Accept the APR, and schedule the site visit.
  b) Accept the APR*,* schedule the site visit, and request additional APR information before the visit.
  c) 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 by the team chair.
  d) Reject the APR *and* require a new APR to be submitted for review by November 15. If the new APR is considered acceptable, the visit will be scheduled. Should the chair recommend that the new APR be rejected, the APR and the chair's review are brought before the NAAB Executive Committee for review and action.
3.1.1.C   Should the school fail to deliver an acceptable amended or replacement APR by November 15, the NAAB will notify the chief academic officer of the institution that the

site visit cannot proceed and that accreditation may lapse due to failure to complete a visit within the prescribed timeframe.

3.1.2   Dates/Deadlines

3.1.2.A   APRs 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 2021, the APR is due September 7, 2020).

3.1.2.B   If the NAAB requests a complete revision of the APR, the revised APR is due November 15.

3.1.2.C   Primary exhibits supplied as evidence for accreditation criteria not requiring student work must be submitted to the Visiting Team in an electronic format 45 days in advance of the visit.

3.1.3   Dissemination of the APR to the Public Prior to the Visit. To stimulate broad-based participation, the program should 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 accreditation decision is communicated by the NAAB.

3.2 Visiting Teams

3.2.1   Composition of Teams

3.2.1.A   Teams will consist of at least four individuals, each of whom represents one of the four constituent areas of expertise: a practitioner, an educator, a regulator, and a student selected from the team pool.

3.2.1.B   The NAAB executive committee will approve the team chair recommendations from staff.

3.2.1.C   The NAAB staff will compose teams after the date for the visit has been set by the team chair and the program administrator.

3.2.1.D   The NAAB seeks to balance the team in terms of geography, gender, race/ethnicity, and accreditation experience. Programs may challenge a member of a visiting team on the basis of a conflict of interest as defined in Section 2.

3.2.1.E   The NAAB makes every effort to assemble teams so that no more than one person, excluding the student, is on their first visit, but this is not always possible.

3.2.1.F   Except as set forth below, the NAAB will not assign an individual more than once to serve as a member of a visiting team for the same program.

3.2.1.G   If a program received less than the maximum term of accreditation during its last accreditation cycle, the NAAB, after consultation with the program, may assign one voting member of the last visiting team to the subsequent visiting team.

3.2.2   Team Chair. The responsibilities of the team chair are described in Section 2. Chairs are nominated by the NAAB 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 an evaluation of their performance on previous visits and the quality of previous VTRs. NAAB staff notify program administrators once a chair has been designated. Once a chair has been confirmed and the APR accepted, the administrator and the chair work together to select a date for the visit.

3.2.3   Observer. To add useful perspective on the program's unique qualities or history, or on the institution's policies and context, the program may nominate an observer to join the visiting team.

3.2.3.A   **Nomination and Approval**

a)   After the official visiting team has been designated by the NAAB and no later than 60 days before the start of the visit, the program administrator may nominate an observer by sending to the associate director the name, resume or curricular vitae, and a brief description of the relationship between the individual and the program. The nomination will be considered for approval by the executive director, or other designated staff, in consultation with the visiting team chair.

b) Individuals who have graduated from the program, who had or have a paid or voluntary contractual or consulting relationship with the program at any time, or who previously visited the program as a member of a NAAB visiting team, may not serve as an observer. The sole exception is made for a team observer nominated by the program who is an employee of the institution outside of the unit in which the program is housed and who can bring a perspective on institutional culture.

c) No person may serve as an observer for any visit more than once in any three-year period.

d) Programs are prohibited from compensating an observer other than reimbursing for expenses directly related to participating in the visit. Reimbursement of such expenses shall be the sole responsibility of the program and not the NAAB.

e) An observer must read the current version of the *NAAB Conditions* and *Procedures*, read the APR, and complete a training program before the visit begins. The individual must agree in advance to abide by the principle of confidentiality and anti-harassment and by the conflict of interest policies as outlined in the *NAAB Procedures*.

f) An observer who fails 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. The team chair shall notify the program administrator and the NAAB executive director.

3.2.3.B **Participation**

a) The observer must participate throughout the entire site visit, including the mandatory pre-visit conference calls, and is expected to participate in the activities of the team and undertake tasks assigned by the team chair. The observer generally does not evaluate evidence, but can assist in locating it.

b) The observer may be present at the last team work session during the drafting of the VTR solely at the discretion of the visiting team chair. The observer does not comment on the confidential recommendation.

3.2.3.C **Additional Observers** Occasionally, for training purposes, the NAAB may ask the program and the team chair to accept a special, additional, team member. These individuals may be NAAB Board or staff members, an officer or staff member of a collateral organization, or other person that NAAB believes would benefit from observing a site visit. These additional observers may observe all or part of any visit by a visiting team, but shall not take part in the evaluation of materials or deliberations of the visiting team regarding the VTR. All additional observers shall be bound by the confidential requirements applicable to the visiting team and visit expenses shall be the NAAB's or the collateral organization's responsibility.

3.2.3.D **Notification to Program.** The NAAB staff notifies the program administrator when a full team has been assembled. Programs may challenge members of a proposed visiting team, including the chair, under the terms of Section 2.5. Such challenge procedures apply to all teams assembled by the NAAB for any accreditation purpose.

3.2.4 Programs whose curricula are not taught in English may be required to provide a translator to assist the team during a visit. Programs will be notified at least 30 days before the visit if they must provide a translator, who may not be affiliated with the program (e.g., faculty, alumnus) in any way. The NAAB makes every effort to include individuals who speak the language of the program being visited; however, if this is not possible, a translator will be required.

3.3 Site Visits

3.3.1 Scheduling the Dates for the Visit

3.3.1.A The dates for a visit for continuing accreditation are set by the team chair in consultation with the program administrator.

3.3.1.B Generally, these visits take place between the last week of January and the first week of April each year and usually begin on Saturday evening and end the following Tuesday by noon, or begin on Sunday evening and end the following Wednesday by noon.

3.3.1.C Additional days may be added to the visit if the program is offered in more than one location; likewise, individual members of the team may be scheduled to participate on additional days to visit other locations for the program. These exceptions are agreed to in advance by the team chair and the program administrator with advice from the NAAB staff (Section 6, Special Circumstances).

3.3.1.D Dates for visits cannot be changed once a team has been assembled and proposed to the program, except under extreme circumstances. See Section 6 for additional information.

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

3.3.2.A **Prior to the Visit.** Team members review the APR, Program Annual Reports and digital exhibits submitted as evidence of compliance with NAAB Conditions and program/student accreditation criteria not requiring student work. This material should be presented either in PDFs or other online formats and made available to the team by the program not less than 45 days prior to the visit.

3.3.2.B **Onsite Tours.** The school conducts, for the team, an initial tour of the team room, a brief tour of the physical resources that support the professional degree program, and a tour of the library and informational resources with the architecture librarian and visual resources professional to discuss their assessment of those components.

3.3.2.C **Onsite Meetings.** All meetings are confidential, and should consist of informal discussions, not presentations.

    a) Program Head(s). These meetings 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 that the team may need. These meetings are often held daily.

    b) An initial meeting with the chief academic officer of the institution/provost or their representative is optional and will be determined by the team chair in consultation with the program administrator

    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. Meetings with faculty teaching in the program being accredited must be open to all ranks from the various curricular areas, including those from other disciplines supporting the program. Meetings with students enrolled in the program being accredited, without the presence of any administrators, staff, or faculty, should be arranged so that all such enrolled students can attend.

    d) Meeting with Student Representatives. This is an informal gathering of a small group of student leaders enrolled in the program being accredited, without the presence of any administrators, staff, or faculty. These students may be officers in student organizations or elected to attend by their peers.

    e) Staff. This is a meeting with key staff of the academic unit, without any faculty or administrators present. The staff include, but are not limited to administrative assistants, shop personnel, librarians, career placement professionals, and advisors.

3.3.2.D **Review of Student Work and Course Materials.** Team members are individually and jointly responsible for assessing student work and course materials required to be presented to the team as described in Section 3.4

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

3.3.2.F **Review of Student Records and Transfer Credit Assessment.** These are files to

be reviewed as part of the team's assessment of Condition 3.3. They should be in the Team Room and presented in compliance with FERPA (Family Educational Rights and Privacy Act).

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

3.3.3 **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 deficiencies and observations, 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.

3.3.4 **Exit Meetings.** The sequence of exit meetings is prescribed in order to ensure that the team delivers its initial information to key leaders within the institution and 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:
- The conditions met with distinction
- The conditions not met and the process of developing a *Plan to Correct*
- Any general team observations and acknowledgements

The recommended sequence of exit meetings, done by the team chair, a team member, and observer, if there is one, is as follows:
- Exit meeting with the program administrator.
- Exit meeting with the leadership of the academic unit in which the program is located (e.g., director, chair, dean) and the chief academic officer of the institution (e.g. provost).
- Exit meeting with students, faculty and staff of the program

Team members not involved in the meetings may leave once deliberations are completed, while those participating in the meetings are required to leave the institution as soon as the last meeting is completed.

3.4 Team Room

The team room is a securable, reasonably soundproof room accessible only to the team, which is, to the extent possible, located in the same building as the program. It is for the exclusive use of the team during the visit. Before the site visit, the program head and visiting team chair discuss the extent of materials to be submitted in electronic format in advance of the visit and the content, format and organization of materials provided in the team room. These include:

3.4.1 **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 (Condition 3.3).

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

3.4.3 **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.

3.4.4 **Equipment.** The room must contain the following: a document shredder, viewing/projection equipment as requested by the visiting team chair, Internet access/secure wi-fi access, a printer, an LCD projector, and a sufficient number of electrical outlets and types of outlets and power cords.

3.4.5 **Visit Agenda and Resumes.** The visit agenda and resumes of the team should be posted near the team room for public review.

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

3.4.7 **Matrices.** A large format copy of the faculty credentials matrix for the current semester, and a large copy of the Program and Student Criteria matrix (relating coursework with criteria), should

be posted in the team room.

3.4.8   Additional Instructions. 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, each track, and/or each site must be clearly identified.

3.5 Evidence

Material provided as evidence needs to be secured in the team room. Before the site visit, the program head and visiting team chair discuss the extent of materials to be submitted in electronic format in advance of the visit and the content, format and organization of materials provided in the team room. These include:

3.5.1   Primary Evidence for Program Criteria. The program will submit the primary exhibits as evidence for program criteria to the Visiting Team in an electronic format in advance of the visit. The exhibits supporting these criteria should be organized in the format specified by the NAAB in the *Guide to the Preparation of an Architecture Program Report*:

Criteria in this section should be evaluated holistically relative to the curricula and the students' experience of it. The program must provide a narrative description of how the program achieves each criterion. The program must also provide evidence that each criterion is assessed by the program on a recurring basis, and summarize the modifications made to its curricula and/or associated program structures and materials based on findings from these assessment activities since the previous review.

Supporting Material: The program must provide supporting materials demonstrating that its objectives have been accomplished. These may include a spectrum of materials, including policy documents, individual course materials (syllabi, etc.) as well as documentation of activities occurring outside specific courses.

3.5.2   Primary Evidence for Student Criteria The exhibits supporting these criteria should be organized into the format specified by the NAAB in the *Guide to the Preparation of an Architecture Program Report*.

Student Learning Criterion SC.1 through SC.4 will be evaluated at the *understanding* level. The primary exhibits supplied by the program as evidence for these criteria will be submitted to the Visiting Team in an electronic format in advance of the visit. Programs must provide the following:

Narrative: A narrative description of how the program achieves and evaluates each criterion.

Self-Assessment: Evidence that each student learning outcome associated with this criterion is developed and assessed by the program on a recurring basis, with a summary of the modifications the program has made to its curricula and/or individual courses based on finding from its assessments since the previous review.

Supporting Materials: Supporting materials demonstrating how the program accomplishes its objectives related to each criterion. Organize the supporting exhibits in the format specified by the NAAB and include the following for each course associated with the student learning outcome:
- **Course Syllabus.** The syllabus must clearly articulate student learning outcome objectives for the course, the methods of assessment (tests, project assignments, etc.), and the relative weight of each assessment tool used by the instructor(s) to determine student performance.
- **Course Schedule.** The schedule must clearly articulate the topics covered in the class

and the amount of time devoted to each course sub-topic.

- **Instructional Materials.** The exhibits must clearly illustrate the instructional materials used in the course. These may include a summary of required readings, lecture materials, field trips, workshop descriptions, and other materials used in the course to achieve the intended learning outcomes.

Student Learning Criterion SC.5 and SC.6 will be evaluated at the *ability* level. Programs may design their curricula to satisfy these criteria via a single course, or a combination of courses. Evidence supplied for these required courses is provided in the Team room and include fully labeled exhibits of student work in their original format from each course section. Programs must provide the following:

Narrative: A narrative description of how the program achieves and evaluates each criterion.

Self-Assessment: Evidence that each student learning outcome associated with these criteria is developed and assessed by the program on a recurring basis, with a summary of the modifications the program has made to its curricula and/or individual courses based on findings from its assessments since the previous review. If the program accomplishes these criteria in multiple courses, it must demonstrate that it coordinates the assessment of these criteria across those courses.

Supporting Materials: Supporting materials demonstrating how the program accomplishes its objectives related to each criterion. Organize the supporting exhibits in the format specified by the NAAB and include the following for each course associated with the student learning outcome:

- **Course Syllabus.** The syllabus must clearly articulate student learning outcome objectives for the course, the methods of assessment (tests, project assignments, etc.), and the relative weight of each assessment tool used by the instructor(s) to determine student performance.
- **Course Schedule.** The schedule must clearly articulate the topics covered in the class and the amount of time devoted to each course sub-topic.

Instructional Materials. The exhibits must clearly illustrate the instructional materials used in the course. These may include a summary of required readings, lecture materials, field trips, workshop descriptions, and other materials used in the course to achieve the intended learning outcomes.

Student Work Examples: The program must collect all passing student work associated with the course(s) where the learning outcomes associated with this criterion are achieved in the one (1) year prior to the visit. The Visiting Team will evaluate approximately 20 percent (no less than three (3), no more than thirty (30) examples) of the student work collected in this timeframe, selected at random (in advance of the visit) by the NAAB from a list (provided by the program) of students receiving passing grades in the course(s) where the learning outcome associated with these criteria are achieved. The program may self-select additional student work, up to ten (10) percent, for the Visiting Team to review.

3.6 Visiting Team Report (VTR)
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 regarding the nature and quality of the program. VTRs are considered advisory to the NAAB Board of Directors who makes the decision on accreditation. A generic template for VTRs can be found on the NAAB website.

3.6.1   Template The NAAB office prepares a VTR template for each visit based on the generic template. This template is unique to the program being visited and will include information from

the APR and sections from the previous VTR where prior Conditions were not met.

3.6.2 **Team VTR** The VTR conveys the visiting team's assessment of whether the program meets each of the *Conditions for Accreditation*. It assesses matters described in the APR, as well as matters noted on the visit including course materials, student work and the team's observations. The VTR must be concise and consistent, representing the team's consensus on all items, and include reasons for any deficiencies with respect to the *Conditions*. Each template Condition includes an assessment of Met/Not Met.

3.6.3 **Review/Acceptance/Transmittal by the Team.** The team chair must transmit a final draft of the VTR to the NAAB office not later than 10 days after the visit ends.

3.6.4 **Review by NAAB Staff.** Upon receiving the draft report from the team chair, the NAAB staff reviews it for completeness and comprehension and makes any corrections for grammar, spelling, and punctuation. 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, the NAAB sends it to the program administrator within 30 days of the visit**,** without the confidential recommendation.

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

3.7 Confidential Report

Separate from the VTR, the team may provide the following to the NAAB within 14 days after the visit ends, signed by all voting team members:
- Insight into the Unmet Conditions where the type of information and documentation that should have been provided by the program was missing during the visit and, although asked for, was not available by the end of the visit,
- Information to the NAAB staff and Board about various possibilities for a *Plan to Correct*, and/or
- Suggestions of what could serve as evidence to substantiate that correction has been made.

The content of this document does not make a recommendation on the term of accreditation and remains confidential in perpetuity. The information is used by NAAB to help clarify in writing to the program what is needed in the program's *Plan to Correct* that must be submitted to the NAAB before the Board votes on a term of accreditation.

3.8 Additional Dates and Deadlines

3.8.1 Within 10 days of receiving the corrections of fact, the NAAB staff and team chair accept or reject the corrections and complete the final VTR.

3.8.2 The NAAB staff transmits the final VTR to the program administrator along with a template for creating a *Plan to Correct*. A *Plan to Correct* is a plan developed by the program outlining the specific actions and corrective measures, and dates that the program will take within the next two years to correct *Conditions Not Met*.

3.8.3 The program sends its *Plan to Correct* to the NAAB office no later than 60 days after the visit. Responses sent after the deadline will not be forwarded to the Board for its July meeting.

3.8.4 Before the NAAB Board of Directors meeting, the NAAB staff prepares the final report dossier for the directors' review. This dossier contains the following separate documents. They are:

- Executive summary
- Final VTR
- Confidential Report
- *Plan to Correct*
- Any previously submitted *Interim Progress Report* since last visit
- Any relevant program submission relating to a previous *Plan to Correct* or to a *C*ondition

which again is a *Condition Not Met* in a current VTR.

3.9 Decision of the Board of Directors

At the Board's next regularly scheduled meeting, the final report dossier is presented to the Board of Directors for a decision.

3.10 Transmitting the Decision of the Board of Directors

Promptly after a Board decision regarding a term of accreditation, a letter announcing the decision is sent to the chief academic officer of the institution, with copies to the program administrator, the team chair, and the team members. In the event that the Board decides to revoke accreditation, the letter will include Procedures for seeking reconsideration. The institution has 14 days from the receipt of a decision letter to request in writing reconsideration of any accreditation decision by the Board (Section 11). The NAAB may make its accreditation decision public 20 days after the decision letter is transmitted to the program administrator unless, within that time, a written request for reconsideration has been received. If such a request is received, then the NAAB shall not make its decision public until after the Board has acted on the request for reconsideration.

3.11 Confidentiality

All team members, including observers, must maintain strict confidentiality with respect to materials reviewed, interviews conducted, and team deliberations 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.

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

3.12 Public Disclosure of Accreditation Outcomes

After the accreditation decision, the program must disseminate the APR, the final VTR (including the program response, if one was prepared), the final accreditation decision issued by the NAAB, the editions of the *Conditions* and the *Procedures* under which the decision was made, and, eventually, the NAAB decision letter(s) for *Plan to Correct*. These documents must be housed together on the program's website and be freely accessible to all. **Programs may not publish these documents in abbreviated or excerpted forms.**

The program is required to provide faculty and students with access to the current Program and Student Performance Criteria and related accreditation documents (Condition 5.10, Public Information*).*

The NAAB publishes all VTRs after accreditation decisions are made at www.naab.org. These will be published without the confidential report of the team. 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.

Within 30 calendar days of a decision to revoke accreditation not subject to reconsideration, 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 and otherwise make the decision public.

4 Special Provisions for Institutions

4.1 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 APR.

4.1.1 **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 and 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.

4.1.2 **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 may be from any of the collaterals. The presence of this additional team member will not affect the ability of the program to nominate an observer.

4.1.3 **Adjustment to the APR**

4.1.3.A The APR may provide one response for all accredited degree programs for Conditions 1, 2,3.1, 5.1 through 5.5 and 5.10.

4.1.3.B The APR must provide separate information for each degree program offered and for each track for completion of the accredited degree(s) for Conditions 3.2, 3.3, 4 and 5.6 through 5.9 demonstrating that there are appropriate resources for each program and track. Information should include:
   a) A separate matrix for each.
   b) Complete information regarding the curriculum offered.
   c) Must demonstrate the processes for the analysis and evaluation of the preparatory education of students admitted to each, with special attention paid to evaluating whether student accreditation criteria are expected to have been met in educational experiences in non-accredited programs.

4.2 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.

5 Procedures for Initial Candidacy, Continuation of Candidacy, and Initial Accreditation

Initial candidacy and initial accreditation for a new professional degree program in architecture requires the completion of five important steps. For institutions that already have at least one NAAB-accredited professional degree program, some of these steps may be waived or modified. Generally, the steps are as follows:

- Eligibility application by institution to initiate process
- Determination of eligibility by NAAB following eligibility visit
- Initial candidacy APR and visit (candidacy visit #1)
- Subsequent evaluations toward accreditation (candidacy visits #2 and 3)
- Initial accreditation no later than six years after initial candidacy visit
- Schools should work with the NAAB to establish a calendar for candidacy and initial accreditation.

5.1 Consultation and 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, and the ACSA 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 from an institution with a degree program currently in candidacy.

5.2 Eligibility 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 eligibility application for candidacy. A complete application must include the following:

5.2.1   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.

5.2.2   The most recent decision letter from the recognized U.S. regional accrediting agency for the institution (Condition 3.1)

5.2.3   **The Plan for Achieving Initial Accreditation. The Plan for Achieving Initial Accreditation serves multiple purposes.** 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**, and 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**. It also proposes a course of action for achieving initial accreditation in not more than six years. The document includes, but is not limited to, the plan to:
- Secure resources not already available to the proposed program (e.g., faculty, space, financial support).
- Secure institutional approvals for the proposed degree program (if required).
- Recruit and retain students; including a scholarship program, as appropriate.
- Recruit full-time and adjunct faculty to teach within and support the program.
- Enroll the first cohort or class by a proposed date.
- Award degrees to the first cohort or class to complete the proposed program by a proposed date.
- Develop and implement new courses and/or curricular sequences, including faculty assignments and essential physical resources.
- Attract external support, funding, and alumni and professional-community engagement.
- **Make alternative plans or provisions in the event that the program does not achieve initial candidacy** or initial accreditation.

5.2.4   Instructions for the preparation, format and submittal of the Plan for Achieving Initial Accreditation are published separately from this document. See the *Guide to the Preparation of an Architectural Program Report* at www.naab.org for more information.

5.3 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.

5.3.1   **Review of the Application.** The NAAB executive director or associate director will review the application to determine whether it is complete. Once the application is complete, a review panel will be named.

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

5.3.3 **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.

    5.3.3.A   For programs seeking candidacy for a professional degree program in architecture that do not currently have a NAAB-accredited degree, the application will be reviewed by the panel, and an eligibility visit will be scheduled at the expense of the program.

    5.3.3.B   For programs that already offer at least one NAAB-accredited degree and are seeking candidacy for an additional professional degree, the application will be reviewed by the panel, and additional information may be requested. An eligibility visit is not required if the new program is in the same location as the existing program.

5.3.4 **Eligibility Visit.**

    5.3.4.A   **Purpose**: There are three purposes for the eligibility visit:

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

        b) To confirm the institutional commitment to the implementation of the Plan for Achieving Initial Accreditation.

        c) To review the *Conditions* and the *Procedures* with the proposed program's administrators, faculty, staff, and students.

    5.3.4.B   **Format**

        a) Eligibility visits should last no more than two days.

        b) The visit will be undertaken by two of the individuals assigned to the review panel.

        c) The visit will be scheduled on two consecutive weekdays.

        d) The visit should include the following:

- Presentation by the program on the history, context and mission of the institution, academic/administrative unit, and proposed degree program.
- Discussion between the NAAB reviewers and the program administrator to review the *NAAB Conditions* and *Procedures.*
- Separate meetings with faculty, staff, and students in particular to review the timeline for candidacy, initial candidacy and finally initial accreditation, and the requirements of continuing accreditation.
- Meetings with division administrators (e.g., department chair and dean).
- Meetings with the institution's chief academic officer, chief financial officer, and chief advancement officer.
- Opportunities to observe classes and studios if courses are being offered that will be included in the proposed degree program.
- A tour of the physical resources that are or will be designated for the program (studios, classrooms, seminar rooms, shops, and labs).
- A tour of the library or other information resource center(s) that support the program.

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

- A review of the resources committed to the program.
- A commitment of the institution to the implementation of the Plan for Achieving Initial Accreditation.
- An assessment of the readiness of the program to complete a visit for initial candidacy.
- A cross-reference to the findings of the visiting team in the most recent VTR, where an institution already offers a NAAB-accredited program.

- A 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.

5.3.6   Board Action on Eligibility for Initial Candidacy
5.3.6.A   The panel's recommendation is presented to the Board at its next regularly scheduled meeting.
5.3.6.B   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.
5.3.6.C   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 a new application can be submitted.

5.4 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.

5.4.1   Architecture Program Report Submitted for Initial Candidacy Visits The *Architecture Program Report for Initial Candidacy* (APR-IC) is similar to an APR for continuing accreditation. An APR for Initial Candidacy should clearly document the program's progress on the Plan for Achieving Initial Accreditation. The program must append the plan and the eligibility memorandum to the APR-IC. Instructions for the preparation, format and submittal of the APR-IC are published separately from this document. See the Guide to the Preparation of an Architectural Program Report at www.naab.org for more information. All material prepared for accreditation visits to programs outside the United States and its territories must be provided in English. This material includes the Architecture Program Report, supplemental material and student work to be reviewed by the visiting team.

5.4.2   Review and Acceptance
5.4.2.A   APR-ICs are due in the NAAB office 180 days before the visit is scheduled to take place.
5.4.2.B   The NAAB staff first reviews the APR-IC to ensure that it is complete.
5.4.2.C   The team chair then reviews the APR-IC for completeness and clarity, to discern the complexity of the program's structure, and to identify issues that may affect the duration and agenda of the site visit. The visiting team chair's review results in a recommendation to the NAAB staff to do one of the following:
- Accept the APR-IC and schedule the site visit.
- Accept the APR-IC, schedule the site visit, and request that minor additional information be provided before the visit.
- Require additional information be submitted to the team chair. The visit date will be set after the additional information is received, reviewed, and determined to be acceptable.
- 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.
5.4.2.D   Should the chair recommend that 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.
5.4.2.E   Should the school fail to deliver an acceptable amended or replacement APR-IC, the NAAB notifies the chief academic officer of the institution that the candidacy visit will have to be postponed until the next year. A new chair will be appointed and a new APR-IC is required.

5.4.3   Dissemination of the APR-IC to the Public Prior to the Visit. To stimulate broad-based participation, the program should distribute the APR-IC within the school community before and

during the site visit. However, the APR-IC should not be shared with the general public until after the final decision on candidacy is communicated by the NAAB.

5.4.4   Composition of Visiting Teams for Initial or Continuing Candidacy

5.4.4.A   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. The NAAB will designate either the educator or the practitioner to serve as the team chair.

5.4.4.B   Team Chair. Visiting team chairs for candidacy visits are selected in the same manner as those for continuing accreditation visits (Section 3.2). NAAB staff notify program administrators once a chair has been nominated, and once confirmed, the chair reviews the APR for completeness. After any additional information is included in a revised APR, the administrator and the chair work together to select a date for the visit.

5.4.4.C   The NAAB staff composes teams after the date for the visit has been set. The NAAB makes every effort to balance the team in terms of geography, gender, race/ethnicity, and accreditation experience. To the extent possible, teams are selected so that not more than one person is on their first visit, and observers are not permitted on teams for initial candidacy or on subsequent teams to determine the continuation of candidacy. The NAAB staff notifies the program administrator when a full team has been assembled.

5.4.4.D   Programs whose curricula are not taught in English may be required to provide a translator to assist the team during the visit. Programs will be notified at least 30 days before the visit if they must provide a translator, who may not be affiliated with the program (e.g., faculty, alumnus) in any way. The NAAB makes every effort to include individuals who speak the language of the program being visited; however, if this is not possible, a translator will be required.

5.4.5   Dates for the Site Visit

5.4.5.A   The team chair sets the dates for a visit for initial candidacy in consultation with the program administrator.

5.4.5.B   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.

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

5.4.5.D   Duration of the visit:
a)   Visits for initial candidacy begin on Saturday evening and end the following Tuesday at noon. 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 team chair makes the final decision on the length of the visit in consultation with the program administrator and the NAAB staff.
b)   All members of the team are expected to participate in the visit the entire time.
c)   If the program seeking candidacy is to be offered in more than one location, 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.

5.4.6   Schedule/Agenda for Initial Candidacy Visit. The visit agenda for initial candidacy is similar to that for continuing accreditation (Section 3). Differences are noted below.

5.4.6.A   Meetings with Students. Same as for continuing accreditation except for the following: 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.

    5.4.6.B   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 the work in the team room and elsewhere, including online.

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

5.4.7   Evidence and Team Room. Before the site visit, the program head and visiting team chair discuss the content and organization of the team room. The evidence and team room information is similar to that for continuing accreditation (Section 3).

5.4.8   Candidacy-Visiting Team Report (C-VTR) The VTR is the same as for that for Continuing Accreditation except for the following specific to the Candidacy VTR:

    5.4.8.A   It contains commentary by the team on the program's progress against its Plan for Achieving Initial Accreditation.

    5.4.8.B   VTRs for initial or continuation of candidacy may also identify program and student accreditation criteria as met, not met, or not-yet met.

    5.4.8.C   For criteria in courses that have been offered and for which evidence is provided for evaluation by the visiting team, the team may determine that the criteria is met or not met.

    5.4.8.D   For criteria 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 criteria are not-yet met.

5.4.9   Public Disclosure of Accreditation Outcomes After the candidacy decision, the program must disseminate the APR-IC, the final C-VTR and all attachments, and 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.

5.5 Subsequent Evaluation Visits for Continuation of Candidacy

Continuation of candidacy is subject to submission of *Program Annual Reports* (see Section 8) and visits at two-year intervals until initial accreditation is achieved within six years of the effective date of the term of initial candidacy. The reporting, team composition, and visit requirements for each subsequent visit are the same as for initial candidacy. The APR must include the previous VTR, the eligibility memorandum and the plan to achieve initial accreditation for each continuation-of-candidacy visit.

5.6 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 a Request for Initial Accreditation followed by the APR and 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 that complete the program. Terms of initial accreditation are for only three years. The period from achieving candidacy status to initial accreditation may vary, but no longer than six years. Should a program fail to achieve initial accreditation within the maximum time period, it must submit a new candidacy application.

5.6.1   Eligibility for Initial Accreditation

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

        a)   Have completed four years in continuous candidacy.

        b)   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.

5.6.1.B   Programs that already have at least one NAAB-accredited professional degree must have:
  a) No less than two years in continuous candidacy.
  b) A full eight- or six-year term of accreditation for the pre-existing accredited professional degree program in architecture.
  c) One graduating class that has completed the entire curriculum of the professional degree program for which accreditation is sought.

5.6.1.C   It is the responsibility of the program, not the 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.
  a) In order to meet the education requirement, set forth by the National Council of Architectural Registration Boards (NCARB), 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.
  b) The "two-year rule," as it is sometimes called, is promulgated by NCARB. The full text can be found on the NCARB website in their statement defining the education requirement for an NCARB Certificate.
  c) In practical terms, this means that, if a program receives an initial term of accreditation effective January 1, 2021, individuals who graduated after January 1, 2021, have an accredited degree while individuals who graduated between January 1, 2019 and December 31, 2020 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.

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

5.6.2.A   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.

5.6.2.B   In making a request for initial accreditation, the program might effectively forfeit any remaining time in the six-year candidacy.

5.6.2.C   The request must include the following:
  a) A letter from the chief academic officer of the institution requesting a visit for initial accreditation of the professional degree program in architecture. The letter should include the specific degree name (e.g., B. Arch., M. Arch., or D. Arch.), including prerequisites (e.g., M. Arch. (pre-professional degree plus 60 graduate credits)).
  b) A copy of the most recent decision letter from the NAAB.
  c) A copy of the most recent decision letter from the recognized, U.S. regional accrediting agency for the institution.
  d) A brief assessment of the progress against the Plan for Achieving Initial Accreditation with specific evidence that the plan will be fully implemented by the time of the site visit for initial accreditation.
  e) The request must be submitted in electronic format only. Requests are limited to 15 pages, including all supplemental information. The request is to be sent either in Microsoft Word or Adobe PDF and is limited to 3 MBs. Applications are to be addressed to the Associate Director, NAAB by email: info@naab.org. Please include "Application for Initial Accreditation Site Visit" and the name of the institution in the subject line.

5.6.3   **Initial Accreditation.** Once the application has been reviewed for completeness, the NAAB will add the program to the annual visit schedule for the next calendar year. Visits and procedures for initial accreditation are conducted in the fall only and are similar to those for continuing accreditation except as provided below.

    5.6.3.A   **Architecture Program Report for Initial Accreditation.** The *Architecture Program Report for Initial Accreditation* (APR- IA) is similar to an APR for continuing accreditation. It must also document the full realization of the Plan for Achieving Initial Accreditation, including steps that may be taken after initial accreditation is received. All previous team reports, the eligibility memorandum, and the Plan for Achieving Initial Accreditation must be appended to the APR.

    5.6.3.B   **Dates and Deadlines.** APRs for Initial Accreditation (APR-IA) are due in the NAAB office by March 1 of the calendar year in which the initial accreditation visit is scheduled to take place. Revised APRs, if they are requested, are due not less than 45 days prior to the date for the visit.

    5.6.3.C   **Visiting Teams.** Observers are not permitted on teams for Initial Accreditation.

    5.6.3.D   **Site Visits.** Generally, these visits take place between the first week of September and the last weekend of October each year.

    5.6.3.E   **Visiting Team Report.** In addition to items in the VTR for continuing accreditation, the team is asked to included comments that may be helpful in preparing for future accreditations visits, if any.

5.7 First Term of Continuing Accreditation Following Initial Accreditation

Programs that achieve a three-year term of initial accreditation must receive an eight-year term or eight-year term with a *Plan to Correct* of accreditation following the first visit for continuing accreditation, or accreditation will be revoked.

In the event that the program applies and fails to achieve initial accreditation in less than six years, the balance of its candidacy 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 by the NAAB.

6   Special Circumstances

6.1 Request for Postponement of a Regularly Scheduled Visit

Under certain circumstances, a program may request postponement of a regularly scheduled visit for initial candidacy, continuation of candidacy or continuing accreditation. 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. Visits for initial accreditation, substantive change reviews, and nomenclature change reviews may not be postponed.

6.1.1   **Procedure for Requesting a Postponement.** Not later than July 1 of the year prior to a regularly scheduled visit, a program may request that the visit be postponed to the next academic semester or quarter (e.g., a visit scheduled for spring 2021 may be postponed to fall 2021). The request must include the following:

    6.1.1.A   A written request for the postponement from the institution's chief academic officer.

    6.1.1.B   A brief description of the reason(s) for requesting the postponement.

    6.1.1.C   A brief description of the benefit(s) of the postponement to the program, the institution, and the accreditation process.

    6.1.1.D   Requests to postpone visits originally scheduled for the following spring must be received in the NAAB office no later than July 1 of the year prior to a regularly scheduled visit. Requests to postpone visits originally scheduled for the fall must be received in the NAAB office no later than March 1 of the year of the originally scheduled visit.

    6.1.1.E   In the event of a natural disaster or other catastrophic incident that renders the program incapable of hosting the visit as scheduled, 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.

6.1.1.F   Requests are submitted in electronic format only and are limited to 3 pages and 200 KB, including all supplemental information. The request is to be sent either in Microsoft Word or Adobe PDF. Requests are to be addressed to the Executive Director, NAAB, at info@naab.org. Please include "Request for Postponement of Regularly Scheduled Visit – [Name of Institution]" in the subject line.

6.1.2   **Action on the Request**. The NAAB executive committee makes decisions to grant or deny a request for a postponement. The results of the decision will be communicated by a letter addressed to the institution's chief academic officer within seven days of the executive committee's decision.

6.2 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.

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

6.2.1.A   A written request to advance the date of the visit for initial accreditation from the institution's chief academic officer is sent to the NAAB. This request must include:
  a) A brief description of the reason(s) for requesting the earlier date.
  b) A brief description of the benefit(s) of advancing the date to the program, the institution and the accreditation process.

6.2.1.B   Requests to advance the date for visits originally scheduled for the fall must be received in the NAAB office no later than July 1 one year prior to the originally scheduled visit for initial accreditation.

6.2.1.C   Applications may be submitted in electronic format only and are limited to 3 pages and 200 KB, including all supplemental information. The request is to be sent either in Microsoft Word or Adobe PDF. Requests are to be addressed to the Executive Director, NAAB, at info@naab.org . Please include "Request for Advancing Regularly Scheduled Visit – [Name of Institution]" in the subject line.

6.2.2   Action on the Request. The NAAB executive committee makes decisions to grant or deny a request for advancing the date of a visit for initial accreditation. The results of the decision will be communicated by a letter addressed to the institution's chief academic officer within seven days of the executive committee's decision.

6.3 Early Termination of a Visit

6.3.1   Visits may be terminated only under extreme circumstances or catastrophic conditions. These include the following:
6.3.1.A   Incomplete team due to illness or extended travel delay.
6.3.1.B   Poor preparation by the program.
6.3.1.C   The team room is inadequate or incomplete.
6.3.1.D   The program is unable to provide adequate information when requested by the team.
6.3.1.E   Inadequate facilities and arrangements for the team.
6.3.1.F   Inability to follow schedule in an appropriate way.
6.3.1.G   Failure by any member of the team to comply substantially with established accreditation procedures.
6.3.1.H   Unanticipated crisis beyond the control of the program, institution, or team (e.g., weather emergency, state or national emergencies, or illness or death).

6.3.2   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.

6.3.3 The following options are available:
    6.3.3.A   Terminate the visit, to be rescheduled at a later time.
    6.3.3.B   Continue the visit, after evaluating the potential consequences to the outcome or potential disruption to the procedures.

6.3.4 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.

6.4 Request for Reinstating Accreditation

A request for reinstatement following revocation or in the event that 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 followed by initial accreditation, as described in Section 5. For programs requesting reinstatement, the minimum period of candidacy is one year.

6.5 Programs at Remote Locations

The NAAB recognizes that institutions continue to seek innovative ways in which to deliver curricula leading to a 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. 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 program/student accreditation criteria, have been achieved at all sites at which the NAAB-accredited degree is offered. For the purpose of NAAB accreditation of a first professional degree in architecture accredited by the NAAB, the following definitions apply:

6.5.1 **Definitions**
    6.5.1.A   **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.
- Has its own budgetary and hiring authority.
- Engages students and faculty in committees or professional organizations that are unique to the branch campus.
- Provides opportunities for research and scholarship 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., the University of California system or the University of Texas system). For the purposes of accreditation, institutional partnerships that offer a NAAB-accredited program at more than one main/flagship campus or more than one institution will be considered under this definition.

    6.5.1.B   **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.

- Has 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).
- Integrates faculty, staff, and students 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 and 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.

6.5.1.C **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.

6.5.1.D **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, unless 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.

6.5.2 **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 on the NAAB website 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:

- Curriculum
- Geographic location
- Administrative structure
- Budgetary and hiring authority and responsibilities
- Faculty access to committee assignments, research and scholarship opportunities, and participation in professional societies
- Student access to services and equipment, and participation in governance
- Physical resources

The responses to the questionnaire and the narrative taken together will be used by the team chair and the NAAB staff to determine which category to assign and what additional requirements may be added to the visit. The program will be notified as part of the APR review and acceptance process (Section 3.1) for changes to the APR and/or visit.

6.5.3 **Separate APRs and Separate Site Visits.** Programs on branch campuses will be treated as unique, individually accredited programs and will follow the procedures outlined in Section 5. This will require a separate APR and a separate visit.

6.5.4 **Expanded APR and Extended Visit**

6.5.4.A Programs with additional sites, teaching sites, or online learning are required to describe these sites in the APR and to identify the role(s) that 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.

6.5.4.B 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 sites. The additional or teaching sites will be visited by the visiting team chair and one other member of the team.

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.

6.5.5 New Programs at Branch Campuses or Additional Sites

6.5.5.A   Institutions 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 Section 5.

6.5.5.B   Programs initiating or altering additional sites, teaching sites, or online learning must provide this information in the *Program Annual Report* at the time 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.

6.5.6 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:

6.5.6.A   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.

6.5.6.B   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.

6.5.6.C   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.

6.5.7 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.

7   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. Substantive changes must be reviewed by the NAAB, prior to implementation by the program or institution, and if approved, may not be applied retroactively.

7.1 Substantive Change Requiring Review

7.1.1 Professional degrees and curriculum changes:

7.1.1.A   Changes to the curriculum of an existing program or track for completing the program that affects the admissions requirements of the program (e.g., shifting from a single-institution M. Arch. to an M. Arch. that requires a pre-professional undergraduate degree for admission).

7.1.1.B   Changes to the curriculum that effectively "split" an accredited single-institution program into a multi-degree sequence that concludes with an accredited graduate degree and that may require an undergraduate degree for admission (e.g., changing from a B. Arch. to an M. Arch. that requires a pre-professional degree for admission).

7.1.1.C   A program change that requires a significant change in pedagogy or the approach to delivering the professional degree (e.g., moving from traditional, on-campus learning to fully online learning).

7.1.2 Nomenclature change proposals are limited to the following:

7.1.2.A   Programs seeking to convert an existing B. Arch. program into a single-institution M. Arch. program through modest adjustments.

7.1.2.B   Programs seeking to convert an existing five-year, single-institution M. Arch program into a B. Arch. program through modest adjustments in the curriculum.

7.1.2.C   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.

7.1.3   **Institutional changes:**
　　7.1.3.A   Consolidation or merging institution offering an accredited degree with another institution.
　　7.1.3.B   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).
　　7.1.3.C   The addition of new tracks to existing accredited programs.
　　7.1.3.D   Phasing out an existing NAAB-accredited program.
　　7.1.3.E   Changes in the accreditation status of the institution.

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 that the program must pursue candidacy and initial accreditation, the Board may approve an accelerated schedule.

7.2 Application
Programs seeking approval of a substantive change must submit the following:

7.2.1   A letter from the chief academic officer of the institution requesting approval of the change.
7.2.2   A copy of the most recent decision letter from the NAAB.
7.2.3   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.
7.2.4   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:
　　7.2.4.A   Securing resources not already available to the program (e.g., faculty, space, financial support), if necessary.
　　7.2.4.B   Developing and implementing new courses and/or curricular sequences, if necessary.
　　7.2.4.C   Proposed last academic year in which students will be admitted to the program in its current configuration.
　　7.2.4.D   Plans for ensuring that students in the existing configuration are able to complete the program on time.
　　7.2.4.E   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.
　　7.2.4.F   A timeline showing key dates for the institutional change, including, but not limited to:
　　　　a)   State-required approvals.
　　　　b)   Regional accrediting agency-required approvals.
　　　　c)   Effective dates:
　　　　　　●   Last academic year in which students will be enrolled in the existing program or institutional configuration.
　　　　　　●   First academic year in which students will be enrolled under the new program or institutional configuration.
　　　　　　●   Last academic year in which students will graduate from the existing program or institutional configuration.
　　　　　　●   First academic year in which students will graduate from the new program or institutional configuration.

7.2.5   Applications for substantive changes are addressed to the associate director at the NAAB and may be sent at any time by email: info@naab.org. Please include "Application for Substantive Change – [Name of Institution]" in the subject line. Applications in either Word or Adobe PDF are limited to 50 pages and 2 MBs.

7.3 Additional Information Required

In addition to the items listed above, the following materials are required documentation specific to the type of change proposed**.**

7.3.1 Professional degree and curriculum change proposals
  7.3.1.A Description of the current degree program.
      a) The program's response to Condition 3.2, Professional Degrees and Curriculum.
      b) The matrix for Condition 4, Program and Student Performance Criteria (relating coursework to the criteria), for the current degree program.
  7.3.1.B Proposed new degree program or curriculum configuration.
      a) A description of the changes that will be made to the program, while also ensuring that it conforms to NAAB and institutional requirements, including:
      b) A narrative that responds to the requirements of Condition 3.2.
      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 5.6-5.9

7.3.2 **Merger or consolidation of institutions.** In the event that the merger or consolidation affects NAAB-accredited programs at both institutions, the NAAB may request additional material. Under this circumstance, please consult with the NAAB early in the process to determine the scope and scale of the review.
  7.3.2.A A description of the current program for Conditions 1, 2 and 5.1-5.5.
  7.3.2.B A description of the resources currently supporting the program Conditions 5.6-5.9
  7.3.2.C A description of the effect of the proposed change on the program's compliance with Conditions 5.6-5.9.
  7.3.2.D An assessment of the implications of the existing program for Conditions 1, 2 and 5.1-5.5 and on enrollment.

7.3.3 New or additional tracks for completing a NAAB-accredited degree program.
  7.3.3.A Proposals for new or additional tracks for completing a NAAB-accredited degree program must include all of the same materials as for a professional degree and curriculum change (see above).
  7.3.3.B An assessment of the implications of the new track for the existing program.

7.3.4 Nomenclature change.
  7.3.4.A Programs seeking approval of a nomenclature change request must have the following:
      a) A full term of continuing accreditation.
      b) Condition II.2 of the *2014* or *Conditions for Accreditation,* Curricular Framework, must have been met as of the last accreditation visit and VTR.
      c) No element of Condition II.3 of the *2014 Conditions for Accreditation* may be listed as a cause of concern in the most recent VTR.
      d) No more than four years have elapsed since the last regularly scheduled accreditation visit.
  7.3.4.B **The proposal for the nomenclature change must include** a description of the current degree program that includes:
      ● The program's response to Condition 3.2, Professional Degrees and Curriculum.
      ● The matrix for Condition 4, Program and Student Performance Criteria (relating coursework to the criteria), for the current degree program.
  7.3.4.C **The proposal must also include a description of the proposed new degree nomenclature**, and any changes that must be made to the program in order to conform to NAAB and institutional requirements, including:
      ● A new response to Condition 3.2.
      ● A new matrix for Condition 4, Program and Student Performance Criteria

(relating coursework to the criteria), for the accredited program under its new life.

- Any prerequisites.

7.4 Substantive Change Review Panel

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

7.4.2   The selected NAAB director will serve as the panel chair.

7.5 Responsibilities of the Panel Chair

7.5.1   Coordinate the review of documents with the other members of the panel.

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

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

7.5.4   Prepare the final *Substantive Change Report*.

7.6 Substantive Change Sequence

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

7.6.2   The panel will confer to determine whether the documentary evidence is sufficient for making a recommendation to the NAAB directors. Based on a review of the documentary evidence, the panel will reach one of the following initial decisions:
   - 7.6.2.A   The program has provided sufficient evidence for making a recommendation to the NAAB Board of Directors and no visit is necessary. The panel chair will prepare a report and the panel will follow the process below.
   - 7.6.2.B   The program must provide additional or supplemental materials before a recommendation can be made and no visit is necessary.
   - 7.6.2.C   A visit is necessary to obtain additional evidence or to confer with program administrators and other institutional leaders.

7.6.3   If the panel determines that no visit is necessary but additional information is needed:
   - 7.6.3.A   The panel chair requests the additional materials from the program. The panel may consult with program or institutional administrators by conference call.
   - 7.6.3.B   Once the panel has assembled the necessary materials and agrees that it has sufficient evidence on which to base 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 for implementing the change.
   - 7.6.3.C   The NAAB will provide a copy of the report to the program to correct errors of fact or omissions.
   - 7.6.3.D   The panel will prepare, as a separate document, a confidential recommendation to the Board, which is signed by all members of the panel. This document is confidential in perpetuity and is non-binding on the Board.
   - 7.6.3.E   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.

7.6.4   If the panel determines that a visit is necessary:
   - 7.6.4.A   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.

7.6.4.B   The scope of the visit is limited to the preparation by the institution or academic unit for implementing the substantive change.

7.6.4.C   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 change (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 change.

7.6.4.D   The program should be prepared to provide the reviewer with a secure workspace for use during his/her time on campus.

7.6.4.E   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.

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

7.6.4.G   The final copy of the report, with the recommendation of the review panel, will be sent to the NAAB Board for action.

7.6.4.H   The program, if it wishes, may submit a written response to the final report when it submits corrections of fact.

7.7 Recommendations for Substantive Change Proposals

The panel may make one of three recommendations to the NAAB Board of Directors. These do not apply to Phase-Out Plans (Section 7.8):

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

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

7.7.3   Deny the change.

In the event that 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 that the change results in a nomenclature change for the accredited degree, an effective date for the new degree title will be reported to NCARB.

7.8 Final Decision

The responsibility for the final decision rests with the NAAB directors. If approved, substantive changes may not be applied retroactively. In the event that the NAAB denies the substantive change request, the program must wait until after its next regularly scheduled accreditation visit to reapply. Decisions of the NAAB regarding substantive changes are not subject to reconsideration or appeal.

7.9 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:

7.9.1   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.

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

7.9.3   Implementation Plan. The plan must include the following:

    7.9.3.A   Teach-out date for the program. This is the date after which the institution will no longer award the degree.

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

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

    7.9.3.D   Last academic year in which students were admitted to the program in its current configuration.

    7.9.3.E   Table showing the number of students currently enrolled and their projected dates for graduation.

    7.9.3.F   Plans for ensuring that students currently enrolled in the NAAB-accredited degree program are able to complete the program by the teach-out date.

    7.9.3.G   Analysis of the number of students who may not complete the program by the teach-out date, and plans for advising them and ensuring that they can complete a NAAB-accredited degree.

    7.9.3.H   A plan for communicating with students, faculty, staff, alumni, and the state registration/licensing board; copies of all communications with the above-listed groups.

    7.9.3.I   Evidence that the program has publicly announced the phase-out of the program in all of its promotional materials, including websites.

7.9.4   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:

    7.9.4.A   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.

    7.9.4.B   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.

7.9.5   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.

7.9.6   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. Program and institution administrators are strongly encouraged to contact the NAAB before beginning any phase-out process.

7.10 Confidentiality

Panels must maintain strict confidentiality with respect to materials reviewed, interviews conducted, and deliberations held, 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.

8 Program Annual Reports

Continuing candidacy, initial accreditation and continuing accreditation are subject to the submission of *Program Annual Reports* 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 the *Program Annual Reports*, please refer to the ARS website.

8.1 Program Annual Report (PAR)

8.1.1 **Content.** The PAR has two parts. Part 1 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. Part 2 reports and documents action by the program on its *Plan to Correct* and any substantive changes within the program.

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

8.1.3 **Failure to Submit an Annual Report.** If an acceptable *Program Annual 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 that the program fails to request an extension and fails to submit an acceptable *Annual 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.

8.2 Review of PAR Part 2 *Plan to Correct* Documentation

8.2.1 Material submitted as evidence to document the completion of the program's *Plan to Correct* is reviewed by a panel assembled by the NAAB staff that includes at least three people: one current NAAB director, one former NAAB director, and one experienced team chair. In addition to the documentation mentioned above, the panel may require that the program submit student work examples chosen following a random selection method specified by the NAAB. The panel will make one of two recommendations to the Board:

    8.2.1.A   Accept the documentation as having demonstrated completion of actions required to correct any deficiencies according to the institution's *Plan to Correct* and recommend that the Board votes to eliminate the conditional status of the eight-year term.

    8.2.1.B   Reject the documentation as not demonstrating that the program has met its obligations as self-defined in its *Plan to Correct* and recommend that the program's accreditation term be reduced to a Five-Year Term.

8.2.2 The panel's recommendations will be forwarded to the Board for its next regularly scheduled meeting. The responsibility for the final decision rests with the NAAB Board of Directors. Decisions by the NAAB on the completion of the program's *Plan to Correct* is not subject to reconsideration.

9 Complaints about Programs

Individuals who wish to file a complaint that an accredited program is not currently complying with the Conditions must do so in writing.

9.1 Written Complaint

A letter, addressed to the NAAB president, and sent to the NAAB office at the address identified on the NAAB website, must include the following:

9.1.1   A description of the specific nature or subject of the complaint.

9.1.2   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.

9.1.3   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.

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

9.2 Process

9.2.1   Upon receiving a written complaint about a program, the NAAB will notify the program that a complaint has been received and forward a copy of the complaint. The NAAB will request a response from the program within 30 days, which may be extended by the NAAB for good cause.

9.2.2   The complaint and response are presented for review at the next Board meeting. At that time, the Board may consider the following:
9.2.2.A   Take no action.
9.2.2.B   Require the program to address the matter of the complaint in the next *Annual Report* and subsequent APR.
9.2.2.C   Append the complaint and response to the next VTR or Substantive Change Review Report to be considered as part of the record for the next accreditation action.

9.3 Exceptions

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

9.4 Timing

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 unless they are part of a continuing complaint.

10 Reconsiderations and Appeals of Reconsiderations

Programs may request timely 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 grounds is true:
- The Board's decision is contradicted by factual evidence cited in the record, or
- The NAAB and/or visiting team failed to comply substantially with these procedures, and any such failure significantly affected the Board's accreditation 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.
- Action regarding the acceptance of APRs or *Program Annual Reports*.

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

10.1 Initiating a Reconsideration

10.1.1 The reconsideration must be requested in writing by the chief academic officer of the institution within 14 days after receiving the NAAB's accreditation decision.

10.1.2 The request must be based on the record described below and set forth in reasonable detail the reasons why either or both of the grounds noted above are true.

10.1.3 The request must be sent to the NAAB executive director by certified mail, return receipt requested, UPS, or FedEx.

10.2 Reconsideration Sequence

10.2.1 Upon receiving the request, the NAAB executive director advises the NAAB president that a reconsideration request has been received.

10.2.2 The NAAB president assigns a NAAB director, which may include the president, to oversee the reconsideration until its conclusion. Other than having participated in the accreditation decision, the assigned director shall have had no present or prior involvement with the program and shall otherwise comply with the conflict of interest requirements of Section 2.5.

10.2.3 The assigned director sends the request for reconsideration to the team chair and requests a written response to the assertions set forth in the request.

10.2.4 In the event that the request is based on the failure to comply with these procedures, the assigned director sends the request for reconsideration to the NAAB executive director and requests a written response to the assertions set forth in the request

10.2.5 The assigned director, 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 and present the same to the Board along with all such noted documents which shall constitute the record for the Board's consideration.

10.2.6 Reconsideration on the record
    10.2.6.A If the program requests reconsideration, the reconsideration will be added to the agenda for the next regularly scheduled meeting of the Board.
    10.2.6.B The record for reconsideration will be the following:
        a) The APR
        b) The VTR.
        c) The team's confidential recommendation on information for the *Plan to Correct*
        d) The program's response to the VTR.
        e) The program's *Plan to Correct*
        f) The program's request for reconsideration.
    10.2.6.C In addition, the Board will consider the following background material:
        a) The visiting team chair's response.
        b) The NAAB executive director's response.
        c) The assigned director's analysis.
    10.2.6.D If the team chair has subsequently become a NAAB director, that individual is excused from the deliberations.
    10.2.6.E The NAAB directors shall 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.
    10.2.6.F Reconsideration of the accreditation decision
        a) If the motion to reconsider is approved, a new motion on the accreditation

action will be made.

    b) Any new motion regarding a reconsidered term of accreditation must be based only on materials provided in the record.

    c) Any new motion regarding a reconsidered term of accreditation must have at least eight votes in favor to pass.

10.2.6.G Not less than seven days after the meeting of the Board of Directors where the term of accreditation was reconsidered or failed a motion for reconsideration, the NAAB executive director shall send the institution the decision, which shall be final.