



July 9, 2014

Dr. Argile Smith  
President Pro Tempore  
Louisiana College  
1140 College Drive  
Pineville, LA 71359

Dear Dr. Smith:

The following action regarding your institution was taken by the Board of Trustees of the Southern Association of Colleges and Schools Commission on Colleges during its meeting held on June 19, 2014:

The SACSCOC Board of Trustees reviewed the institution's response to unsolicited information alleging non-compliance with the following sections of the *Principles of Accreditation*: Principle 1.1 (Integrity), Core Requirement 2.2 (Governing board), Comprehensive Standard 3.2.4 (External influence), Comprehensive Standard 3.2.9 (Personnel appointment), Comprehensive Standard 3.2.10 (Administrative staff evaluations), and Comprehensive Standard 3.10.3 (Control of finances).

The Commission continued accreditation and placed the institution on **Probation** for **twelve** months for failure to comply with Principle 1.1 (Integrity), Comprehensive Standard 3.2.4 (External influence), Comprehensive Standard 3.2.9 (Personnel appointment), Comprehensive Standard 3.2.10 (Administrative staff evaluations), Comprehensive Standard 3.10.3 (Control of finances), and Federal Requirement 4.7 (Title IV program responsibilities) of the *Principles of Accreditation*. The Commission authorized a special committee to visit the institution.

The institution is requested to submit a First Monitoring Report due **April 15, 2015 or four weeks before the visit of the Special Committee, whichever comes first**, addressing the following referenced standards of the *Principles*:

**PR 1.1 (Principle of Integrity)**

The voluminous documents submitted by the institution are interspersed with narrative that is laced with opinions, accusations and vilification of former employees, unusual characterization of SACSCOC actions, and dissenting Trustees, rather than recognition of deficiencies of institutional processes to insure integrity and establishing policies and procedures to remedy the concerns.

The documents provided by the institution disclose: 1) a pervasive culture of avoidance of transparency in the institution's operations; 2) multiple cases of conflicting documentation of "facts;" 3) the apparent unauthorized use of restricted funds; 4) the presence of forged documents in a submission to SACSCOC; and 5) several mischaracterizations of SACSCOC actions. This latter concern includes: a claim of SACSCOC exoneration of the President from allegations filed in a complaint, a misrepresentation regarding the reasons for the denial of approval of a law school, and a claim that SACSCOC explicitly approved a College policy.



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Moreover, no policy or procedural actions were provided to show actions taken to protect the institution and donors from the risk of misapplying restricted funds or the targeting of a Whistleblower with adverse and unprecedented personnel actions.

When considering the core facts from the documents, it can be seen that the institution currently admits that there are forgeries and inaccuracies in personnel review documents submitted to SACSCOC. There is disagreement in the documents, however, as to whether the President or his Assistant committed the forgeries; moreover, neither the institution nor the President in the institution's response adequately explains the origin or motivation for the forgeries. There is no document from the institution that accepts responsibility for discovering and preventing such acts in the future other than a single reference in an email to SACSCOC.

Irreconcilable documents appear in several cases within the response. A report generated by a third-party law firm (with attached documents from third-party interviewees) commissioned by the then-Chairman of the Board of Trustees finds that the President is culpable and central in deceiving the Board of Trustees, misusing restricted funds, and manipulating both donor conversations and SACSCOC statements. Different documents are provided to show no issues or to discredit the source of the allegations. After a change in the make-up of the Board's Executive Committee, subsequent minutes and the institutional response to SACSCOC letters of inquiry, irreconcilable versions of the same situation are presented.

All of these actions and others taken as a whole lead to an institutionally encompassing concern: a prevalent culture demonstrated by administrative staff and the governing board of misstating, ignoring, or denying matters of documentable fact, and generating an apparent pattern of breaches in institutional integrity. The institution must demonstrate the presence of integrity in all of its actions and policies complying with PR 1.1.

#### **CS 3.2.4 (External Influence)**

Some of the evidence provided suggests the governing board accepts the notion expressed by the Executive Director of the Louisiana Baptist Convention speaking to the Executive Committee of the institution (of which he is not a member) that, since the Louisiana Baptist Convention "owns" the College, the directives of the LBC supersede actions or intended actions of the board. What seems to be missing is a broader institutional issue of developing an agenda for serving students in an appropriate faith-based environment.

Comprehensive Standard 3.2.4 requires that governing boards act independently of external individuals or organizations, to include religious bodies, in order to support the welfare of their institutions. The institution should demonstrate that its governing board acts without undue external influence.



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**CS 3.2.9 (Personnel Appointment)**

The institution appears to have singled out at least one Whistleblower for an "interim" annual evaluation" in March 2013 for which there is not precedent or policy. The individual's prior annual evaluation reported perfect job performance (dated June 2009 – it is not clear if there were evaluations in the interim between these two dates). The unprecedented "interim" evaluation was highly negative and occurred during the time when the Whistleblower was objecting to various actions of the President. The institution must demonstrate it complies with its existing personnel policies, including those pertaining to personnel evaluations and the protection of Whistleblowers.

**CS 3.2.10 (Administrative Staff Evaluations)**

There is significant evidence that at least three signatures of employee annual reviews that were submitted to the SACSCOC in prior reports were forged. Additionally, when asked for documents to demonstrate current compliance with this standard, only one such document was submitted. The single example provided was dated September 2010, yet the institution's policy calls for annual evaluation. The institution must demonstrate that it completes annual administrative staff evaluations as required by the policies of the institution and ensures that these are accurate documents with no forged signatures or altered content.

**CS 3.10.3 (Control of Finances)**

According to the FY 2013 audit, FY 2012 was not a good year, with a negative change in unrestricted net assets of about (\$1.56) million and an overall negative change in net assets of about (\$1.31) million. FY 2013 showed improvement, with a positive change in unrestricted net assets of about \$0.31 million and an overall positive change in net assets of about \$3.13 million. The positive change in unrestricted net assets was attributable to a very strong increase in the value of investments, with over \$0.82 million in realized and unrealized gains on unrestricted investments. In FY 2013, net cash used in operating activities was a negative (\$0.86 million).

Apparently the A-133 portion of the audit was not available when the institution submitted materials that were reviewed in December 2013. In the Schedule of Findings and Questioned Costs, the FY 2013 audit included four findings regarded as significant deficiencies, some of which appear to relate to some of the issues discussed in other parts of the submitted materials. The findings are:

- 2013-01 - Documentation of minutes of board meetings
- 2013-02 - Use of restricted funds
- 2013-03 - Inadequate control of credit card purchases
- 2013-04 - Inadequate control of scholarship awarding procedures



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The institution should demonstrate that it complies with CS 3.10.3 by addressing the above findings as well as any findings that may appear in the FY2014 audit and management letter.

**FR 4.7 (Title IV Program Responsibilities)**

The College had two additional significant deficiency findings in the Student Federal Financial Assistance Program administration, as well as a qualified opinion on the basis of these findings. The findings are:

- 2013-05 - Satisfactory Academic Progress
- 2013-06 - Required Student Financial Aid File Documentation

The institution should demonstrate that has addressed these findings and that it fulfills its Title IV responsibilities. As part of the report, the institution is required to submit financial audit reports and management letters for the two most recent fiscal years, and include its two most recent financial aid audits. The most recent year is defined as the fiscal year ending immediately prior to the due date of this report. In addition, the institution is required to include a statement of financial position of unrestricted net assets, exclusive of plant assets and plant-related debt, which represents the change in unrestricted net assets attributable to operations for the most recent year.

Guidelines for the monitoring report are enclosed. Because it is essential that institutions follow these guidelines, **please make certain that those responsible for preparing the report receive the document. If there are any questions about the format, contact the Commission staff member assigned to your institution.** When submitting your report, please send **six copies** to your Commission staff member.

Because your institution has been placed on Probation, the Commission calls to your attention the enclosed policy "Sanctions, Denial of Reaffirmation, and Removal from Membership."

Federal regulations and Commission policy stipulate that an institution must demonstrate compliance with all the standards and requirements of the *Principles of Accreditation* within two years following the Board of Trustees' initial action on the institution. At the end of that two-year period, if the institution continues on Probation and does not comply with all the standards and requirements in the *Principles*, representatives from the institution will be required to appear for a meeting on the record before SACSCOC Board of Trustees, or one of its standing committees, to answer questions as to why the institution should not be removed from membership.

Please note that an institution's accreditation cannot be extended if it has been on Probation for two successive years. If the institution is not in compliance at the end of two years on Probation, removal from membership is mandatory. *The institution bears the burden of proof to provide evidence why the Commission should not remove it from membership.*



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In addition, if the institution does not make substantial progress in its compliance with all the standards and requirements in the *Principles* within the two-year period of monitoring while on Probation, removal from membership is a Board option. If that is the case, representatives from the institution will be invited to appear before the Board of Trustees, or one of its standing committees, to answer questions as to why the institution should not be removed from membership.

In accordance with Commission policy, and as noted earlier, a Special Committee has been authorized to visit your institution to review evidence of compliance with the specific standards of the *Principles* cited in this notification letter. The Committee may extend its initial focus if any evidence of additional accreditation-related concerns comes to its attention. When an institution is cited for non-compliance with financial standards, the Committee will examine its effect on the other aspects of the institution to determine ongoing compliance with the standards. Your Commission staff member will contact you to discuss arrangements for this Special Committee.

If you have any questions regarding this letter or the process, please contact your Commission staff member.

Sincerely,

A handwritten signature in cursive script that reads "Belle S. Wheelan".

Belle S. Wheelan, Ph.D.  
President

BSW:ch

Enclosures

cc: Dr. Michael S. Johnson  
Dr. Tommy French, Chairman of the Board of Trustees



Southern Association of Colleges and Schools  
Commission on Colleges  
1866 Southern Lane  
Decatur, Georgia 30033-4097

## REPORTS SUBMITTED FOR COMMITTEE OR COMMISSION REVIEW

### - Policy Statement -

Institutions accredited by the Commission on Colleges are requested to submit various reports to an evaluation committee or to the Commission's Board of Trustees for review. Those reports include:

Response Report to the Visiting Committee  
Monitoring Report or Referral Report

When submitting a report, an institution should follow the directions below, keeping in mind that the report will be reviewed by a number of readers, most of whom will be unfamiliar with the institution.

### Information Pertaining to the Preparation of All Reports

#### *Preparation of a Title Page*

For any report requested, an institution should prepare a title page that includes the following:

1. Name of the institution
2. Address of the institution
3. Dates of the committee visit (*not applicable for the Referral Report*)
4. The kind of report submitted
5. Name, title, and contact numbers of person(s) preparing the report

#### *Presentation of Reports*

For any report requested, an institution should

1. **For print copies**, copy all documents front and back, double-space the copy, and use no less than an 11 point font. If the report requires binding beyond stapling, do not submit the report in a three-ring binder. Ring binders are bulky and must be removed before mailing to the readers.
2. **For electronic copies**, copy the report and all attachments onto an electronic memory device (e.g., external hard-drive, DVD, CD, or flash/thumb drive). Provide the name of the person who can be contacted if the readers have problems accessing the information. Provide **one print copy** of the response without the attachments.

Each electronic memory device smaller than 4" by 4" should be submitted in a paper or plastic envelope not smaller than 4 x 4 inches and the envelope should be labeled with the name of the institution, the title of the report, and the list of document contents. The electronic memory device should be labeled with the name of the institution and the title of the report.

Each electronic memory device larger than 4" by 4" should be in a paper or plastic envelope and clearly labeled with the name of the institution, the title of the report, and the list of document contents. The electronic memory device should be labeled with the name of the institution and the title of the report.

3. Provide a clear, complete, and concise report. If documentation is required, ensure that it is appropriate to demonstrating fulfillment of the requirement. Specify actions that have been taken and, when possible, document their completion.
4. When possible, excerpt passages from text and incorporate the narrative into the report. Provide definitive evidence, not documents that only address the process (e.g., do not include copies of letters or memos with directives).
5. Specify actions that have been taken and provide documentation that such actions have been completed. Avoid vague responses indicating that the institution plans to address a problem in the future. If any actions remain to be accomplished, the institution should present an action plan, a schedule for accomplishing the plan, and evidence of commitment of resources for accomplishing the plan.
6. When possible and appropriate, provide samples of evidence of compliance rather than all documents pertaining to all activities associated with compliance.
7. Reread the report before submission and eliminate all narrative that is not relevant to the focus of the report. If sending electronic copies, ensure that all devices are virus free and have been reviewed for easy access by reviewers external to your institution.

### **Information Specific for the Response to the Visiting Committee Report**

- Definition:** A Response Report addresses the findings of a visiting committee. It provides updated or additional documentation regarding the institution's compliance with the *Principles of Accreditation*.
- Audience:** The Response Report, along with the Committee Report and other documents, is reviewed by the Commission on Colleges' Board of Trustees and is subject to the review procedures of the Commission's standing committees, including the continuation of a monitoring period, the imposition of a sanction, or a change of accreditation status.
- Report Presentation:** Structure the response so that it addresses committee recommendations in the order that they appear in the report. Tabs should separate each response to a recommendation.
- For each recommendation, provide the number of the Core Requirement, Comprehensive Standard, or Federal Requirement and state the recommendation exactly as it appears in the visiting committee report. Describe the committee's concerns that led to the recommendation by either summarizing the concerns or inserting verbatim the complete narrative in the report pertaining to the recommendation. Provide a response with documentation.
- Due Date:** The Response Report is due on the day indicated in the transmittal letter from Commission staff accompanying the visiting committee report.
- Number of Copies:** See the transmittal letter from Commission staff accompanying the visiting committee report.

## Information Specific to the Preparation of a Monitoring Report or a Referral Report

- Definition:** These reports address recommendations and continued concerns of compliance usually identified by the Committee on Compliance and Reports or the Executive Council (or, for a Referral Report, identified by the Committee on Fifth-Year Interim Reports). It usually follows the C & R Committee's review of an institution's response to a visiting committee report.
- Audience:** The Monitoring Report and the Referral Report are reviewed by the Commission on Colleges Board of Trustees and are subject to the review procedures of the Commission's standing committees, including the continuation of a monitoring period, the imposition of a sanction, or a change of accreditation status.
- Report Presentation:** *For a Monitoring Report*, structure the response so that it addresses committee recommendations in the order that they appeared in the report. Tabs should separate each response to a recommendation.
- For each recommendation, (1) restate the number of the Core Requirement, Comprehensive Standard, or Federal Requirement, the number of the recommendation, and the recommendation exactly as it appeared in the visiting committee report; (2) provide a brief history of responses to the recommendation if more than a first response (to include an accurate summary of the original concerns of the visiting committee, a summary of each previous institutional response and an explanation of what had been requested by the Commission); (3) cite verbatim the current request of the Commission that is related to the recommendation (reference notification letter from the President of the Commission); and (4) prepare a response to the recommendation.
- For a Referral Report*, structure the response so that it addresses the concerns described in the letter from the Commission's President in the order that they appeared. Tabs should separate each response to each standard cited.
- For each standard cited, (1) restate the number of the Core Requirement, Comprehensive Standard, or Federal Requirement exactly as it appeared in the letter; (2) cite verbatim the current request of the Commission that is related to the standard cited (reference notification letter from the President of the Commission); and (3) prepare a response to the recommendation.
- Due Date:** The Monitoring Report and the Referral Report are due on the date specified in the Commission President's notification letter. Requests for extensions to the date must be made to the President of the Commission two weeks in advance of the original due date. (See *Commission policy "Deadlines for Submitting Reports."*)
- Number of Copies:** See the letter from the President of the Commission requesting the Report.

**Document History**  
*Edited and Revised for the Principles of Accreditation: December 2003*  
*Updated: January 2007, January 2010, May 2010, January 2012*





Southern Association of Colleges and Schools  
Commission on Colleges  
1866 Southern Lane  
Decatur, Georgia 30033-4097

## **SANCTIONS, DENIAL OF REAFFIRMATION, AND REMOVAL FROM MEMBERSHIP**

### **Policy Statement**

The Southern Association of Colleges and Schools Commission on Colleges (SACSCOC) requires that a member institution be in compliance with *the Principles of Accreditation: Foundations for Quality Enhancement* and its Core Requirements, comply with Commission policies and procedures, and provide information requested by the Commission's Board of Trustees in order to maintain membership and accreditation. When an institution fails to comply with these requirements within a maximum two-year monitoring period, the Commission may impose sanctions. Monitoring reports submitted during this period are not sanctions.

If the Commission determines that an institution's progress is insufficient during the two-year monitoring period but not significant enough to impose a sanction, the Commission will advise the institution that if progress or compliance is insufficient at the time of its next formal review by the SACSCOC Board of Trustees, the institution could be placed on sanction or removed from membership. (Institutions applying for membership with SACSCOC should refer to the Commission policy "Accreditation Procedures for Applicant Institutions" for procedures concerning the denial or removal of candidacy, or the denial of initial membership.)

Failure to make adequate progress toward compliance at any time during the two-year period or failure to comply with the *Principles* at the conclusion of two years may result in Commission action to remove accreditation.

The Commission's requirements, policies, processes, procedures and decisions are predicated on integrity. SACSCOC expects integrity to govern the operation of institutions. Therefore, evidence of withholding information, providing inaccurate information to the public, or failing to provide timely information to the Commission may be construed as an indication of the lack of a full commitment to integrity and may result in the imposition of sanctions or removal of accreditation.

### **Sanctions**

An institution found to be out of compliance with the *Principles of Accreditation* must correct the deficiencies or face the possibility of being placed on one of two sanctions: Warning or Probation, in order of degree of seriousness. These sanctions are not necessarily sequential, and the Commission may place an institution on either sanction with or without reviewing a visiting committee's report and with or without having previously requested a monitoring report, depending on the seriousness and extent of noncompliance. In certain circumstances, an institution may be removed from membership without having previously been placed on sanction.

During the two-year monitoring period, institutions may be placed on a sanction for six or twelve months, with a monitoring report required at the end of the period of the sanction. Institutional accreditation cannot be reaffirmed while the institution is on sanction. Denial of reaffirmation of accreditation and invocation of sanctions are not appealable actions. Actions invoking sanctions are publicly announced at the annual meeting of the College Delegate Assembly, posted on the SACSCOC website, and published in the *Annual Reports of SACSCOC*.

The characteristics of these sanctions include the following:

**Warning** – The less serious of the two sanctions, Warning is usually, but not necessarily, levied in the earlier stages of institutional review and often, but not necessarily, precedes Probation. It cannot, however, succeed Probation. An institution may be placed on Warning or Probation for noncompliance with any of the Core Requirements or significant noncompliance with the Comprehensive Standards. Additionally, an institution may be placed on Warning for failure to make timely and significant progress toward correcting the deficiencies that led to the finding of noncompliance with any of the *Principles of Accreditation*. An institution may also be placed on Warning for failure to comply with Commission policies and procedures, including failure to provide requested information in a timely manner. The maximum total time during one monitoring period that an institution may be on Warning is two years.

**Probation** – Failure to correct deficiencies or failure to make satisfactory progress toward compliance with the *Principles of Accreditation*, whether or not the institution is already on Warning, may result in the institution being placed on Probation. An institution may be placed on Probation for the same reasons as discussed above regarding Warning if the Commission's Board of Trustees deems noncompliance with the *Principles* to be serious enough to merit invoking Probation whether or not the institution is or has been on Warning. Probation is a more serious sanction than Warning and is usually, but not necessarily, invoked as the last step before an institution is removed from membership. Probation may be imposed upon initial institutional review, depending on the judgment of the Board regarding the seriousness of noncompliance or in the case of repeated violations recognized by the Board over a period of time. An institution must be placed on Probation when it is continued in membership for Good Cause beyond the maximum two-year monitoring period (see section on "Good Cause" below). The maximum consecutive time that an institution may be on Probation is two years.

### **Denial of Reaffirmation of Accreditation with the Imposition of a Sanction**

If an institution is judged by the SACSCOC Board of Trustees to be out of compliance with a Core Requirement, it will be placed on a sanction. For an institution seeking reaffirmation of accreditation, its reaffirmation will be denied, and it will be placed on a sanction. If an institution is judged to be significantly out of compliance with one or more of the Comprehensive Standards, its reaffirmation of accreditation may be denied. The action of denying reaffirmation of accreditation will be accompanied by the imposition of a sanction. The institution's accreditation will not be reaffirmed while it is on Warning or Probation, but its accreditation will be continued. Denial of reaffirmation does not affect the decennial review schedule.

### **Removal from Membership**

An institution may be removed from SACSCOC membership at any time, depending on the Board of Trustees' judgment of the seriousness of noncompliance with the *Principles of Accreditation* or with the Commission's policies and procedures. Removal from membership, however, usually occurs after persistent or significant noncompliance during a monitoring period or any time an institution is being followed for Good Cause. A serious instance of noncompliance or repeated instances of noncompliance may result in removal of membership without a monitoring period. If an institution has filed bankruptcy, the SACSCOC Board of Trustees may revoke the institution's accreditation for failure to comply with the *Principles of Accreditation* during the pendency of the bankruptcy.

An institution must be removed from membership if it has not demonstrated compliance with all the *Principles of Accreditation* within the two-year monitoring period and has not demonstrated Good Cause as to why it should not be dropped from membership. If an institution is continued in membership for Good Cause beyond the two-year monitoring period (and then only on Probation), it may be removed from membership at any time but must be removed from membership if it does not demonstrate compliance within the two years beyond the end of the two-year monitoring period (see "Good Cause" below).

When an institution fails to pay its dues by the designated deadline, the Commission will assume from this action that the institution no longer wants to maintain its membership or candidacy with SACSCOC. By that action, the

institution withdraws from membership or candidacy. The SACSCOC Board of Trustees will take official action on the termination of accreditation. However, if an institution has filed bankruptcy, the Board may not act to revoke accreditation for failure to pay membership fees and dues during the pendency of bankruptcy.

In accord with 34 CFR Section 602.24 of the Federal Code, notification of SACSCOC Board of Trustees action to withdraw or terminate membership will be accompanied by a request that the institution submit a teach-out plan to the Commission for approval. (See Commission policy "Substantive Change for SACSCOC Accredited Institutions" for the specific procedures.) This is applicable if (1) the institution fails to appeal the decision of the Commission's Board of Trustees or (2) the institution appeals the Board's decision and the Appeals Committee rules in favor of the Board.

## **Procedures for Applying Sanctions and for Terminating Membership**

Recommendations for Warning, Probation, and removal of membership are made by one of the Committees on Compliance and Reports to the Executive Council of the Commission. The Council forwards recommendations on Warning, Probation, and removal from membership to the SACSCOC Board of Trustees, which takes final action subject to any rights of appeal which the institution might have as described in Commission policies. Action placing an institution on Warning or Probation is not appealable.

In the cases of Warning, Probation, or loss of membership, both the chief executive officer and the chair of the institution's governing board will be informed in writing. (For public institutions that are part of a state system, the chief executive officer of the system will also receive a copy of the notification sent to the institution.) The Commission will include in its notification to the institution reasons for the imposition of sanction or for loss of membership.

An action to place an institution on Warning or Probation, to deny reaffirmation, or to remove an institution from membership, along with the reasons for the action, will be read during the annual meeting of the College Delegate Assembly, posted on SACSCOC website, and recorded in the *Annual Reports of SACSCOC*. Actions which are appealable will be accompanied by a statement that Commission action will not take effect until the time period for filing an appeal has expired or until final action has been taken on the appeal. The Commission policy on disclosure is also applicable to these actions.

## **Definition and Conditions for Good Cause**

If an institution has not remedied deficiencies at the conclusion of its two-year maximum monitoring period, the SACSCOC Board of Trustees must (1) remove the institution from membership, or (2) continue accreditation for "good cause". If accreditation is extended for "good cause," the institution must also be placed on or continued on Probation.

An institution's accreditation can be extended for "good cause" if

1. the institution has demonstrated significant recent accomplishments in addressing non-compliance (e.g., the institution's cumulative operating deficit has been reduced significantly and its enrollment has increased significantly), and
2. the institution has documented that it has the "potential" to remedy all deficiencies within the extended period as defined by the Committee on Compliance and Reports; that is, that the institution provides evidence which makes it reasonable for the Commission to assume it will remedy all deficiencies within the extended time defined by the Committee on Compliance and Reports, and
3. the institution provides assurance to the Commission that it is not aware of any other reasons, other than those identified by SACSCOC Board of Trustees, why the institution could not be continued for "good cause."

The SACSCOC Board of Trustees may extend accreditation for "good cause" for a maximum of one year. At the conclusion of the period, the institution must appear before the Board of Trustees at a meeting on the record to

provide evidence of good cause as to why its period for remedying deficiencies should be extended again for good cause. If an institution was on Probation both years of its two-year monitoring period following initial action on deficiencies, the institution is not eligible for good cause consideration because an institution cannot be on Probation for more than two consecutive years. Since continued accreditation for good cause imposes the sanction of Probation and a third year on Probation is against Commission policy, the institution is ineligible for consideration of good cause. (See above under "Probation.")

In all cases, the institution bears the burden of proof to provide evidence why the Commission should not remove it from membership.

Document History

Approved: Commission on Colleges, June 2003  
Revised for the Principles of Accreditation, December 2003  
Revised: SACSCOC Board of Trustees, July 2005, June 2011,  
December 2012, December 2013