



Procedures for Accreditation

2020 Edition

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National Architectural Accrediting Board

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Introduction

The National Architectural Accrediting Board (NAAB) is both a decision-making and a policy-generating body composed of a 14-member Board of Directors. It is an independent, nonprofit corporation designated as tax-exempt under USC 26 § 501(c)(3). 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 (the Board) has at least three regular meetings per year.

The two major documents that govern accreditation are the NAAB *Conditions for Accreditation* (*Conditions*) and the NAAB *Procedures for Accreditation* (*Procedures*). 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 were in 2021 had 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 to ensure a uniform accrediting process, including requirements for program Annual Reports. Schools using the 2020 *Conditions* are required to follow the 2020 *Procedures*. Schools with visits in 2021 that opted to use the 2014 *Conditions* used the 2015 *Procedures*.

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.

Acronyms

ARC	Accreditation Review Committee
APR	Architecture Program Report
APR-IA	Architecture Program Report for Initial Accreditation
APR-C	Architecture Program Report for Candidacy
FERPA	Family Educational Rights and Privacy Act
VTR	Visiting Team Report

Definitions

Days	Calendar days
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TERMS OF ACCREDITATION

NAAB's system for accreditation of professional degree programs in higher education institutions requires a self-assessment by the accredited-degree program, an evaluation of that assessment by NAAB, and a decision regarding the term of accreditation by the NAAB Board of Directors.

Although there are minor differences among the procedures that apply to eligibility, initial candidacy, continuation of candidacy, initial accreditation, and 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 NAAB approves a further motion for a term of accreditation.

The following are the stages of accreditation:

Stage I: Eligibility

The first step toward accreditation of a professional degree program in architecture is an eligibility application, submitted as early in the program's development as possible. Its purpose is to outline a plan and timeline to complete the steps necessary for initial accreditation, in consultation with NAAB. 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 (APR-C) to apply for initial candidacy.

Stage II: Candidacy

After receiving an eligibility decision from NAAB, the institution must develop a detailed plan and candidacy application. NAAB strongly encourages institutions to seek guidance from NAAB before proceeding with the development of a candidacy application and to work with NAAB to establish a calendar for candidacy and initial accreditation. Programs seeking candidacy may be granted an initial period of candidacy of 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. Should a program fail to achieve initial accreditation within the maximum period, it must submit a new candidacy application.

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. NAAB will grant the term of accreditation based on the following:

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

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

Stage IV: First Term of Continuing Accreditation Following a Term of Initial Accreditation

The first visit for continuing accreditation will be three years from the year in which the visit for initial accreditation was conducted. Programs that have achieved a term of initial accreditation may receive either an eight-year term of accreditation or an eight-year term with a Progress Report; if neither term is granted, accreditation will be revoked. 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 may reapply for initial candidacy.

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:

Eight-Year Term. This term indicates that the program has met all conditions and is accredited for an eight-year period.

Eight-Year Term with a Progress Report. This term indicates that the program has unmet conditions and must submit an adequate Progress Report stating the specific actions the program will take in the next two years to correct the conditions not met. Programs with a Progress Report will have two years to demonstrate compliance with the Conditions of Accreditation noted to be out of compliance.

RESPONSIBILITIES AND CONFLICTS OF INTEREST

Responsibilities Regarding the Use of Artificial Intelligence (AI) Systems

Programs are responsible for adhering to the “NAAB Policy on the Use of Artificial Intelligence Systems (AI Systems) in Accreditation” (Appendix 2).

Responsibilities of Schools/Programs

The program is responsible for:

- Submitting an APR to NAAB by the deadline specified in these *Procedures*.
- Providing team members with copies of the final APR in the format specified by NAAB at least 60 days before the first day of the visit.
- 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 before the visit begins.
- Notifying the NAAB office at least 30 days before 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 team members.
- 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.
- Providing supporting materials and student work examples as required by NAAB in these *Procedures*.
- Ensuring completion of the required NAAB assessment and evaluation survey(s) by the program administrator within 10 days of the end of the visit.
- Submitting a Progress Report, if needed, to NAAB by the required deadline.

Responsibilities of the NAAB Office

The NAAB staff is responsible for:

- Communicating to the program the names of the team chair and team members in a timely manner.
- Ensuring that the visiting team chair, team members, and observers are informed of their responsibilities.
- Providing the team chair and team members with the *Conditions* and the *Procedures*, and a template for completion of the VTR at least 45 days before the visit.
- Approving all airline reservations made through the NAAB’s travel system.
- Communicating with team members on behalf of the program. Team members are advised not to communicate directly with one another or with the program; this is the responsibility of the NAAB staff and the team chair.

- Communicating with the program on corrections of errors of fact in the VTR before the VTR is transmitted to the board and on Plans to Correct, if required, following the board's decision on the accreditation action.
- Billing programs for the expenses of the visiting team. Invoices will be sent not later than July 1 for visits that took place in the spring and not later than February 1 for visits that took place in the fall. NAAB will provide the following supporting documentation:
 - a) Copies of invoices or itineraries for air travel or other transportation.
 - b) Copies of receipts for ground transportation, including rental cars.
 - c) Copies of receipts for all meals and other expenses.

Responsibilities of Team Chairs

The visiting team chair is responsible for the following:

- Attending team chair training.
- Reviewing the APR and identifying needs for additional information, or requesting changes to the APR.
- Setting the date for the visit, in consultation with the program administrator.
- Developing the agenda for the visit, in consultation with the program administrator.
- Consulting with the program administrator on the format and content of the team room as well as materials to be furnished electronically before the visit.
- Hosting mandatory previsit conference calls with the team.
- Ensuring the team's compliance with the *Procedures for Accreditation* and appropriate standards of conduct during the visit.
- 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.
- Securing the signatures of all team members on the report.
- Completing the required NAAB assessment and evaluation survey(s) within 10 days of submitting the VTR.

Responsibilities of Team Members

All team members are responsible for:

- Completing the required NAAB team training programs before being assigned to a visiting team.
- Contacting the NAAB office to confirm participation in the site visit not less than eight weeks before the visit.
- Reviewing NAAB's Conflicts of Interest procedure 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 NAAB.
- Reviewing and agreeing to NAAB's policies on anti-harassment and confidentiality.

- Making air travel arrangements no later than 21 days before the visit to secure economical fares with NAAB's provider of travel services.
- Notifying the NAAB office immediately in the event of a personal emergency that renders a team member unable to fulfill his/her responsibilities. If a team member withdraws from a team less than 30 days before the visit for reasons other than a personal or health emergency, the individual will be permanently removed from the pool of potential team members.
- Holding information in the strictest confidence as specified in these Procedures.
- Reviewing the *Conditions* and the *Procedures*, the program's APR, program Annual Reports, the VTR template, and advance materials assigned by the team chair. Team members should not communicate directly with one another or with the program; this is the responsibility of the NAAB staff and the team chair.
- Participating in two previsit conference calls and reviewing documentary material.
 - a) **Team Conference Call #1.** Team members, including observers, participate in a mandatory previsit 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 review of electronic evidence and, later, during the visit. This call will take place at least 30 days before the start of the visit.
 - b) **Team Conference Call #2.** Team members, including the observers, participate in a second, mandatory previsit conference call to review the results of the review of electronic evidence, identify missing materials, 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.
- Actively participating in or observing all aspects of the visit and any previsit activities (reviewing the APR and evidence provided before the on-site visit) and carrying out all tasks assigned by the 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.
- Participating in writing of the VTR.
- Completing an initial draft of the VTR before the end of the visit.
- Promptly suggesting any revisions to the VTR to the team chair.
- Completing and submitting a reimbursement request in a timely manner.
 - a) The reimbursement form will be provided by NAAB staff.
 - b) Requests for reimbursement must be submitted within 30 days of the end of the visit and must include:
 1. Receipts for ground transportation, including rental cars.
 2. Itemized Receipts for all meals and incidental expenses.

- 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) In the event that a team member has already completed travel reservations and must withdraw from the team for other than a personal or health emergency, he/she will be invoiced for the expense of the travel.
- Completing the required NAAB assessment and evaluation survey within 10 days of the end of the visit.

The Accreditation Review Committee

The Accreditation Review Committee (ARC) is responsible for conducting preliminary reviews of accreditation reports and making recommendations to NAAB's Board of Directors regarding the program's compliance with NAAB's *Conditions and Procedures for Accreditation*.

Eligibility and Composition. The ARC shall be comprised of educators, practitioners, and regulators in the field of architecture who have served on a minimum of one NAAB accreditation visit within the past five years and received a positive evaluation. ARC members shall represent a diversity of professional roles and experience and demonstrate familiarity with the NAAB *Conditions and Procedures for Accreditation*. The chair of the ARC shall be the immediate past president of the NAAB Board of Directors, who serves a one-year term. ARC members cannot concurrently serve on the staff or on the board of directors of AIA, AIAS, ACSA, or NCARB.

ARC members are required to complete NAAB training before they begin their first term and are subject to NAAB's Conflict of Interest, Confidentiality, and other applicable policies.

Term. ARC members serve a two-year term and are eligible for reappointment, with the exception of the inaugural ARC, which will have staggered one-, two-, and three-year term(s) to provide continuity. NAAB will initiate a public call for the ARC members. Following the public call, NAAB staff will review applicants to ensure compliance with eligibility criteria and will forward eligible applicants to the NAAB President for review and appointment.

Conflicts of Interest

A conflict-of-interest arises when a visiting team member, board member, committee/workgroup member, or staff member of NAAB has a relationship with an accrediting organization or a program and/or its representatives that could directly bias the actions, deliberations, or decisions of NAAB. All individuals who act on behalf of NAAB shall not have direct involvement with and/or participate in any decision-making capacity for an architecture program if they have an actual, potential, or perceived conflict of interest with the program. Any individual that has a conflict of interest must exercise their duty of disclosure as soon as a conflict becomes apparent.

Team members, including observers, are responsible for determining whether they have a conflict of interest and reporting it to the NAAB staff. Staff will provide all team members with a conflict-of-interest form stating the conflict-of-interest provisions (see below) and requesting that within 10 days the individuals state whether any provisions apply to them. Staff shall forward such documentation to the visiting team chair and the program director. A program may veto a visiting team member if it can demonstrate, in writing to NAAB, that an actual or potential conflict of interest exists.

In determining whether to participate as a team member or other NAAB representative, the individual 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.

Conflicts of interest may include but are not limited to the following:

- 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 in a unit outside of the one in which the program is housed and who can bring a perspective on institutional culture.
- Having a close association with currently employed administrative or faculty personnel in the program or at the institution at which the program is located.
- Having a member of one's immediate family (including a 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).
- Having a member of one's immediate family (including a 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.
- Being a donor, volunteer, and/or providing other resources and support to the program or institution at which it is located.
- Serving on the national board or staff of a Collateral Organization that provides financial support to NAAB.
- Having had a limited relationship (paid or unpaid) with the program being evaluated as a temporary employee, visiting faculty member, award recipient, volunteer teacher or mentor, or consultant within the 8 years prior to the visit.
- Having participated in an accreditation or consultative review of the program for NAAB within the 8 years prior to the visit.
- Having participated in an accreditation or consultative review of the program for another organization within the 8 years prior to the visit.
- Any other relationship, experience, or circumstance that could hinder impartial decision-making or create an actual, potential, or perceived conflict of interest.

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.

Programs may challenge any member of a visiting team designated by NAAB only based on a conflict of interest. Challenges are to be made in writing within 10 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 or director of accreditation. When challenges are found meritorious by the NAAB executive director or director of accreditation, a new team member and/or observer will be assigned. Challenges will not be accepted after the 10-day period.

Administrative Probation

As a condition of accreditation, all accredited architecture programs and programs in candidacy are expected to submit all reports, fees, and other requested materials, on or before the indicated deadlines and comply with accreditation policies and procedures.

Accredited programs and programs in candidacy that do not submit required reports, fees, or other requested materials, or comply with accreditation policies and procedures, after notice, will be placed on Administrative Probation by the NAAB executive director. Administrative Probation is a public action, and programs placed on Administrative Probation will be listed as such on NAAB's public website until the Administrative Probation is removed.

Programs on Administrative Probation that fail to submit the required information or evidence that they are in compliance with accreditation policies and procedures in response to the notice will be placed on the agenda for consideration by the NAAB Board of Directors at its next scheduled meeting. At that time, the board will review the program's circumstances and, if the program submitted the necessary report(s) and/or fee(s), or sufficient evidence, will remove Administrative Probation. If the program has not submitted the report(s) and/or fee(s), the board may revoke accreditation or, if the board finds extenuating circumstances are present, the board may extend Administrative Probation. A program can be placed on probation for no more than one (1) year. A program will receive notice of the board's action within 30 days along with any specific instructions on what report(s), fee(s), and/or materials need to be submitted and the next steps in the process.

PROCEDURES FOR CONTINUING ACCREDITATION

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

- The program submits an Architecture Program Report.
- NAAB assigns a visiting team, which reviews materials digitally and during a site visit.
- The visiting team submits a report to the NAAB board.
- The board decides on a term of accreditation.
- The program submits, if needed, a Progress Report for any deficiencies.

Once the board has made a decision on a term of accreditation, continuing accreditation is subject to the submission of program Annual Reports that provide statistical information and information about the program's continuing compliance with the *Conditions for Accreditation* during the program's accreditation term.

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 for Accreditation*. It is the principal source document for conducting the visit and addressing each of the conditions, including the Program and Student Criteria.

Instructions for preparing APRs are published separately from this document. Programs must use the templates provided by NAAB for preparing APRs and related supplemental information; see the "Guidelines to the Accreditation Process" at www.naab.org for more information. All material prepared for accreditation visits must be provided in English, including the APR, supplemental material, and student work to be reviewed by the visiting team.

Review and Acceptance of the APR. The APR is first reviewed by the NAAB staff to ensure that it is complete. 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 review form to the staff, recommending one of the following:

- Accept the APR and schedule the site visit.
- Accept the APR, schedule the site visit, and request additional APR information before the visit.
- 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.
- Reject the APR and require a new APR to be submitted 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.

Should the school fail to deliver an acceptable amended or replacement APR by November 15, 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 time frame.

Dates/Deadlines

- APRs must be submitted to NAAB 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 2023, the APR is due September 7, 2022).
- If NAAB requests a complete revision of the APR, the revised APR is due November 15.
- Primary exhibits supplied as evidence for accreditation criteria that do not require student work must be submitted to the visiting team in an electronic format 45 days before the visit.

Dissemination of the APR to the Public Before the Visit. To stimulate broad-based participation, the program should distribute the APR to the school community before and during the site visit. However, the APR may not be shared with the public until the final accreditation decision is communicated by NAAB.

Visiting Team

Composition of Teams. 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, all selected from the team pool.

- NAAB staff members will compose teams after the date for the visit has been set by the team chair and the program administrator.
- NAAB seeks to balance the team in terms of accreditation experience and experience relevant to the mission and context of the program. Programs may challenge a member of a visiting team based on a conflict of interest as defined in NAAB's Conflict of Interest policy.
- NAAB makes every effort to assemble teams so that no more than one person, excluding the student, is a first-time team member, although this is not always possible.
- In general, individuals may not serve on more than one visiting team to the same program.

Team Chair. The responsibilities of the team chair are described in Section 2. Staff will appoint a chair of the Site Visit Team. The appointment 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 notifies 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.

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.

- **Nomination and Approval.** After the official visiting team has been designated by NAAB and no later than 60 days before the start of the visit, the program administrator may nominate an observer by sending a résumé or curriculum vitae to the NAAB's director of accreditation. The nomination should include a brief description of the relationship between the individual and the program. The nomination will be considered for approval by the director of accreditation in consultation with the visiting team chair.
 - a) 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 in a unit outside of the one in which the program is housed and who can bring a perspective on institutional culture.

- b) No person may serve as an observer on more than one visit in a three-year period.
 - c) 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 NAAB.
 - d) Observers must be knowledgeable about the current version of the NAAB *Conditions* and *Procedures* and the APR and complete a training program before the visit begins. The individual must agree in advance to abide by the principles of confidentiality and anti-harassment and by the Conflict of Interest policy.
 - e) Observers who fail to comply with the expectations or responsibilities of participating in a NAAB visit may be dismissed by the visiting team chair before the end of the visit. The team chair shall notify the program administrator and the NAAB director of accreditation.
- **Participation.** 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. The team chair has the sole discretion to decide whether the observer may be present at the last team work session during the drafting of the VTR.
 - **Additional Observers.** Occasionally, for training purposes, NAAB may ask the program and the team chair to accept a special, additional observer. These individuals may be NAAB board or staff members, an officer or staff member of a collateral organization, or another person who 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. Additional observers shall be bound by the confidentiality requirements applicable to the visiting team; visit expenses shall be NAAB's or the collateral organization's responsibility.

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, in accordance with the Conflict-of-Interest policy.

Interpreters for Programs Not Taught in English. 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. 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.

Site Visit

Scheduling the Dates for the Visit. The dates for a visit for continuing accreditation are set by the team chair in consultation with the program administrator. Generally, these visits take place between the last week of January and the first week of April each year for programs seeking continuation of accreditation. Visits usually begin on Saturday evening and end the following Tuesday by noon or begin on Sunday evening and end the following Wednesday by noon. Additional days may be added to the visit if the program is offered at 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.

Dates for visits cannot be changed once a team has been assembled and proposed to the program, except under extreme circumstances.

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

- a) **Before the Visit.** Team members review the APR, program Annual Reports, and digital exhibits submitted as evidence of compliance with conditions and Program/Student Criteria not requiring student work. This material should be presented in PDFs, or in other online formats, and made available to the team at least 45 days before the visit.
- b) **On-site Tours.** The school conducts tours of the team room, the physical resources that support the professional degree program, and the library and information resources (with the architecture librarian and visual resources professional).
- c) **On-site Meetings.** All meetings are confidential and should consist of informal discussions, not presentations. They are to be held in an acoustically private room.
 - Meetings with the program head(s) include a discussion of issues arising from the APR, the program's strategic plan and self-assessment procedures, progress made since the previous site visit, any required changes to the visit agenda, and any requests for additional materials the team may need. These meetings are often held daily.
 - An initial meeting with the chief academic officer/provost of the institution, or their representative, is optional and will be determined by the team chair in consultation with the program administrator.
 - Meetings with the school or college administrator, faculty, and students 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, without any administrators or program leadership present. Meetings with students enrolled in the program being accredited, without the presence of any administrators, staff, or faculty, should be arranged so that all enrolled students can attend.
 - The meeting with student representatives 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.
 - The meeting with key staff of the academic unit is held without any faculty or administrators present. The staff includes but is not limited to administrative

assistants, shop personnel, librarians, career placement professionals, and advisors.

- 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.
- e) **Observation of Studios, Lectures, and Seminars.** The team may divide up to attend scheduled classes or use evenings to observe unscheduled studio activity.
- f) **Review of Student Records and Transfer Credit Assessment.** These files are reviewed as part of the team's assessment of Condition 4.3. They should be in the team room and presented in compliance with FERPA.
- g) **Debriefing Sessions.** The team meets daily to evaluate its progress, adjust assignments, and assess the need for additional information.

Team Deliberations and Drafting of 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 draft form and ready for editing by the team chair

Exit Meetings. The sequence of exit meetings is prescribed to ensure that the team delivers its initial information to key leaders in the institution and the program. These meetings are held after the team has finished its deliberations. The purpose of these meetings is to communicate the team's findings and preliminary recommendations related to the following:

- The conditions not met and the process of developing a Progress Report if required following the board's decision
- Any general team observations and acknowledgments.

Exit meetings are led by the team chair with at least one team member and the observer (if applicable) present. The recommended sequence of exit meetings 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 exit meetings may leave after the draft VTR is completed, while those participating in the meetings are required to leave the institution as soon as the last meeting is completed.

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 before the visit and the content, format, and organization of materials to be provided in the team room. These include:

- **Student Admissions and Advising Files.** These are copies of files for students admitted to the program that demonstrate the process by which students are admitted to the program and how, if appropriate, advanced standing is determined (Condition 4.3). All

information about the students' identity must be removed.

- **Team Work Area.** The room must contain a conference table, with enough seating to accommodate the entire team.
- **Access.** The team room must be secure; keys are to be given only to members of the team. No one other than the team is to be in the room, except at the team chair's invitation.
- **Equipment.** The room must contain the following: a document shredder, viewing/projection equipment as requested by the team chair, Internet access/secure Wi-Fi access with information on any restrictions, a printer, screen, projection or other large-format digital presentation method with associated laptop computer, and a sufficient number of electrical outlets and appropriate power cords.
- **Visit Agenda and Résumés.** The visit agenda and résumés of the team should be posted near the team room for public review.
- **Matrices.** A large-format copy of the Program and Student Criteria matrix (relating coursework with criteria) should be posted in the team room.
- **Additional Instructions for 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.

Evidence

Material provided as evidence in support of these criteria should be organized in the format specified by NAAB in the "Guidelines to the Accreditation Process" at www.naab.org. This evidence includes:

- **Primary Evidence for Program Criteria (PC).** The program will submit the primary exhibits as evidence for PC to the visiting team in an electronic format 45 days before the visit.

Program Criteria should be evaluated holistically relative to curricular and extracurricular offerings and the students' experience of them. 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 must 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 Materials: The program must provide supporting materials demonstrating that its objectives have been accomplished. These may include policy documents, individual course materials (e.g., syllabi) as well as documentation of activities occurring outside specific courses.

- **Primary Evidence for Student Criteria (SC) SC.1 through SC.4.** These criteria will be evaluated at the *understanding* level. The program will submit the primary exhibits as evidence for SC.1-4 to the visiting team in an electronic format 45 days before 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 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.

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

- a) **Course Syllabus.** The syllabus must clearly articulate student learning outcome objectives for the course, the methods of assessment (e.g., tests, project assignments), and the relative weight of each assessment tool used by the instructor(s) to determine student performance.
 - b) **Course Schedule.** The schedule must clearly articulate the topics covered in the class and the amount of time devoted to each course subtopic.
 - c) **Instructional Materials.** The supporting materials 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.
- **Primary Evidence for SC.5 and SC.6.** These criteria 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 includes fully labeled exhibits of student work 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 more than one course, 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 NAAB and include the following for each course associated with the student learning outcome:

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

- d) **Student Work Examples.** The program must collect all passing student work produced for the course(s) in which the learning outcomes associated with this criterion are achieved within one year before the submission of the APR, or the full academic cycle in which the courses are offered. The visiting team will evaluate approximately 20 percent (no less than three, no more than thirty examples) of the student work collected in this time frame, selected by NAAB at random before the visit. The program may self-select additional student work, up to 10 percent, for the visiting team to review.

If several courses are used to satisfy the SC, the class lists from each course must be aligned so that a random selection process will collect the work of each student selected in all classes that are used to meet the SC. The student lists provided must comply with FERPA rules.

Visiting Team Report (VTR)

The VTR serves multiple purposes:

- It is essential to the NAAB Board of Directors in making its accreditation decision.
- It may serve to strengthen the program and its position within the institution.
- It may inform current and prospective students about the nature and quality of the program.

VTRs are considered advisory to the NAAB Board of Directors, which makes the decision on accreditation.

A generic template for VTRs can be found on the NAAB website.

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 includes information from the APR and sections from the previous VTR that describe conditions not met (if applicable).

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 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 the team's rationale for citing any deficiencies. Teams must assess each condition as met/not met.

Transmittal to the NAAB. The team chair must transmit a final draft of the VTR to the NAAB office not later than 14 days after the visit ends.

Review by NAAB Staff. Upon receiving the draft report from the team chair, the NAAB staff reviews it for completeness and comprehension and makes corrections for grammar, spelling, and punctuation. If there are concerns or requests for additional review, the draft is returned to the chair. NAAB sends the VTR to the program administrator within 30 days after the visit.

Program's Optional Response to the Visiting Team Report. Programs have the option to provide a response to the VTR following the team visit to

- Correct Errors of Fact (including names, positions, dates, course titles, and other documented information).
- Highlight previously submitted materials that may have been overlooked or not given

sufficient weight in order to clarify or explain any concerns raised in the VTR. The program may also address any perceived misunderstandings or misinterpretations of the program's practices or policies.

- Provide additional contextual information and/or evidence that has become available since the visit to demonstrate compliance with Conditions noted "not met" in the VTR. Additional samples of student work as evidence of compliance with SC.5 and/or SC.6 are not permitted.

Submission and Review Process

The program's Optional Response is due to NAAB via email at accreditation@naab.org **no later than 30 days** from the date of the program's receipt of the VTR. Extension requests will only be granted where there is a documented, exigent circumstance that prevents an on-time submission. The optional response must be a single PDF document and may not exceed 100MB in total. For each Condition addressed, the narrative response may not exceed 2 pages. An appendix with evidence clearly correlated to the narrative may be included.

This response will be included in the program's accreditation record for initial review by the Accreditation Review Committee (ARC).

The accreditation record contains the following documents:

- Most recent Architectural Program Report (APR)
- The Visiting Team Report (VTR)
- Interim Progress Report (IPR) decision letter for programs whose visit was advanced by one year
- A program's Optional Response to the VTR
- Any program submission related to a previous Progress Report
- A link to access the Digital Evidence Room hosted by NAAB.

Reviews containing the ARC's recommendation will be forwarded to the Board for a final decision.

Decision of the Board of Directors

The accreditation record is presented to the Board of Directors for a decision at its next regularly scheduled meeting. The Board reviews ARC recommendations and affirms that these recommendations are supported by the evidence provided by the program.

Transmitting the Decision of the Board of Directors

Within 30 days after a Board decision on 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 instructions for seeking reconsideration and appeal. The institution has 14 calendar days from the receipt of a decision letter to send a written request for reconsideration of the board's decision. NAAB may make its accreditation decision public 20 calendar days after the decision letter is transmitted to

the program administrator unless, within that time, it receives a written request for reconsideration. If such a request is received, NAAB shall not make its decision public until after the board has acted on the request for reconsideration and the appeal process, if pursued, has concluded.

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, and the information obtained from these interviews is for the exclusive use of the team in preparing its report.

The APR and the VTR may not be made available to the collateral organizations or the public until the board has issued its accreditation decision.

Public Disclosure of Accreditation Outcomes

After the accreditation decision has been issued, the program must make the following documents available to the public on its website: the APR, the final accreditation decision letter from NAAB, and the editions of the NAAB *Conditions* and *Procedures* under which the decision was made. These documents must be housed together and *may not be presented in abbreviated or excerpted forms*.

The program is required to provide faculty and students with access to the current Program and Student Criteria and related accreditation documents (Condition 6, Public Information).

The accreditation decisions for a given year are published in the NAAB's *Annual Report on Architecture Education*. In addition, they are made available to the collateral organizations and the public.

Within 30 days of a decision to revoke accreditation not subject to reconsideration, 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.

Progress Report

A Progress Report is required in cases when the NAAB board determines that the program is not in compliance with one or more of the Conditions for Accreditation, either at the time continuing accreditation is granted or as a result of a Special Report review. Programs with a Progress Report will have two years to demonstrate compliance with Conditions for Accreditation noted to be out of compliance. Programs submitting a Progress Report will be required to provide a narrative response with supporting documentation and evidence of compliance for each Condition noted to be out of compliance.

Progress Report Submission. Programs determined to be out of compliance with one or more Conditions for Accreditation identified at the spring board meeting will be required to submit a Progress Report on or before December 15 of the same year. Programs determined to be out of compliance with one or more Conditions for Accreditation identified at the fall board meeting will be required to submit a Progress Report on or before June 30 of the following year. Programs that fail to submit a Progress Report by the deadline will be placed on Administrative Probation, after notice.

In demonstrating compliance with Program and Student Criteria, programs are expected to provide primary evidence and supporting materials as described in the procedures for continuing accreditation required evidence. If programs are reporting on SC.5 and/or SC.6, this evidence should include at least three examples of student work for SC.5 and at least three examples of student work for SC.6 collected from course(s) occurring after the submission of the APR.

Review of Process. All Progress Report materials will be reviewed by the Accreditation Review Committee (ARC), whose recommendations will be acted upon by the Board of Directors. Two reviewers from the ARC will be assigned to review all Progress Report materials submitted by a program. The reviewers will note Conditions where the program provided sufficient evidence to demonstrate compliance and Conditions where the program continues to remain in non-compliance.

The ARC reviewers will make one of the following recommendations to be acted upon by the full ARC to determine a final recommendation for action by the Board of Directors:

- In the event a program has demonstrated compliance with all the Conditions for Accreditation previously noted to be out of compliance, accept the Progress Report and approve the program for the remainder of the term of accreditation.
- In the event a program has not demonstrated compliance with the Conditions for Accreditation previously noted to be out of compliance, defer action and require a revised Progress Report to address all remaining areas of non-compliance. (Submission timelines are December 15 and June 30 and will be indicated in the Decision Letter.)
- In the event a program's Progress Report does not demonstrate compliance with Conditions for Accreditation within two years, continue the Progress Report, place the program on notice for a period not to exceed one (1) year, and inform the institution's Chief Academic Officer.
- In the event a program's Progress Report does not demonstrate compliance with Conditions for Accreditation within one (1) year of notice, place the program on probation for a period not to exceed one (1) year, require a focused visit on remaining areas of noncompliance within six months, and inform the institution's Chief Academic Officer. All accreditation decisions to place a program on probation will be made public on the NAAB website.

Decisions by the NAAB Board regarding the program's Progress Report are not subject to reconsideration or appeal.

SPECIAL PROVISIONS FOR INSTITUTIONS

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.

Adjustments to the Schedule. To the extent possible, NAAB prefers to schedule a concurrent review of all NAAB-accredited programs in a single visit. Thus, institutions that offer more than one NAAB-accredited program would be expected to prepare one APR and one team room and to 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.

Adjustments to the Team. Teams scheduled for concurrent review for continuing accreditation of more than one NAAB-accredited program at the same institution will have one additional team member, selected from any of the constituent areas of expertise. The presence of this additional team member will not affect the ability of the program to nominate an observer.

Adjustment to the APR.

- The APR may provide one response for all accredited degree programs for conditions 1, 2, 4.1, 5.1 through 5.5, and 6.
- The APR must provide separate information for each degree program and for each track for completion of the accredited degree(s) for conditions 3, 4.2, 4.3, and 5.6 through 5.8, demonstrating that there are appropriate resources for each program and track. Information should include:
 - a) Complete information about the curriculum.
 - b) The processes for the analysis and evaluation of the preparatory education of students admitted to each program and track, with special attention to evaluating whether Student Criteria are expected to have been met in educational experiences in non-accredited programs.
 - c) Resources specific to each program.

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.

PROCEDURES FOR INITIAL CANDIDACY, CONTINUATION OF CANDIDACY, AND INITIAL ACCREDITATION

Initial candidacy and initial accreditation for a new professional degree program in architecture require 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:

1. Eligibility application by institution to initiate process.
2. Determination of eligibility by NAAB following eligibility visit.
3. Initial candidacy APR and visit (candidacy visit #1).
4. Subsequent evaluations toward accreditation (candidacy visits #2 and #3).
5. Initial accreditation no later than six years after initial candidacy visit.

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 at 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. Schools should work with NAAB as soon as possible to establish a calendar for eligibility, candidacy, and initial accreditation.

Institutions seeking to establish more than one NAAB-accredited program must submit separate applications for each. NAAB will not accept applications for candidacy from an institution with a degree program currently in candidacy.

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:

- 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.
- The most recent decision letter from the recognized U.S. regional accrediting agency for the institution (Condition 4.1).
- **Plan for Achieving Initial Accreditation.** The plan serves multiple purposes. It is an analysis of (1) the current status of the program that identifies long-term objectives for establishing and implementing the new accredited degree program, and (2) the extent to which the proposed program already complies with the *Conditions for Accreditation*, with special emphasis on program identity, resources, and the curricular framework. The plan also proposes a course of action for achieving initial accreditation in a maximum of six years. The plan outlines how the program will
 - a) Secure resources not already available to the proposed program (e.g., faculty, space, financial support).

- b) Secure institutional approvals for the proposed degree program (if required).
 - c) Recruit and retain students, including a scholarship program, as appropriate.
 - d) Recruit full-time and adjunct faculty to teach in and support the program.
 - e) Enroll the first cohort or class by a proposed date.
 - f) Award degrees to the first cohort or class to complete the proposed program by a proposed date.
 - g) Develop and implement new courses and/or curricular sequences, including faculty assignments and essential physical resources.
 - h) Attract external support, funding, and alumni and professional/community engagement.
 - i) Make alternative plans or provisions in the event that the program does not achieve initial candidacy or initial accreditation.
- Instructions for the preparation, format, and submittal of the Plan for Achieving Initial Accreditation are published separately from this document. See the “Guidelines to the Accreditation Process” at www.naab.org for more information.

Determination of Eligibility

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

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

Membership of the Review Panel. The review panel consists of the NAAB executive director or director of accreditation and two members of the Board of Directors; at least one of the two board members must be an educator.

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

An eligibility visit will be scheduled for programs that do not currently have a NAAB-accredited degree. The program is responsible for all expenses associated with a visit.

Programs that already offer at least one NAAB-accredited degree may be asked to submit additional information. An eligibility visit is not required if the new program is in the same location as the existing program.

Eligibility Visit.

1. **Purpose:** There are three purposes for the eligibility visit:
 - To review the physical, financial, human, and information resources committed to the program.
 - To confirm the institutional commitment to the implementation of the Plan for

Achieving Initial Accreditation.

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

2. **Format:**

- Eligibility visits should last no more than two days.
- The visit will be conducted by two of the individuals assigned to the review panel.
- The visit will be scheduled on two consecutive weekdays.
- The visit should include the following:
 - i. Presentation by the program on the context and mission of the institution, the academic/administrative unit, and the proposed degree program.
 - ii. Discussion between the NAAB panel and the program administrator to review the NAAB *Conditions* and *Procedures*.
 - iii. Separate meetings with faculty, staff, and students to review the timeline for candidacy, initial candidacy, and initial accreditation, and the requirements of continuing accreditation.
 - iv. Meetings with division administrators (e.g., department chair and dean).
 - v. Meetings with the institution's chief academic officer, chief financial officer, and chief advancement officer.
 - vi. Opportunities to observe classes and studios that will be offered in the proposed degree program.
 - vii. A tour of the physical resources that are or will be designated for the program (studios, classrooms, seminar rooms, shops, and labs).
 - viii. A tour of the library or other information resource center(s) that supports the program.

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.
- An assessment of the institution's commitment to the implementation of the Plan for Achieving Initial Accreditation.
- An assessment of the program's readiness to complete a visit for initial candidacy.
- A cross-reference to the findings of the visiting team in the most recent VTR, when 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.

Board Action on Eligibility for Initial Candidacy. The panel's recommendation is presented to the board at its next regularly scheduled meeting. 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-C) and prepare for an initial candidacy visit as outlined below. 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.

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-C) and preparation for a visiting team.

Architecture Program Report Submitted for Initial Candidacy Visits. The APR-C 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-C. Instructions for the preparation, format, and submittal of the APR-C are published separately from this document. See the "Guidelines to the Accreditation Process" at www.naab.org for more information.

All material prepared for accreditation visits must be provided in English. This material includes the APR-C, supplemental material, and student work to be reviewed by the visiting team.

Review and Acceptance

1. APR-Cs are due in the NAAB office 180 days before the visit is scheduled to take place.
2. The NAAB staff first reviews the APR-C to ensure that it is complete.
3. The team chair then reviews the APR-C 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:
 - a) Accept the APR-C and schedule the site visit.
 - b) Accept the APR-C, schedule the site visit, and request that minor additional information be provided before the visit.
 - c) 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.
 - d) Reject the APR-C and require a new report be submitted for review not less than 45 days before the date of the visit. If the new APR-C is considered acceptable, the visit will take place.
 - Should the chair recommend that the APR-C be rejected, the APR-C and the chair's review are brought before the NAAB Board of Directors for review and action.
 - Should the school fail to deliver an acceptable amended or replacement APR-C, NAAB notifies the chief academic officer of the institution that the candidacy visit will be postponed until the next year. A new chair will be appointed, and a new APR-C is required.

Dissemination of the APR-C to the Public Before the Visit. To stimulate broad-based participation, the program should distribute the APR-C to the school community before and during the site visit. However, the APR-C may not be shared with the public until the NAAB has communicated its final decision on candidacy to the program.

Composition of Visiting Teams for Initial or Continuing Candidacy

1. Teams for initial and continuation of candidacy visits are composed of three individuals: an educator, a practitioner, and an individual selected from a pool of former NAAB directors and NAAB staff. NAAB will designate either the educator or the practitioner to serve as the team chair.
2. Visiting team chairs for candidacy visits are selected in the same manner as those for continuing accreditation visits. NAAB staff notifies program administrators once a chair has been nominated, and when confirmed, the chair reviews the APR-C for completeness. The administrator and the chair work together to select a date for the visit.
3. The NAAB staff composes teams after the date for the visit has been set. NAAB seeks to balance the team in terms of accreditation experience and experience relevant to the mission and context of the program. To the extent possible, NAAB works to ensure that not more than one team member is on their first visit. Observers are not permitted on teams for initial candidacy, on subsequent teams for continuation of candidacy or on teams for initial accreditation. The NAAB staff notifies the program administrator when a full team has been assembled.
4. 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. 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.

Dates for the Site Visit. The team chair sets the dates for a visit for initial candidacy in consultation with the program administrator. 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. Once a date has been set and a team proposed, the date cannot be changed.

Duration of the visit:

- 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.
- All members of the team are expected to participate in the visit the entire time.
- If the program seeking candidacy is to be offered in more than one location, the team chair may arrive early in order to visit the other locations. These exceptions are agreed to by the team chair and the program administrator, with advice from the NAAB staff.

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:

- **Meetings with Students.** It is likely that, at the time of a visit for initial candidacy, no students will be 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, it is to be conducted without the presence of any administrators, staff, or faculty, and should be arranged so that all students can attend.

- **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.
- **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.

Evidence and Team Room. Before the site visit, the program administrator and visiting team chair discuss the content and organization of the team room, which are similar to that for continuing accreditation.

Visiting Team Report (VTR) for Candidacy. The VTR for candidacy is the same as that for continuing accreditation except for the following:

- The VTR contains the team's assessment of the program's progress against its Plan for Achieving Initial Accreditation.
- VTRs for initial or continuation of candidacy may assess Program and Student Criteria as met, not met, or not-yet met.
- For criteria in courses that have been offered and for which evidence has been provided for evaluation by the visiting team, the team may determine that the criteria are met or not met.
- 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.

Public Disclosure of Accreditation Outcomes. After the candidacy decision, the program must disseminate the APR-C and the current editions of the *Conditions* and the *Procedures* and any addenda. These documents must be posted on the program's website and be freely accessible to all.

Subsequent Evaluation Visits for Continuation of Candidacy

Continuation of candidacy is subject to 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 for Achieving Initial Accreditation for each continuation of candidacy visit.

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. Generally, the application process begins with a request for initial accreditation followed by submission of an APR and an initial accreditation visit. Some steps in the process may be waived or modified for institutions that already have at least one NAAB-accredited professional degree program.

All visits for initial accreditation take place in the fall following the graduation of the first cohort of students that completes the program. Terms of initial accreditation are for three years. The period from achieving candidacy status to initial accreditation may be no longer than six years. Programs that fail to achieve initial accreditation within the maximum time period must submit a

new candidacy application.

Eligibility for Initial Accreditation

Programs seeking initial accreditation that do not currently offer a NAAB-accredited degree must have the following by the time of the visit for initial accreditation:

- Completed four years in continuous candidacy.
- One cohort of students who have completed the entire curriculum of the professional degree program for which accreditation is sought. This cohort should expect to graduate in the spring with a subsequent fall visit for initial accreditation.

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

- No less than two years in continuous candidacy.
- A full eight- or six-year term of accreditation for the preexisting accredited professional degree program in architecture.
- One graduating class that has completed the entire curriculum of the professional degree program for which accreditation is sought.
- It is the responsibility of the program, not NAAB, to inform students of the status of their degree program(s) relative to accreditation and whether the program is on schedule to achieve initial accreditation.

In order to meet the education requirement of 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 NAAB; the degree must have been awarded not more than two years before initial accreditation. This education requirement is often called the “two-year rule.”

The full text of the education requirement can be found on the NCARB website. The two-year rule 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.

Request for Initial Accreditation. Programs in candidacy must notify NAAB of their intention to seek initial accreditation for a professional degree program in architecture.

To initiate the process for achieving initial accreditation, the program must formally request that NAAB schedule a visit for initial accreditation. The request is due by September 7 of the year prior to the year in which the visit for initial accreditation is requested. A request for initial accreditation may result in forfeiture of the program’s remaining time in its six-year candidacy.

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.) and any prerequisites (e.g., M.Arch. [undergraduate degree plus 60 graduate credits]).

- b) A copy of the most recent decision letter from 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 as a PDF, and the file may not exceed 3MB. Requests are limited to 15 pages, including all supplemental information. Applications should be sent to the NAAB director of accreditation at accreditation@naab.org. Include "Application for Initial Accreditation Site Visit" and the name of the institution in the subject line.

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

- **Architecture Program Report for Initial Accreditation.** The APR-IA is similar to an APR for continuing accreditation. It must also document the full implementation 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-IA.
- **Dates and Deadlines.** The APR-IA is due in the NAAB office by March 1 of the calendar year in which the initial accreditation visit is scheduled to take place. Revisions to an APR-IA, if requested, are due not less than 45 days before the date of the visit.
- **Visiting Teams.** Observers are not permitted on teams for initial accreditation.
- **Site Visits.** Generally, these visits take place between the first week of September and the last weekend of October each year.
- **Visiting Team Report.** In addition to items in the VTR for continuing accreditation, the team is asked to include comments that may be helpful in preparing for future accreditations visits, if any.

First Term of Continuing Accreditation Following Initial Accreditation

Programs that achieve a three-year term of initial accreditation must receive an eight-year term of accreditation or an eight-year term with a Progress Report 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 NAAB.

SPECIAL CIRCUMSTANCES

Request to Postpone 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.

Procedure for Requesting a Postponement. Not later than July 1 of the year before 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 2022 may be postponed to fall 2022). The request must include the following:

1. A written request for the postponement from the institution's chief academic officer.
2. A brief description of the reason(s) for requesting the postponement.
3. A brief description of the benefit(s) of the postponement to the program, the institution, and the accreditation process.
4. 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 before 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.
5. In the event of a natural disaster or other catastrophic incident that renders the program incapable of hosting the visit as scheduled, the program may request a postponement of a regularly scheduled visit without regard to the deadlines described above. The program is advised to contact the NAAB executive director or director of accreditation immediately.
6. Requests must be submitted as a PDF, and the file may not exceed 200KB. The document is limited to three pages, including all supplemental information. Requests should be sent to the NAAB director of accreditation at accreditation@naab.org. Include "Request for Postponement of Regularly Scheduled Visit – [Name of Institution]" in the subject line.

Action on the Request. The NAAB executive committee decides whether to grant or deny a request for a postponement. 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.

Request to Advance the Date of 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.

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

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

institution, and the accreditation process.

- 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 before the originally scheduled visit for initial accreditation.
- Applications must be submitted as a PDF, and the file may not exceed 200KB. The document is limited to three pages, including all supplemental information. The request should be sent to the director of accreditation at accreditation@naab.org. Include "Request to Advance Regularly Scheduled Visit – [Name of Institution]" in the subject line.

Action on the Request. The NAAB executive committee decides whether to grant or deny a request to advance the date of a visit for initial accreditation. NAAB will announce its decision in a letter to the institution's chief academic officer within seven days after the decision is made.

Early Termination of a Visit

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

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

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

The following options are available:

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

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.

Waivers of NAAB Conditions and Procedures

The NAAB Board will consider requests to waive the application of certain Conditions or Procedures in limited and exceptional circumstances. All requests for waivers must be submitted in line with the following requirements:

A waiver request must be:

1. submitted in writing; and
2. identify the specific Condition(s) or Procedure(s) for which the waiver is being requested; and
3. provide sufficient justification for the waiver request and all information necessary for the Board to render a decision including appropriate factual support and documentation that the waiver would meet the Standard of Review (a)–(c).

Standard of Review

The NAAB Board may grant a waiver only if:

- (a) Special extenuating circumstances (e.g., events beyond the control of the program) are present that temporarily impede the program's ability to comply with a NAAB Condition; or
- (b) The normal application of the Condition or Procedure will create an undue hardship on the program and/or its students; and
- (c) The request for waiver is reasonable in light of the exigency presented and will not have the effect of unduly compromising the quality of the program.

Scope and Duration of Waivers: A decision to grant a waiver and to determine its scope and duration is solely within the discretion of the NAAB Board and may not be appealed. Waivers expire on the date determined by the NAAB Board. The waiver process should not be used as a means to change or amend the Conditions or Procedures.

Review Process: All waiver requests will be reviewed by the NAAB Executive Committee on a rolling basis, within 30 days of receipt of the request. A decision will be transmitted to the program within 30 days of review.

Request to Reinstate Accreditation

An institution's chief academic officer must request reinstatement following revocation or in the event that a program's accreditation expires. The procedure for reinstatement is the same as that for candidacy followed by initial accreditation. Programs requesting reinstatement must remain in candidacy for a minimum of one year.

Programs at Remote Locations

NAAB recognizes that institutions continue to seek innovative ways 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 ensure 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 professional degree in architecture, the following definitions apply:

Definitions

- 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.
 - 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.

- 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.

- 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 or quarter-equivalent 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.
- 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-campus curricula are the same.

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 Remote Location 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 team chair and the NAAB staff will use the questionnaire and accompanying narrative 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 for changes to the APR and/or visit.

Separate APRs and Separate Site Visits. Programs at branch campuses will be treated as unique, individually accredited programs and will require a separate APR and a separate visit.

Expanded APR and Extended Visit Programs with additional sites, teaching sites, or online learning are required to describe these sites in the APR and to identify the role(s) these sites play in the ability of the program to deliver the curriculum leading to the accredited degree or the ability of the institution to meet its mission.

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 NAAB.

New Programs at Branch Campuses or Additional Sites. 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.

Programs initiating or altering additional sites, teaching sites, or online learning must provide this information in the program Annual Report when 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.

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 will consult on the method that best meets the needs of the visit.

These options include:

- Displaying student work in a team room at the additional or teaching site. In this case, a day will be added to the visit.
- 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.
- In all cases, the institution will coordinate the location of the display and logistics of the visit with the team chair before the accreditation visit.

Visiting Team Report. In all cases, the VTR 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.

SUBSTANTIVE CHANGES REQUIRING REVIEW BY 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 NAAB before implementation by the program or institution and if approved, may not be applied retroactively.

Substantive Changes Requiring Review

Professional Degrees and Curriculum Changes

- 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 an undergraduate degree for admission).
- 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 an undergraduate degree for admission).
- 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).
- d) The addition of new tracks to existing accredited programs.
- e) Phasing out an existing NAAB-accredited program.

Nomenclature Change Proposals Are Limited to the Following:

- a) Programs seeking to convert an existing B.Arch. program to a single-institution M.Arch. program through modest adjustments.
- b) Programs seeking to convert an existing five-year, single-institution M. Arch program to a B.Arch. program through modest adjustments in the curriculum.
- c) Programs seeking to convert an existing M.Arch. program that requires an undergraduate degree (either in architecture or another discipline) for admission to a D.Arch.

Institutional Changes

- a) Consolidating or merging an institution offering an accredited degree with another institution.
- b) Physical relocation of a program in 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).
- c) Changes in the accreditation status of the institution.

Programs seeking to make a substantive change must first contact NAAB in writing 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.

Application

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

- A letter from the chief academic officer of the institution requesting approval of the change.
- A copy of the most recent decision letter from the NAAB.
- Copies of other institutional or state-required approvals for the change. NAAB will not consider substantive change requests that have not met all other requirements for institutional or state-required approvals.
- **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 NAAB. The plan must include the following:
 1. Securing resources not already available to the program (e.g., faculty, space, financial support), if necessary.
 2. Developing and implementing new courses and/or curricular sequences, if necessary.
 3. Proposed last academic year in which students will be admitted to the program in its current configuration.
 4. Plans for ensuring that students in the existing configuration are able to complete the program on time.
 5. A plan for communicating with current students, newly admitted students, faculty, staff, alumni, and NCARB and the state registration/licensing board if the program change is approved by the NAAB.
 6. 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.

Applications for substantive changes may be submitted at any time. They must be submitted as a PDF, and the file is limited to 50 pages and 2MB. Send applications to the NAAB's director of accreditation at accreditation@naab.org. Include "Application for Substantive Change – [Name of Institution]" in the subject line.

Additional Information Required

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

Professional Degree and Curriculum Change Proposals

- a) Description of the current degree program.
 - The program's response to Condition 4.2, Professional Degrees and Curriculum.
 - A matrix for Condition 3, Program and Student Criteria (relating coursework to the criteria), for the current degree program.
- b) Proposed new degree program or curriculum configuration.
- c) A description of the changes that will be made to the program, while also ensuring that it conforms to NAAB and institutional requirements, including:
 - A narrative that responds to the requirements of Condition 4.2.
 - A new matrix for Student Criteria for the accredited program under its new configuration.
 - Any prerequisites.
 - Assessment of the effect of the proposed changes on Conditions 5.6–5.8.

Merger or Consolidation of Institutions. In the event that the merger or consolidation affects NAAB-accredited programs at both institutions, NAAB may request additional material. Under this circumstance, please consult with NAAB early in the process to determine the scope and scale of the review.

1. A description of the current program for Conditions 1, 2, and 5.1–5.5.
2. A description of the resources currently supporting the program for Conditions 5.6–5.8.
3. A description of the effect of the proposed change on the program's compliance with Conditions 5.6–5.8.
4. An assessment of the implications of the existing program on enrollment and for Conditions 1, 2, and 5.1–5.5.

New or Additional Tracks for Completing a NAAB-Accredited Degree Program. Proposals for new or additional tracks for completing a NAAB-accredited degree program must include all of the same materials as required for a professional degree and curriculum change (see above), and an assessment of the implications of the new track for the existing program.

Nomenclature Change. Programs seeking approval of a nomenclature change must meet the following:

- a) Have a full term of continuing accreditation.
- b) Have met either Condition II.2 (Curricular Framework) of the *2014 Conditions for Accreditation*, or Conditions 4.1 and 4.2 of the *2020 Conditions for Accreditation*, as of the last accreditation visit and VTR.
- c) No element of Condition II.3 of the *2014 Conditions for Accreditation* or Condition 4.3 of the *2020 Conditions for Accreditation*, may be listed as a cause of concern or not met in the most recent VTR.
- d) Have requested the change within four years of the last regularly scheduled accreditation visit.

The proposal for the nomenclature change must include:

- The program's response to Condition 4.2, Professional Degrees and Curriculum.
- A matrix for Condition 3, Program and Student Criteria (relating coursework to the criteria), for the current degree program.

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 4.2.
- A new matrix for Condition 3, Program and Student Criteria (relating coursework to the criteria), for the accredited program under its new designation.
- Any prerequisites.

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. An 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:

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.
2. Copies of all correspondence with the appropriate state agencies and regional accrediting agencies regarding the decision to phase out the NAAB-accredited degree.
3. Implementation Plan. The plan must include the following:
 - a) Teach-out date for the program. This is the date after which the institution will no longer award the degree.
 - b) Summary of courses to be offered and faculty assigned during the phase-out, with a corresponding PC and SC matrix.
 - c) Summary of resources to be used to support students and faculty during the phase-out.
 - d) Last academic year in which students were admitted to the program in its current configuration.
 - e) Table showing the number of students currently enrolled and their projected dates for graduation.
 - 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.
 - 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.
 - h) A plan for communicating with students, faculty, staff, alumni, NCARB, and the state registration/licensing board, with copies of all communications with these groups.
 - i) Evidence that the program has publicly announced the phase-out of the program in all of its promotional materials, including websites.

Action on Phase-Out Plans. Phase-out plans will be reviewed by the full board. Depending on the proximity of the teach-out date to the date of the next visit, the board may take one of two actions:

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

During a phase-out period, students enrolled in the accredited degree program must be able to complete their entire course of study, with the necessary resources, as accredited by NAAB. Further, regularly scheduled visits for continuing accreditation will take place.

Any institution 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.

Substantive Change Review Panel

The NAAB will assign a panel of three people: 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. The NAAB director will serve as the panel chair.

Responsibilities of the Panel Chair

- Coordinate the review of documents with the other members of the panel.
- Coordinate the initial assessment of the materials and make a recommendation to the NAAB staff as to whether a visit is required (see 7.6.2).
- Communicate with the NAAB staff and the program about the details of the visit, if required.
- Prepare the final Substantive Change Report.

Substantive Change Sequence

The panel will review the application and materials along with the most recent VTR. The panel will determine whether there is sufficient documentary evidence to make a recommendation to the NAAB directors. Based on a review of the documentary evidence, the panel will reach one of the following initial decisions:

- The program has provided sufficient evidence, and no visit is necessary. The panel chair will prepare a report, and the panel will follow the process below.
- The program must provide additional or supplemental materials before a recommendation can be made, and no visit is necessary.
- A visit is necessary to obtain additional evidence or to confer with program administrators and other institutional leaders.

If the panel determines that no visit is necessary but additional information is needed:

- The panel chair requests the additional materials from the program. The panel may consult with program or institutional administrators by conference call.
- 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.
- NAAB will provide a copy of the report to the program to correct errors of fact or omissions.
- 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 nonbinding on the board.
- 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.

If the panel determines that a visit is necessary:

- The panel chair will consult with the program administrator to set a date for a one-day substantive change visit. The visit will be held on a weekday when classes are in session and students are on campus.
- The scope of the visit is limited to the preparation by the institution or academic unit for implementing the substantive change.
- The panel chair and program administrator will consult on the visit schedule. 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. Meetings with students.
 - d) 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.
- The program should be prepared to provide the reviewer with a secure work space for use during the reviewer's time on campus.
- 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.
- NAAB will provide a copy of the report to the program to correct errors of fact or omissions.
- The final copy of the report, with the recommendation of the review panel, will be sent to the NAAB board for action.
- The program, if it wishes, may submit a written response to the final report when it submits corrections of errors of fact.

Recommendations for Substantive Change Proposals

The panel may make one of three recommendations to the NAAB Board of Directors. These recommendations do not apply to phase-out plans:

1. Approve the change and leave the existing visit schedule unchanged.
2. Approve the change and advance the time for the next visit for continuing accreditation, while allowing adequate time for the program to prepare.
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.

Final Decision

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

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

ANNUAL REPORTS

Programs granted initial accreditation or continuing accreditation by NAAB are required to submit an Annual Report. The purpose of the Annual Report is to update program records and provide NAAB with information about the program's continuing compliance with the *Conditions for Accreditation* during the program's accreditation cycle.

The demographic data provided in the Annual Report will be aggregated and the aggregate data will be reported on the NAAB website. Each program is responsible for posting its own data on its public website with a link to www.naab.org in accordance with the *Conditions for Accreditation* and *Procedures for Accreditation*.

Annual Report Submission

Programs are required to submit their Annual Reports each year on or before December 15, including the year in which the Architecture Program Report (APR) is due.

Programs that fail to submit the report by December 15 will be assessed a late fee of \$100 per day until the report is submitted. Programs that fail to submit the Annual Report, after notice, will be placed on Administrative Probation (see Administrative Probation policy).

When extenuating circumstances arise, outside of the program's control, (e.g., natural disaster) that prevent a program from submitting an Annual Report by the deadline, the program may request a one-time extension. The request must be in writing, present information in support of the extension, and be submitted no later than 10 days prior to the report's due date. Based on the information presented by the program, the request will be reviewed, and a decision made at the discretion of the Executive Director. Any extension will be for no longer than 30 days from the original due date of the Annual Report.

Annual Report Review Process

Staff will review all Annual Reports for completeness and, if necessary, request any additional information from the program.

The Accreditation Review Committee (ARC) will review Annual Reports and make a recommendation to the NAAB Board of Directors. Two reviewers from the ARC will be assigned to review each program's Annual Report. The reviewers will determine any areas of noncompliance. The ARC reviewers will make one of the following recommendations to be approved by the full ARC and to be acted upon by the board:

- Accept the Annual Report if the program meets all requirements of the Annual Report and no further action required; or
- Accept the Annual Report and require a substantive change request if the program meets all requirements of the Annual Report but has reported a substantive change that was not previously reported (see Substantive Change Policy).
- Accept the Annual Report and require a Special Report to be submitted by June 30 for any area(s) of the *Conditions for Accreditation* or *Procedures for Accreditation* determined to be in noncompliance, unless the program already has been placed on a Progress Report for said areas (see Progress Report Policy).

Special Report

A Special Report will be required when a program has been found to have area(s) of noncompliance in the Annual Report.

Special Report Submission. Programs submitting a Special Report will provide a narrative and supporting materials to address the area(s) of noncompliance identified in the Annual Report. Special Reports are due June 30.

Special Report Review Process. The Accreditation Review Committee (ARC) will review Special Reports and make a recommendation to the Board of Directors. Two reviewers from the ARC will be assigned to each program's Special Report to make a recommendation to the full ARC and to be acted upon by the board

The reviewers will determine if the Special Report satisfactorily addresses the area(s) of noncompliance and make one of the following recommendations to be acted upon by the board:

- Accept the Special Report as demonstrating that the program has satisfactorily addressed the area(s) of noncompliance identified in the Annual Report.
- Reject the Special Report and require the program to submit a Progress Report addressing any continuing areas of noncompliance (see Progress Report Policy).

COMPLAINTS ABOUT PROGRAMS

Individuals who wish to file a complaint about an accredited program they believe is not complying with the *Conditions for Accreditation* must do so in writing.

Written Complaints

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:

- A description of the specific complaint.
- A description of how the program's or institution's failure to address the complaint will affect the program's accreditation.
- A reference to the specific condition(s) that may be compromised as a result of the program's failure to address the subject of the complaint.
- Evidence the complainant has exhausted all other institutional means for resolving the issue.

Process

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

The complaint and response are presented for review at the next board meeting. At that time, the board may consider the following:

- a) Take no action.
- b) Require the program to address the matter of the complaint in the next program Annual Report and subsequent APR.
- 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.

Exceptions

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

Timing

Complaints may be filed at any time during a program's current accreditation cycle. Complaints about matters that arose before the most recent visit will not be considered unless they are part of a continuing complaint.

REQUEST FOR RECONSIDERATION

A program may make a request for reconsideration, that is, ask the Board of Directors to conduct a review of an adverse decision to deny or revoke accreditation. A program seeking reconsideration must provide evidence that:

- a. the Board of Directors committed an error or did not follow its procedures,
- b. the Board of Directors made an oversight in its decision-making process, or
- c. newly discovered evidence concerning program's compliance with the 2020 Conditions for Accreditation that with reasonable diligence could not have been discovered at the time of the Board's decision to deny or revoke accreditation.

Reconsiderations may not be requested for the following:

1. Failure of the program to provide information to NAAB and/or the visiting team in a timely manner.
2. Action regarding the acceptance of APRs, program Annual Reports, or Progress Reports.

Reconsiderations are conducted by the NAAB Board of Directors at a regularly scheduled meeting of the board. An accredited program remains accredited on the same status at the time of denial or revocation while the reconsideration process is pending.

Initiating a Request for Reconsideration

The reconsideration must be requested in writing by the program within 14 calendar days after receipt of the NAAB's accreditation decision. The request must be based on the record described below and must set forth in reasonable detail the basis for the reconsideration. The request must be sent to the NAAB executive director by email at accreditation@naab.org.

Reconsideration Sequence

1. The program must submit written documentation to support its contention that the NAAB Board of Directors should reverse its initial adverse decision. The information provided by the program must include a statement that discusses, in detail, the underlying facts and circumstances that support the bases for the Request for Reconsideration. The statement should be accompanied by supporting evidence.
2. The supporting evidence must be sent to the Director of Accreditation at accreditation@naab.org and received within thirty (30) days after filing the Request for Reconsideration. The information must be submitted electronically as one document in PDF format with bookmarks linking individual components of the document. Files may not exceed 50 MBs.

Review by the Executive Committee

1. The request for reconsideration will be reviewed by the Executive Committee of NAAB within 30 days of submission. Any member of the NAAB Executive Committee who has served as reviewer for the program or has a conflict of interest may not participate in the Executive Committee's deliberations. If a member has a conflict of interest, the next most senior board member or public member will serve on the Committee for that program only.

2. The Executive Committee may request additional information from the program.
3. Programs may request that oral testimony be given at the Board Meeting during which the Request for Reconsideration will be heard. The Executive Committee of NAAB has the sole discretion to grant or deny oral testimony and to determine the length of time allocated for the testimony. The Executive Committee will notify the program of the decision within fifteen (15) calendar days following the request for an oral hearing. If the request is granted, the program will be notified of the date, time, and location of the oral hearing as soon as it is scheduled. The oral testimony will be recorded and transcribed at the program's expense. NAAB does not cover any costs associated with oral testimony.

Review by the Board of Directors

The Board of Directors will consider the program's request for reconsideration, written statement, and all supporting documentation in rendering its decision by majority vote at its next regularly scheduled meeting.

Decision on Reconsideration

Within thirty (30) calendar days after the meeting in which the request for reconsideration is reviewed, the program will be notified of NAAB's decision to affirm, modify, or reverse its initial decision. The Board of Directors also may take other action which it believes appropriate. If the decision is to affirm the initial decision to deny or revoke accreditation, notice of the right to appeal and procedures for doing so will be sent with the decision letter.

The record for reconsideration will be the following:

- a) APR
- b) VTR
- c) Program's Optional Response to the VTR
- d) Program's Progress Report
- e) The program's request for reconsideration
- f) Access to the digital evidence room.

APPEAL OF ADVERSE ACCREDITATION DECISIONS

A program may request an appeal of an adverse accreditation decision (e.g., revocation or denial of initial or renewal of accreditation) when the Board has affirmed its initial adverse decision following the review of a Request for Reconsideration.

Standard of Review

The appellant program has the burden of demonstrating on appeal that the Board of Directors' final decision to revoke or deny accreditation was arbitrary or capricious, not based on substantial evidence on the record, or NAAB did not follow its stated policies and procedures.

An accredited program remains accredited on the same status at the time of denial or revocation while the appeal is pending.

Appeal Procedures

1. **Notice of Appeal:** A program that wishes to appeal an adverse accreditation decision by the Board must notify the Executive Director in writing, via email at accreditation@naab.org, of the intent to appeal within ten (10) calendar days of receipt of the decision from the Request for Reconsideration process. The Notice of Appeal must include a brief statement of the reasons why the appellant program believes the adverse accreditation decision should be amended or remanded. The Notice must also indicate who will represent the program during the hearing. If the Notice of Appeal is not submitted within ten (10) calendar days, the original decision of the Board stands and is shared with the public.
2. **Accreditation Record:** Within fifteen (15) calendar days of receiving the Notice of Appeal, NAAB will forward the accreditation record to the appellant program. The accreditation record consists of the materials and testimony considered during the Request for Reconsideration process at the time the adverse accreditation decision was made, relevant NAAB decision letters, a chronology of the actions taken by NAAB leading to the adverse accreditation decision, and Procedures in effect at the time of the adverse accreditation decision.
3. **Written Grounds for Appeal and Reply:** Within thirty (30) calendar days of receipt of the accreditation record, the appellant program must submit its written Grounds for Appeal setting forth the specific reasons why the adverse accreditation decision should be amended or remanded. Within thirty (30) calendar days of receiving the appellant program's Written Grounds for Appeal, NAAB may in its sole discretion submit a brief in reply. If the Written Grounds for Appeal are not submitted within thirty (30) calendar days, NAAB will understand this to mean that the program no longer intends to pursue the appeal, thus ending the process. The original decision of the Board will be implemented and shared with the public within one business day.
4. **New Evidence Rule:** Neither the appellant program, nor NAAB may present any new documentation or evidence that was not before the Request for Reconsideration at the time of the adverse accreditation decision.
5. **Appeal Panel:** The Appeal Panel shall be comprised of a minimum of three (3) members drawn from a pool of candidates that includes a public member and a combination of educators, practitioners, regulators, with experience in accreditation and who have a working knowledge of and experience with NAAB accreditation conditions and procedures. The members of the Appeal Panel will be subject to NAAB's Conflict of Interest Policy, may

not be a current Board Member, and will not have participated in any evaluation of the program or reconsideration process related to the adverse accreditation decision on appeal. The Director of Accreditation will submit the pool of Appeal Panel members to the program within fifteen (15) calendar days of receiving the appellant program's Notice of Appeal. The program will have five (5) calendar days to notify the Director of Accreditation of any known conflicts of interest and may remove up to three (3) members from the pool list for any reason. The Director of Accreditation will evaluate the conflicts of interest and finalize the composition of the Appeal Panel and designate a chairperson.

6. **Transmission of the Record and Review by the Appeal Panel** Once the Appeal Panel has been fully constituted and the accreditation record compiled, the NAAB Director of Accreditation will deliver the accreditation record to the Appeal Panel. The Appeal Panel will consider all the facts and information contained in the record, including the appellant program's Written Grounds for Appeal and any reply submitted by NAAB in reaching a decision regarding the Board of Directors' accreditation action. The Appeal Panel may not consider information that is not in the accreditation record, such as information that is not pertinent to the Written Grounds for Appeal, or which was not available to the Board at the time of the adverse accreditation or concerns related to remedial efforts undertaken since the time of the adverse accreditation decision.
7. **Confidentiality** Appeal Panel members agree to abide by NAAB's confidentiality policies and procedures. All information reviewed during the appeal procedure is to be held in strict confidence by the parties and the Appeal Panel.
8. **Appeal Panel Process and Determinations**
 - a. **Appeal Hearing:** The hearing will take place within sixty (60) calendar days of when the Appeal Panel is fully constituted and has received the accreditation record. The Director of Accreditation will schedule the appeal hearing in consultation with the Appeal Panel and the appellant program. The hearing will take place virtually via a Zoom (or equivalent) link provided by NAAB. The appellant program will notify NAAB of the names and contact information for those who will be representing the program during the hearing. The program may be represented by legal counsel. If representatives of the appellant program do not attend the appeal hearing after receiving proper notice of the date, time, and location, the Appeal Panel shall have discretion to reschedule the hearing or proceed to a decision on the accreditation record. The Appeal Panel will consider an emergency or other unforeseen relevant circumstances (e.g., natural disaster) that prevent a representative(s) from attending the appeal hearing and, in such cases, will adjust accordingly. The hearing will be scheduled for three (3) hours. The appellant will have thirty (30) minutes to present its appeal to the Appeal Panel and may reserve some of the time for concluding remarks. The remainder of the time will be reserved for questions to the appellant program by the Appeal Panel members. NAAB will be given the opportunity to present to the Appeal Panel. As NAAB does not consider the appeal hearing to be an adversarial proceeding, there will be no discovery, witness testimony, or cross-examination of witnesses. At the conclusion of the hearing, the Appeal Panel will deliberate in executive session and by majority vote make its determination.
 - b. **Decision to Affirm:** The Appeal Panel will affirm the adverse accreditation decision if it finds that the adverse accreditation decision was based on substantial evidence on the record, was not arbitrary or capricious, and that in arriving at the adverse accreditation decision, the NAAB Board of Directors followed its published standards and procedures. **A decision to affirm the adverse accreditation decision is final and not subject to further review.**

- c. **Decision to Affirm and Amend:** If the appeals panel determines that, although it agrees with the Board's decision based on the entirety of the accreditation record, one or more elements of the Commission's stated reasons for decision or procedural actions were in error, the appeals panel may affirm and amend the decision. **A decision to affirm and amend the adverse accreditation decision is final and not subject to further review.**
 - d. **Decision to Remand:** The Appeal Panel will remand the adverse accreditation decision to the NAAB Board of Directors for further consideration when it finds that the decision was erroneous in that it was not supported by substantial evidence on the record, was arbitrary or capricious, or that NAAB failed to follow its published conditions and procedures, and that this failure was a significant factor leading to the adverse accreditation decision. A finding error is based on the Appeal Panel's conclusion that no reasonable authority or body would have reached the decision under appeal when taking into account all the facts before it at the time of decision and in light of the requirements stated in NAAB's conditions and procedures according to their plain meaning and consistent with the usual and common practices of NAAB. The Appeal Panel has no authority regarding the reasonableness of the accreditation conditions, policies or procedures and must accord deference to the Board of Directors in this regard. If the decision is remanded, the Appeal Panel will specify the issues, policies, or procedures that the Board of Directors must address on remand. **The Appeal Panel's decision to remand to the Board of Directors is final and not subject to further appeal.**
 - e. **Recordings:** The appeal hearing will be professionally transcribed. A transcript of the proceedings will be made available to the parties who will each be responsible for the cost.
 - f. **Appeal Fees:** A program requesting an appeal will be required to pay a non-refundable appeal process fee of \$10,000 to cover administrative expenses for the appeal, payable at the time the program files the notice of intent to appeal. If the program fails to submit the fee, the appeal will not be considered filed, and the adverse accreditation decision will become final.
 - g. **Implementation of Appeal Panel Decision and Notifications** The decision of the Appeal Panel will be communicated to the parties within ten (10) calendar days of the conclusion of the hearing. A remand will be considered by the board at its next regularly scheduled meeting.
9. **Final Decisions** of the board are not subject to further appeal and will be shared with other regulatory bodies and the public within thirty (30) days of implementation, following NAAB's notification procedures set forth in NAAB's Procedures for Accreditation.

APPENDIX 1: STATEMENT ON CHANGES TO THE NAAB CONDITIONS AND PROCEDURES FOR ACCREDITATION

Changes to the *Conditions for Accreditation* and the *Procedures for Accreditation* are outlined in Section 6.2 of the NAAB Policy Manual. That section is referenced below for information:

Section 6.2 Changes to the NAAB Conditions and Procedures

The NAAB's *Conditions* and *Procedure* have been revised several times over the years. These revisions reflect NAAB's commitment to continuous improvement by allowing programs the flexibility to adapt to a dynamic context. The review types are:

Annually: The NAAB *Conditions* and *Procedures* are reviewed annually by the NAAB's Assessment and Evaluation (A+E) Committee for *nonsubstantive* changes that do not modify the prior meaning of a criterion and are normally intended to improve clarity, structural consistency, format, or grammar and syntax. The A+E Committee shall propose changes to the NAAB board for approval. *Nonsubstantive* revisions approved for implementation will be included in the *Conditions* or *Procedures* for the next visit cycle.

Periodically: The NAAB *Conditions* and *Procedures* are reviewed periodically by the A+E Committee for *substantive* changes. *Substantive* changes are defined as the addition of a new criterion or a revision to an existing criterion that modifies its prior meaning. For *substantive* changes, the A+E Committee shall recommend a suitable review and comment period and an appropriate implementation plan to be approved by the NAAB board. Final approval of any substantive change rests with the NAAB board.

APPENDIX 2: NAAB POLICY ON THE USE OF ARTIFICIAL INTELLIGENCE SYSTEMS (AI SYSTEMS) IN ACCREDITATION

1. Purpose

The National Architectural Accrediting Board (NAAB) seeks to ensure that AI Systems are utilized by accredited and applicant programs in an ethical, transparent, and secure manner and in compliance with all applicable NAAB policies and procedures and federal and state laws and regulations as well as any applicable foreign laws, e.g. the [EU Artificial Intelligence Act](#) and the [EU General Data Protection Regulations](#) (GDPR). If an applicant or accredited program's local law and US law conflict, the local law will prevail. NAAB recognizes the potential for AI as a tool for innovation in higher education and its use toward optimizing efficiency. The purpose of this policy is to describe NAAB expectations and limitations for use of AI Systems for NAAB accredited and applicant programs in relationship to the accreditation process.

2. Scope and Coverage

This policy applies to NAAB accredited programs or programs seeking NAAB accreditation and their personnel. It governs the use of AI systems in all accreditation activities, communications, and documentation.

3. Protection of Confidential or Sensitive Information (CSI)

All users of AI systems must ensure that confidential or sensitive information (including institutional data, evaluation results, and personal information) is not disclosed to, processed by, or used to train AI systems that do not guarantee adequate data protection. Only secure AI systems may be used, and data sharing must comply with applicable privacy laws, including the Family Education Rights and Privacy Act (FERPA), and agency confidentiality agreements. Users of AI systems bear the burden of demonstrating the security of the Confidential or Sensitive Information.

4. Validity, Accuracy, and Authenticity of Information

AI system-generated outputs used in accreditation-related activities must be verified for accuracy and authenticity. Human oversight is required for all critical decisions and official documentation. Users are responsible for reviewing, validating, and, where necessary, correcting AI-generated content before use or dissemination. NAAB accredited and applicant programs bear responsibility for the accuracy and integrity of all materials submitted to NAAB under the program's name, including materials generated by AI systems.

5. Ethics of Use

AI systems must be used in accordance with ethical standards such as [UNESCO's Ethics of Artificial Intelligence](#). This includes avoiding bias, discrimination, or unfair treatment in AI-assisted evaluations or communications. Users must not employ AI systems in ways that could compromise the integrity, fairness, or credibility of accreditation activities.

6. Disclosure of AI System Use

Whenever AI systems are used to generate, summarize, or synthesize information that contributes to official reports and communications, this use must be disclosed to NAAB at accreditation@naab.org. Reports and communications should indicate where and how AI systems contributed to the process.

7. Permitted and Prohibited Purposes

Permitted uses of AI systems include:

- Summarizing documentation
- Synthesizing information for preliminary analysis

- Supporting administrative tasks (e.g., scheduling, reminders)

Prohibited uses include:

- Processing or storing confidential information on unsecure AI systems
- Using AI systems to generate deceptive, misleading, or plagiarized content
- Any use that violates laws, regulations, or ethical standards

8. Responsibility for Compliance

All applicant and accredited programs, and their personnel, are responsible for adhering to this policy. Violations may result in a program being placed on administrative probation.

9. Definitions

The following definitions are used in this policy and/or procedures:

- A. **Accreditation activities.** All activities (including but not limited to reviews, reports, visits) conducted by applicant and accredited programs and NAAB representatives related to a program's accreditation phase, accreditation status, or scope of accreditation occurring throughout the accreditation review cycle and during monitoring activities.
- B. **Accreditation materials.** All documentation related to accreditation activities including but not limited to the program's written reports to NAAB, submitted evidence, team reports, program responses, confidential briefs, third-party comments, action notifications, substantive change requests, transcripts of proceedings, team rosters, and any correspondence of record. Accreditation materials are treated as confidential by NAAB representatives and become part of the program record.
- C. **Artificial Intelligence System (AI System).** The use of machine learning technology, software, automations, and algorithms designed to operate with varying levels of autonomy, simulating human intelligence to analyze data and generate outputs like predictions, recommendations, or decisions that influence real or virtual environments. These systems, which include software and hardware, can adapt after deployment based on input data.

AI systems may be open source or closed source. Open-source AI systems may have an accessible system that is freely available, modifiable, and shareable, while closed source AI systems may be developed by private organizations who keep the code, data, and structure, and proprietary information private. (definition adapted from [SANS Institute](#) and [Linux Foundation](#))

- D. **Confidential and Sensitive Information.** Confidential and Sensitive Information (CSI) includes, but is not limited to, all information related to the sponsoring institution or program and not generally known in spoken, printed, electronic or any other form or medium relating, directly or indirectly to business practices, policies and procedures, plans, strategies, agreements and contracts, pending or future transactions, trade secrets, negotiations, computer and information technology resources information, accounting information and records, and financial information. CSI shall not include information that was required to be disclosed by law, regulation, other lawful means or any information that is generally known to the public or in the public domain.

- E. **Family Educational Rights and Privacy Act (FERPA) (20 U.S.C. § 1232g).** A 1974 U.S. federal law protecting the privacy of student education records. FERPA applies to educational institutions receiving Federal Student Aid and grants parents, and students over 18, who attend post-secondary institutions rights to inspect records, request amendments and control disclosure of personally identifiable information.
- F. **Generative AI (Gen AI).** Artificial intelligence trained on large amounts of raw data to understand user requests and create relevant new content, such as audio, images, software code, text, or video.
- G. **High-risk AI.** AI Systems that pose risk to individuals or communities, including human rights (civil rights, civil liberties, equal opportunities, access to resources, or privacy) or safety (human life, well-being, or critical infrastructure).
- H. **NAAB representatives.** Individuals who represent or serve NAAB including but not limited to NAAB site visitors, NAAB staff, NAAB committee members, NAAB Board members and NAAB third party consultants (e.g. accountants and legal advisors.)
- I. **Personal information or personal data.** Also known as personally identifiable information (PII). Information that is identifiable to any person, including, but not limited to, information that relates to a person's name, health, finances, education, business, use or receipt of governmental services or other activities, addresses, telephone numbers, social security numbers, driver license numbers, other identifying numbers, and any financial identifiers.
- J. **Predictive AI.** An AI model that utilizes statistical analysis with machine learning algorithms to find data patterns and forecast outcomes to predict the most likely upcoming event, result, or trend. Predictive AI models can be trained on large datasets in order to make informed decisions.