



Applied Sociology, Clinical Sociology, Engaged Public
Sociology, Translational Sociology, Forensic
Sociology, and Rural Sociology Programs in
Sociological Practice

Accreditation Review Process Guidelines

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Commission on the Accreditation of Programs in Applied and Clinical Sociology

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Forensic Sociology, and Rural Sociology Programs in Sociological Practice
Accreditation Review Process Guidelines**

I. Introduction to the Accreditation Review Process

The Commission on the Accreditation of Programs in Applied and Clinical Sociology (hereafter referred to as the Commission or CAPACS) has prepared the *Accreditation Review Process Guidelines* to facilitate the accreditation review process. The guidelines are intended for use by the applicant program (hereafter also referred to as the Program) and the Accreditation Review Committee (hereafter also referred to as the Committee or ARC). The guidelines identify the objectives of the accreditation review process and detail the roles and responsibilities of the parties. This process also is discussed in the Commission's *Accreditation Policies and Procedures for Applied Sociology, Clinical Sociology, Engaged Public Sociology, Translational Sociology, Forensic Sociology, and Rural Sociology Programs in Sociological Practice* (hereafter referred to as the *Accreditation Policies and Procedures*).

A. Objectives of the Accreditation Review Process

1. To determine whether a Program meets the Standards established by the Commission.
2. To recommend to the Commission whether a Program should be accredited.

B. Steps of the Accreditation Review Process (see Appendix A for a suggested timeline)¹

1. The accreditation review process is initiated when a Program submits a completed [Accreditation Application Form](#), available as a PDF for download on the CAPACS Website, with a non-refundable \$100 application fee (required for the initial application only), to the Commission's Executive Office. The Commission's Executive Office is the current Chair's Office.
2. If the application shows that the preconditions for accreditation are met, the Commission Chair requests the submission of a Self-study Report (hereafter also referred to as the Report) and a \$2000 Accreditation fee from the Program. In addition, the Commission Chair sends copies of (a) the accreditation *Standards*, and (b) the accreditation *Self-study Guidelines* to the Program, for completing the Self-study Report at the Baccalaureate, Masters, or Doctoral Level, along with copies of (c) the *Accreditation Policies and Procedures*, and (d) the *Accreditation Review Process Guidelines* (this document) for applied sociology, clinical sociology, engaged public sociology, translational sociology, forensic sociology, and rural sociology programs in sociological practice. The documents

¹ A Program may voluntarily withdraw from the initial accreditation review process at any time (see Section 4.4, in the [Accreditation Policies and Procedures](#)). An accredited program that requests the withdrawal of accreditation during an accreditation or reaccreditation period, chooses not to apply for reaccreditation, or fails to apply for reaccreditation in a timely manner is subject to the provisions in Section VIII and item 12 in Appendix A in this document (also see Sections 1.15, 4.5, and 9.5 in the [Accreditation Policies and Procedures](#)).

can be sent in hardcopy and/or digital format (e.g., Word or PDF), or accessed and downloaded by the Program, online, on the [Documents](#) web page on the CAPACS Website.

3. The Program submits the Self-study Report to the Commission Chair. The Self-study Report is a single digital document in MS Word or PDF format that includes a table of contents with live links to the narrative and supporting materials in the appendices for all required elements.
4. Upon receipt of the Self-study Report and the accreditation fee of \$2000, the Commission Chair reviews the Report for completeness. If the Report is deemed “incomplete,” the Commission Chair informs the Program of the additional content and materials that are needed to complete the Self-study Report, and the Program submits a revised Self-study Report to the Commission Chair.
5. When the Commission Chair determines that the Self-study Report is complete, the Commission Chair and Vice-Chair, appoint an Accreditation Review Committee, and designate the ARC Chair and Site Visit Team (hereafter also referred to as the SVT), in consultation with the Executive Committee of the Commission. The Commission Chair deposits a copy of the Self-study Report in a shared folder in cloud storage for the Committee.
6. The Accreditation Review Committee will:
 - a. Conduct an initial review of the Self-study Report and supporting materials provided by the Program.
 - b. Hold a pre-site visit conference, or conferences. A conference may be in person, or through a conference call, an internet videoconference or chat session, or other means deemed appropriate by the Commission. (Hereafter, the term “conference” shall refer to any of these means.)
7. During the conference(s), the Accreditation Review Committee will:
 - a. Determine the extent to which the Self-study Report and supporting materials meet the Standards of the Commission.
 - b. Determine if additional information is needed to support the granting of accreditation of the Program by the Commission.
8. Following the conference(s), the Site Visit Team will:
 - a. Complete pre-site visit preparation.
 - b. Conduct the site visit.
 - c. Prepare the Site Visit Report.

During an international crisis such as the COVID-19 (Coronavirus) pandemic, the site visit will be conducted virtually using appropriate interactive technologies (e.g., teleconferences and videoconferences). In general, U.S. and other national guidance recommends that an abbreviated physical site visit should follow as soon as practicable to confirm that the information obtained during the virtual site visit complies with the standards of the accrediting

commission or entity. CAPACS will consult program directors on “best practices” during the crisis and post guidance on the Commission’s website.

9. Following the site visit, the Accreditation Review Committee will:
 - a. Hold a post-site visit conference to review the Site Visit Report, and any comments, clarifications, and supplemental materials submitted by the Program, and incorporate changes in the Report, as appropriate.
 - b. Prepare and submit an interim “Report on Accreditation” (without accreditation recommendation) to the Program, for final review and comment.
 - c. Hold an additional post-site visit conference, or conferences, if necessary, to review the comments of the Program and incorporate any changes in the Report, as appropriate.
 - d. Prepare and submit the final “Report and Recommendation on Accreditation” to the Commission, with all available evidence, for review. This report includes the Committee’s recommendation on whether the Program should be accredited, the Program’s accreditation status, and the basis for that recommendation. (Please refer to Step 10, in Appendix A, in this document, and Sections 8.3 and 9.3, in the Commission’s *Accreditation Policies and Procedures* for classifications of accreditation status and non-accreditation.)

10. Following the receipt of the “Report and Recommendation on Accreditation” from the Accreditation Review Committee, the Commission will:
 - a. Review the Report and all available evidence submitted by the Committee.
 - b. Decide whether the Program meets the *Standards* and, if so, make a final determination on the accreditation status of the Program.
 - c. Communicate the accreditation determination on the Program’s accreditation status in the final “Report and Recommendation on Accreditation,” which the Commission Chair will forward to the Program.

C. Professionalism and Adherence to Ethical Standards

Any member of the Commission having a potential or actual **conflict of interest** must recuse himself or herself (or themselves) from all actions in an accreditation review process as stated in the [Accreditation Policies and Procedures](#). *(The member shall be required to file a signed and dated “Conflict of Interest Policy and Disclosure Form”, as indicated in Sections 1.7 and 6.5).* Further, the results of the accreditation review process shall be, and remain, **confidential**, and may be released only by official action of the Commission. No individual member of the Commission, the Accreditation Review Committee, staff, or others involved in the process shall make any disclosure about individual program evaluations. Members of the Accreditation Review Committee shall adhere to the highest standards of **professionalism**, and conduct their reviews in a timely manner.

II. Accreditation Review Committee

A. Initiation of the Accreditation Review Process

The accreditation review process begins with the Program's submission of a completed *Accreditation Application Form*, available as a PDF for download on the CAPACS Website, with non-refundable application fee (required for the initial application only), and a Self-study Report with accreditation fee. (Please refer to Section 3.0, in the Commission's *Accreditation Policies and Procedures* for the current fee schedule and timetable of payments.) The Chair and Vice-Chair of the Commission appoint the Accreditation Review Committee, and designate the Committee Chair, the Site Visit Team, and the Site Visit Team Leader, in consultation with the Executive Committee of the Commission. The Accreditation Review Committee has five members: the ARC Chair; two site visitors, who comprise the Site Visit Team; and two reviewers. The ARC Chair is a current or former member of the Commission.

The site visitors have completed Commission-sponsored training for the role, and have obtained institutional approval, or are otherwise able, to commit the time necessary to conduct the site visit. The reviewers are sociologists who are knowledgeable about training programs in applied sociology, clinical sociology, engaged public sociology, translational sociology, and forensic sociology, and rural sociology (*e.g., development and global*) programs in sociological practice.

B. Membership of the Accreditation Review Committee

The Chair and Vice-Chair of the Commission appoint the Accreditation Review Committee, and designate the Committee Chair, the Site Visit Team, and the Site Visit Team Leader in consultation with the Executive Committee of the Commission.

1. The Chair of the Accreditation Review Committee and members of the Site Visit Team shall have completed a training workshop recognized by the Commission. The training workshop shall focus on issues encountered in the analysis of Self-study Reports, the Commission's *Accreditation Policies and procedures* and *Accreditation Review Process Guidelines* that govern the accreditation review process, and the format for writing reports to the Commission. This training is intended to ensure consistency in the interpretation and application of the Commission's accreditation standards during the review process.
2. The Commission shall sponsor this training periodically, and maintain a roster of individuals who have completed the training and are therefore eligible to serve as the Chair of the Accreditation Review Committee or as a member of the Site Visit Team.

C. Roles and Responsibilities of Accreditation Review Committee Members

The Accreditation Review Committee has five members: the ARC Chair; two site visitors, who comprise the Site Visit Team; and two reviewers. Their roles and responsibilities are described below.

ARC Chair: The ARC Chair is a current or former member of the Commission. The ARC Chair heads the Accreditation Review Committee with full vote but does not participate in the site visit. The ARC Chair calls and presides at all conferences of the Committee, keeps informal notes of the discussion, and provides input and guidance to the Site Visit Team.

1. Prior to the site visit, the ARC Chair shall:
 - a. Ensure that Committee members have received all materials for the Program.
 - b. Review the Self-study Report and supporting materials submitted by the Program based on the Commission's *Standards*, before the pre-site visit conference(s).
 - c. Schedule pre-site visit conference(s) to discuss the Self-study Report and supporting materials, and the findings of the Committee.
 - d. Provide input and guidance to the Site Visit Team on the issues to be addressed during the site visit.
 - e. Work with the Site Visit Team and Program in scheduling the site visit.
 - f. Be available to the Site Visit Team for contact by telephone, email, videoconference, or other means during the site visit.

2. Following the site visit, the ARC Chair shall:
 - a. Review the Site Visit Report, and distribute the Report to the Committee.
 - b. Schedule a post-site visit conference(s) of the Committee within 30 days of the site visit to discuss the Site Visit Report, and any comments, clarifications, and supporting materials submitted by the Program, and the Committee's findings.
 - c. Prepare an interim "Report on Accreditation" without recommendation of the Program's accreditation status based on the Committee's findings.
 - d. Provide a copy of the interim "Report on Accreditation" (without recommendation) to the Program within 60 days of the site visit, and invite final comment on the issues.
 - e. Distribute final comments from the Program to the Committee, if applicable.
 - f. Schedule an additional post-site visit conference(s) to discuss the Program's final comments, if necessary.
 - g. Participate in the Committee's review and evaluation of the Program during the post-site visit conference(s).
 - h. Participate in the Committee's final determination and recommendation to the Commission on the Program's accreditation status during the post-site visit conference(s).
 - g. Prepare the final "Report and Recommendation on Accreditation" to the Commission, with the Committee's findings.
 - h. Distribute the final "Report and Recommendation on Accreditation," along with any minority report(s), to the Commission within 90 days of the site visit.
 - i. Present and discuss the Report(s), with all available evidence, in person, at a Commission meeting (annual or regular per the Bylaws).

Site Visitors: The Site Visitors are members of the Accreditation Review Committee who have been trained in a Commission-sponsored training workshop to conduct the site visit and participate on the Committee with full vote. They shall have obtained institutional approval, or are otherwise able to commit the time necessary to conduct the site visit. Two site visitors shall comprise the Site Visit Team (SVT), with one site visitor serving as the Site Visit Team Leader.

1. The Site Visitors' responsibilities shall be to:
 - a. Review the Self-study Report and supporting materials submitted by the Program based on the Standards of the Commission, before the pre-site visit conference(s).

- b. Prepare a list of questions and issues for the site visit before the pre-site visit conference(s).
- c. Participate in the pre-site visit conference(s).
- d. Work with the ARC Chair to modify the list of questions and issues for the site visit and include the comments of the other Committee members after the pre-site visit conference(s), if applicable.
- e. Work with the ARC Chair and Program Director in scheduling the site visit.
- f. Conduct the site visit following the requirements set by the Accreditation Review Committee.
- g. Schedule an exit meeting with the Program Director, other departmental representatives, and institutional administrators to provide an overview of the strengths and weakness of the program, and to review the subsequent steps in the accreditation review process.
- h. Prepare a Site Visit Report for the Program before departing from the site visit. The Report shall include a summary of the program's strengths and weaknesses and compliance with the standards. The Program will be invited to return comments, clarifications, and additional supporting materials, if requested.
- i. Provide copies of the Site Visit Report summarizing any comments, clarifications, and supporting materials submitted by the Program to the ARC Chair for distribution to the Committee.
- j. Participate in the Committee's review and evaluation of the Program during the post-site visit conference(s).
- k. Participate in the Committee's final determination and recommendation to the Commission regarding the Program's accreditation status during the post-site visit conference(s).
- l. Attend the Commission Board Meeting (annual or regular per the Bylaws) wherein the Committee's final "Report and Recommendation on Accreditation" is presented.

Reviewers: Reviewers are members of the Commission or sociologists chosen because of their experience or familiarity with programs in sociological practice, including applied sociology, clinical sociology, engaged public sociology, translational sociology, forensic sociology, and rural sociology (e.g., development and global). Reviewers may have completed Commission-sponsored training. Reviewers are expected to be familiar with the Standards of the Commission. They participate in the Accreditation Review Committee with full vote, but do not conduct the site visit.

Reviewers may not suggest changes in the Standards as part of the work of an Accreditation Review Committee. However, their comments on the Standards are welcome and should be provided in writing to the Commission.

1. The Reviewers' responsibilities shall be to:
 - a. Review the Self-study Report and supporting materials submitted by the Program based on the Standards of the Commission before the pre-site visit conference(s).
 - b. Participate in pre-site visit conference(s).
 - c. Provide input to the site visitors on the issues to be considered during the site visit.

- d. Review the Site Visit Report and any comments, clarifications, and supporting materials submitted by the Program after the site visit prior to the post-site visit conference(s).
- e. Participate in the Committee review and evaluation of the Program during the post-site visit conference(s).
- f. Participate in the Committee’s final determination and recommendation to the Commission on the Program’s accreditation status during the post-site visit conference(s).
- g. Attend the Commission Board Meeting (annual or regular per the Bylaws) where the Committee’s final “Report and Recommendation on Accreditation” is presented.

D. Accreditation Review Committee Decision-Making Process

After the Accreditation Review Committee's deliberations, the Committee members shall vote on the “Report and Recommendation on Accreditation.” The Committee should make every effort to reach a unanimous decision. If a unanimous decision is not reached, the majority recommendation shall prevail, and will be reported to the Commission. Dissenting member(s) may submit a minority report(s) to the ARC Chair, who shall be responsible for providing the majority and minority reports to the Commission. Dissenting member(s) may request the opportunity to present their views to the Commission in person. However, no member of the Accreditation Review Committee shall contact members of the Commission, privately, outside of the official review committee process, to attempt to influence their votes.

III. Accreditation Review Process: Pre-Site Visit

A. Appointment of Accreditation Review Committee

After the Program has submitted a completed *Accreditation Application Form* with non-refundable application fee (required for the initial application only), and a Self-study Report with accreditation fee, the Chair and Vice-Chair of the Commission shall appoint the Accreditation Review Committee, and designate the Committee Chair, the Site Visit Team, and the Site Visit Team Leader in consultation with the Executive Committee of the Commission, as described in Section II. A., above.

B. Review of Documents

1. The Commission Chair shall conduct an initial review of the Program’s *Accreditation Application Form* and Self-study Report to determine their completeness. After the Commission Chair determines that the *Accreditation Application Form* and Self-study Report are complete, the Commission Chair and Vice-Chair appoint an Accreditation Review Committee (hereafter also referred to as the ARC or Committee), and designate the Committee Chair, the Site Visit Team, and the Site Visit Team Leader in consultation with the Executive Committee of the Commission.
2. The members of the Accreditation Review Committee shall independently review the Program’s completed *Accreditation Application Form* (application), and evaluate the Self-

study Report and supporting materials to determine the extent to which the documents respond to the information requested in the application, and comply with the Standards of the Commission at the level at which the program is applying.

3. The members of the Accreditation Review Committee shall share their analysis of the Program's completed application, Self-study Report, and supporting materials in the pre-site visit conference(s), and work with the ARC Chair to identify areas of special concern and/or areas where additional information should be obtained by the Site Visit Team during the site visit.

IV. Accreditation Review Process: The Site Visit

The site visit is an important component of the accreditation review process. The site visit is scheduled after the Accreditation Review Committee's evaluation of the Program's application and Self-study Report. The site visit serves the purpose of enabling the Site Visit Team to obtain additional information in the ways the Program attempts to meet the Commission's accreditation *Standards* as a program in applied sociology, clinical sociology, engaged public sociology, translational sociology, forensic sociology, or rural sociology in sociological practice at the bachelor's, master's, or doctoral level.

The site visit is a cooperative event. The Program and the Site Visit Team should approach the site visit with this understanding. The site visit provides the Program with the opportunity to present an informative impression on the Site Visit Team. Conversely, it provides the Site Visit Team with the opportunity to present a collegial impression on the Program, while it endeavors to gain a thorough appreciation and understanding of the Program.

A. Objectives of the Site Visit

The objectives of the site visit are to:

1. Determine the extent to which the Program has a clear mission.
2. Determine the extent to which the Program has clear goals and learning outcomes that it regularly assesses and evaluates.
3. Verify and clarify the description of the Program as presented in the Self-study Report.
4. Assess the Program on its stated goals.
5. Assess the Program on the *Standards* of the Commission at the level at which the program is applying.
6. Evaluate the level of administrative and financial support for the Program.
7. Obtain all of the information that is necessary for the evaluation of the Program.

8. Prepare a Site Visit Report for the Program and the Accreditation Review Committee before departing from the site visit. This report includes a summary of the Program's strengths and weaknesses and compliance with the Commission's *Standards* at the level at which the program is applying. The Program is also invited to return comments, clarifications, and supporting materials, if requested.

B. Site Visit Team Members

1. The Chair and Vice-Chair of the Commission shall select the two members of the Site Visit Team and designate the Site Visit Team Leader in consultation with the Executive Committee of the Commission.
2. The Site Visit Team shall gather sufficient information during the site visit to provide a sound basis for the evaluation of the Program and its compliance with the Commission's *Standards* for preparing the Site Visit Report. The Site Visit Team should not consult the Program on the policies and practices of programs at other institutions.
3. The Site Visit Team is an inquiring arm of the Accreditation Review Committee.
 - a. It is composed of professional colleagues.
 - b. It has the responsibility for fact-finding and clarification.
 - c. It is responsible for preparing a Site Visit Report for the Program and Accreditation Review Committee before departing the site visit.
 - d. It is responsible for presenting and interpreting facts about the Program to the Accreditation Review Committee during the post-site visit conference(s).
4. The Site Visit Team functions as a unit with one member designated as the Site Visit Team Leader. The Site Visit Team Leader provides the Program Director and Program faculty with a thorough explanation of what the site visit will entail to prepare for the site visit. The site visit should foster a constructive and collegial interaction between the Program and the Site Visit Team.

The Site Visit Team Leader:

- a. Works with the ARC Chair and Program Director in scheduling the dates of the site visit (or virtual site visit followed by an abbreviated physical site visit during an international crisis or pandemic).
- b. Serves as the spokesperson for the Site Visit Team, and liaison between the ARC Chair and the Program Director (parties).
- c. Communicates the site visit agenda to the Program Director, who prepares a schedule for the site visit that is confirmed by the parties.
- d. Informs the Program Director of any additional data or information that should be gathered and made available for the site visit.
- e. Schedules exit meetings with the Program Director and other departmental representatives, and institutional administrators to provide an overview of the strengths and weaknesses of the Program and its compliance with the Standards at the level it applied, and review next steps in the accreditation review process.
- f. Coordinates the writing of the Site Visit Report for submission to the Program Director before departing the site visit, and invites the Program to return any comments, clarifications, and supplemental materials.

- g. Provides a copy of the Site Visit Report to the ARC Chair for distribution to the Committee, along with any comments, clarifications, and supporting materials submitted by the Program after the site visit.

C. Pre-Site Visit Preparation by the Site Visit Team

The site visit is an important component of the accreditation review process and requires advance preparation to accomplish an efficient and effective site visit.

1. Pre-site visit preparation by members of the Site Visit Team shall require the successful completion of Commission-sponsored training for the role, and include:
 - a. A thorough knowledge of the Commission's *Accreditation Policies and Procedures*.
 - b. A thorough knowledge of the Commission's *Accreditation Review Process Guidelines*.
 - c. A thorough knowledge of the Commission's *Standards and Self-study Guidelines for Applied Sociology, Clinical Sociology, Engaged Public Sociology, Translational Sociology, Forensic Sociology, and Rural Sociology Programs in Sociological Practice* at the level at which the program is applying, including their interpretations and the problems frequently encountered in their applications.
 - d. A complete familiarity with the Program's Self-study Report and supporting materials, including university bulletins, catalogs, pamphlets, and handbooks (hardcopy or digital).
 - e. A thorough understanding of the Accreditation Review Committee's pre-site visit conference discussions and analyses, and areas noted as problematic, for setting the agenda of the site visit.

D. Responsibilities of the Program

The Program has several responsibilities in preparation for the site visit. Careful attention to these responsibilities will help to ensure an efficient and effective site visit. These responsibilities include:

1. Setting a specific schedule for the site visit, which is confirmed by the Program Director and Site Visit Team Leader, in consultation with the ARC Chair, including:
 - a. The names and credentials of persons to be interviewed.
 - b. A list of the places to be visited (e.g., internship or practicum sites).
 - c. A list of other activities in keeping with the agenda provided by the Site Visit Team Leader in accordance with the requirements set by the Accreditation Review Committee.
2. Submitting the schedule two weeks in advance of the site visit (or a virtual site visit if warranted by an international crisis or pandemic).
3. Assembling the materials used in the preparation of the Self-study Report. These materials should be gathered and secured at a central location, and made available for review during the site visit with the necessary permissions.
Generally, these materials shall consist of printed and/or digital documents accessed through a secure URL or portal. In some instances, the documents (e.g., student transcripts and

advisement) will be protected under FERPA² and other applicable privacy and confidentiality laws or requirement of the State and/or institution, including similar laws enacted outside the United States. Refer to the footnote, below, for the Commission's recognition of FERPA and specific guidance.

These materials shall include:

- a. Administrative records on program student admissions, plans of study, transcripts, and advisement, and data on currently enrolled students, students graduating, and alumni.
 - b. Examples of the work of program students, including work related to the "Practice Experience" (e.g., practice portfolios).
 - c. Critical assessments of the work of program students and their progress in the Program by program faculty, advisers, and site supervisors.
 - d. Program manuals and handbooks.
 - e. Labor contracts and/or collective bargaining agreements, and "Practice Experience" agreements for program faculty, students, and site supervisors.
 - f. Curriculum vitae and/or resumes for program faculty, advisers, and site supervisors. *(CVs and resumes should document the professional development activities of program faculty and the educational qualifications and professional experiences of site supervisors).*
 - g. Program syllabi.
 - h. Other documents as determined by the Accreditation Review Committee.
4. Providing a secure workspace where the Site Visit Team can carry out its activities in privacy. This room should contain a telephone; a conference table; a computer and printer; and other furniture and fixtures for the exclusive use and comfort of the Site Visit Team.
 5. Ensuring that the accreditation review process complies with the specified disclosure regulations governing the institution.

E. Site Visit Schedule

1. A site visit schedule is prepared based on the agenda and other specific needs for information identified by the Accreditation Review Committee. The site visit will normally require at least two full working days spread over three calendar days. The length of the visit will depend on several factors, including the number of program faculty and students, the proximity of internship and practicum sites, issues identified for follow-up by the Accreditation Review Committee, and the complexity of the program (see Section I. B. 8., in this document, above, for scheduling a virtual site visit followed by an abbreviated physical site visit during an international crisis or pandemic).

² FERPA or the [Family Educational Rights and Privacy Act](#) (20 U.S.C. § 1232g; 34 CFR Part 99) is a Federal law that protects the privacy of student education records. The law applies to all schools that receive funds under an applicable program of the U.S. Department of Education. Under certain conditions (34 CFR § 99.31), FERPA allows schools to disclose student education records to specified parties and officials without the consent of parents or students of legal age. One of these conditions includes "Accrediting Organizations" such as the Commission on the Accreditation of Programs in Applied and Clinical Sociology (CAPACS). CAPACS recognizes FERPA and will honor other applicable privacy and confidentiality laws or requirements of the State and/or institution, including similar laws enacted outside the United States.

2. The Site Visit Team should arrive in the afternoon of Day 1, in time to meet privately to finalize the details of the site visit and confirm the roles and tasks of the team members. After this conference, the site visitors will meet with the Program Director to review the site visit schedule and, if necessary, modify the schedule, and begin the review of the Program.
3. Day 2 is devoted to site visit activities. In many cases, the site visit will be completed by mid-afternoon of Day 3. (For details on site visit activities, please consult Section IV. F., in this document, below.)
4. On Day 3, the Site Visit Team will meet, and any additional clarifications, explanations, and supporting materials should be requested from the Program. Upon completion of the site visit, the Site Visit Team will conduct exit conferences with the Program Director and other appropriate institutional representatives, and provide the Program Director with an opportunity to make a summary statement for the Site Visit Report. The Site Visit Team will also review the next steps in the accreditation review process during the exit conferences.
5. The Site Visit Team will schedule sufficient time to draft the Site Visit Report and provide a copy of the Site Visit Report to the Program Director prior to departure. The Site Visit Report will include a summary of the program's strengths and weaknesses and compliance with the standards. The Program will be invited to return comments, clarifications, and additional supporting materials, if requested.

F. Model for the Site Visit Schedule

Prior to arrival (or scheduling a virtual site visit followed by an abbreviated physical site visit during an international crisis or pandemic), the agenda and schedule for the site visit shall have been established and confirmed through negotiations between the Site Visit Team Leader and the Program Director, in consultation with the ARC Chair. ***The site visit schedule should allow sufficient time for private Site Visit Team conferences. Any activities scheduled in the evenings should be finished early so that the Site Visit Team can complete its duties afterward.***

A suggested agenda for the Site Visit follows. (The agenda for an abbreviated physical site visit following a virtual site visit during an international crisis or pandemic will be adjusted by the Site Visit Team Leader and Program Director in consultation with the ARC Chair):

Day 1

1. The Site Visitors arrive in the afternoon and complete the following duties:
 - a. Confer and review the site visit schedule.
 - b. Meet with the Program Director to confirm the site visit schedule, and request any additional data or materials required for the site visit, as determined by the Accreditation Review Committee.
 - c. Meet with Program faculty and administrators in an informal gathering.

Day 2

1. Morning

- a. Meet collectively with the Department Chair, Program Director, and Program faculty. The conference should provide an overview and history of the Program, the role of the site visit within the accreditation review process, and pertinent details of the site visit. The conference should be scheduled for approximately 1 hour, and include a 15-minute presentation by the Program, with the remaining time allocated for discussion. Both members of the Site Visit Team are to be involved in this conference.
- b. Meet individually with the Program Director, Department Chair, Program faculty, appropriate higher-level administrators (e.g., the Dean, Provost, and/or President), and faculty who are associated with, but are not necessarily in, the Program such as adjunct faculty. Depending on the size of the Program, the Site Visit Team may meet independently or together with these persons. If independent conferences are held, the Site Visit Team Leader will meet with the highest-ranking administrator.

2. Afternoon

- a. Tour campus and meet with other functionary and support units such as the library, computer center, placement services, and other student support services.
- b. Meet separately with Program students and Program alumni. Program faculty should not be present at these conferences. Both members of the Site Visit Team are to be involved in these conferences.
- c. Meet with Program staff.
- d. Review relevant records.
- e. Meet with Program's community advisory committee, if applicable.

Day 3

1. The Site Visitors remain on site until the following duties are completed:

- a. A meeting with the internship or practicum coordinator, and a visit of a minimum of two (2) internship or practicum sites.
- b. A meeting with other community organizations with which the Program has public and professional outreach relationships, if applicable.
- c. Exit conferences with the Program Director and other appropriate institutional representatives to provide an overview of the strengths and weaknesses of the Program, discuss the Program's compliance with the Commission's *Standards*, and review next steps in the accreditation review process.
- d. Develop a draft of the Site Visit Report that is provided to the Program Director, and includes a summary of the program's strengths and weaknesses and compliance with the standards. The Program Director will be invited to return comments and clarifications, and additional supporting materials, if requested.

This is only a model. Individual circumstances may require modifications and/or a longer site visit.

G. Site Visit Expenses

1. The Program is responsible for the expenses of the Site Visit Team. The following expense guidelines are suggested for the Program:
 - a. Travel Regulations: Authorization to travel as a member of the Site Visit Team shall be a letter from the appropriate institution administrator that approves such expenditures.
 - b. The responsibility for purchasing travel tickets rests with the institution. It is assumed that all members of the Site Visit Team traveling by air will use coach air travel accommodations. If a member of the Site Visit Team travels by rail, the member shall receive a reserved seat for day-time travel.
 - c. Reimbursement will be allowed for taxicabs and airport limousine fares (plus tip of 15%) to, from, and between plane and rail terminals.
 - d. Members of the Site Visit Team are expected to submit receipts to the Program Director.
 - e. If a member of the Site Visit Team drives a privately-owned automobile, reimbursement will be provided at the currently approved institutional rate based on standard highway map distances or odometer readings. If a member of the Site Visit Team who travels by auto incurs additional expenses related to highway, bridge, and tunnel tolls, ferry fares, and parking fees, they are to submit receipts to the Program Director for reimbursement.
2. Lodging and Meals:
 - a. The Program Director is responsible for arranging separate hotel or lodging accommodations for each member of the Site Visit Team.
 - b. Members of the Site Visit Team are required to submit receipts for reimbursement of meal expenses. Any out-of-pocket expenses incurred for meals will be reimbursed by the institution based on a completed expense report with receipts submitted by the members of the Site Visit Team.
3. Reimbursement: The Program is responsible for reimbursing the members of the Site Visit Team within two weeks of submission of an expense report.

H. Site Visit Report

The Site Visit Team shall prepare a written Site Visit Report of its findings, which is submitted to the Program Director for comments, clarifications, and supporting materials, if requested, prior to departure. The Site Visit Team provides a copy of the Site Visit Report to the ARC Chair.

V. Accreditation Review Process: Post Site Visit

A. Post Site Visit Conference

1. The Site Visit Team shall provide a copy of the written Site Visit Report, along with any comments, clarifications, and supporting materials submitted by the Program after the site visit, to the ARC Chair for distribution to the full Committee.

2. The ARC Chair shall organize a conference with the Committee to review the Site Visit Report and any additional comments, clarifications, and supporting materials submitted by the Program after the site visit. If necessary, the Accreditation Review Committee will modify the Site Visit Report.

B. Report on Accreditation to the Program for Review and Comment

Following the approval of the Site Visit Report by the Accreditation Review Committee, the ARC Chair will prepare an interim “Report on Accreditation” (without accreditation recommendation), which will be sent to the Program Director for final review and comment on its accuracy. The Program Director may indicate areas where the report is factually incorrect, and may suggest alternative explanations of the findings of the Accreditation Review Committee.

C. Post-Site Visit Conference on Program’s Comments

1. The Program Director’s comments on the interim “Report on Accreditation” (without accreditation recommendation) shall be provided to the ARC Chair, who will distribute the comments to the Committee.
2. The ARC Chair shall arrange a conference to discuss the Program Director’s comments and the Committee’s findings, and agree on the contents and recommendation of the Program’s accreditation status for the Committee’s final “Report and Recommendation on Accreditation” to the Commission.

D. Report to the Commission

The Accreditation Review Committee shall review all materials concerning the accreditation of the Program. Following the Committee’s conference discussions, the ARC Chair shall prepare a final “Report and Recommendation on Accreditation,” presenting the Committee’s findings and recommendation on the accreditation status of the Program to the Commission.

1. This report shall contain the Committee’s findings of fact.
2. This report shall contain the Committee’s recommendation to the Commission regarding the accreditation status of the Program.

VI. Accreditation Review Process: Commission Decision

- A.** The Commission receives all materials from the Accreditation Review Committee and makes the final determination on the accreditation of the Program, and accreditation status.
- B.** The ARC Chair shall present the Committee’s findings and recommendations, including majority and minority reports, to the Commission. At minimum, one member of the Site Visit Team, plus one member of the Accreditation Review Committee, must attend the Commission Board Meeting (annual or regular per the Bylaws), where the Committee’s final “Report and Recommendation on Accreditation” is presented, and be prepared to answer

any questions on the site visit and the committee's deliberations.

- C. Under normal circumstances, the Commission Chair shall communicate the Commission's determination of the Program's accreditation status and provide the final "Report and Recommendation on Accreditation" to the Program Director within 90 days of receiving the Report from the Accreditation Review Committee.

VII. Post Accreditation Review Process: Annual Reports to the Commission

- A. The Vice-Chair of the Commission shall email the Program Director with a copy of the annual report form and instructions for completing the Annual Report in sufficient time before the submission deadline of the Annual Report. (The annual report form also may be downloaded from the [Documents](#) web page on the CAPACS website.)
- B. The Program Director must submit the Annual Report to the Vice-Chair within two months of the end of the Program's academic year. The Annual Report becomes part of the Program's permanent accreditation file.
- C. The Vice-Chair presents the findings of the Annual Report to the CAPACS Board of Directors at the Commission's Annual Meeting. A written summary of the Board's comments and recommendations is forwarded to the Program Director by the Vice-Chair. Deficiencies and recommendations requiring the Program's compliance with the Standards or the improvement of the program in the following academic year must be addressed in the Program's next Annual Report to the Commission.
- D. Generally, the Annual Report shall specify continuities and changes in the Program's resources, faculty, administration, and curriculum, and include:
 1. An evaluation of the implementation of the program and program goals in the current academic year. The evaluation should document any changes in the Program's administrative and academic activities (refer to Standards 4.1.1 and 4.1.3), any changes implemented to better meet program goals (refer to Standard 4.1.2), and any changes made from recommendations from self-studies, accreditation reviews, annual reports, and/or external reviews (institutional and/or departmental), including any changes for removing deficiencies identified by the Commission (refer to Standard 4.1.4).
 2. An assessment of the student learning outcomes identified for improvement during the current academic year in the assessment cycle, as specified in the Program's Assessment Plan (refer to Standards 4.2.1 and 4.2.2). The assessment should document whether the changes had the intended effect for improvement. An improvement may consist of changes in the curriculum, pedagogy, practice experience, assessment measures, or anything else suggested by the Program's assessment findings (refer to Standard 4.2.3).
 3. A statement of the program goals and student learning outcomes that the Program will evaluate and assess in the following academic year and in the next Annual Report to the Commission.

VIII. Post Accreditation Review Process: The Program Requests the Withdrawal of Accreditation, Chooses Not to Apply for Reaccreditation, or Fails to Apply for Reaccreditation in a Timely Manner

An accredited program that requests the withdrawal of accreditation during an accreditation or reaccreditation period, chooses not to apply for reaccreditation, or fails to apply for reaccreditation in a timely manner shall be responsible for graduating the students it has accepted and are currently enrolled in the program. The Program shall continue to be accredited until it indicates it has graduated all currently enrolled students in an Annual Report to the Commission. The period shall be determined by consensus of the Program and the Commission. Upon verification, the Commission shall withdraw the Program's accreditation (also see Section 1 in this document; and Sections 1.15, 4.5 and 9.5 in the [Accreditation Policies and Procedures](#); the provision also appears in item 1 in Appendix A, in both documents). The Program shall be responsible for the payment of annual continuation fees to the Commission through the agreed date of cessation.

Appendix A
Accreditation and Re-Accreditation Process:
Suggested Timeline

1. Process Begins: The Program submits a completed *Accreditation Application Form* with a non-refundable *application fee* of \$100 to the Commission Chair (the application fee is required for the initial application only). If the preconditions are met per the application information, the Program begins work on the self-study report. The Program will refer to the following documents throughout the review process: (a) the accreditation *Standards* (at the Baccalaureate, Masters, or Doctoral Level); (b) the accreditation *Self-study Guidelines* (at the Baccalaureate, Masters, or Doctoral Level), for completing the Self-study Report; (c) the *Accreditation Review Process Guidelines*, and (d) the *Accreditation Policies and Procedures* for applied sociology, clinical sociology, engaged public sociology, translational sociology, forensic sociology, and rural sociology programs in Sociological Practice.³

Estimated time: 2-3 weeks

2. The Program prepares the Self-study Report.

Estimated time: 2-3 months

3. The Program submits the Self-study Report (1 copy) with accreditation fee of \$2000 to the Commission Chair. The Self-study Report is a single digital document in MS Word or PDF format that includes a table of contents with live links to the narrative and supporting materials in the appendices. The Commission Chair reviews the Self-study Report for completeness. If the Self-study Report is deemed “complete,” the Chair and Vice-Chair of the Commission form an Accreditation Review Committee, and designate the Committee Chair and Site Visit Team, in consultation with the Executive Committee. The Commission Chair deposits a copy of the Self-study Report in a shared folder in cloud storage for the Committee.

Estimated time: 3-4 weeks

4. The Accreditation Review Committee reviews the Self-study Report and schedules a conference call, and additional conference calls, as necessary.

Estimated time: 2-3 months

5. If the Self-study Report is deemed acceptable by the Accreditation Review Committee, a site visit is scheduled (see Sections I. B. 8., in this document for scheduling a virtual site visit followed by an abbreviated physical site visit during an international crisis or pandemic).

³ A Program may voluntarily withdraw from the initial accreditation review process at any time (also see Section 4.4, in the [Accreditation Policies and Procedures](#)). An accredited program that requests the withdrawal of accreditation during an accreditation or reaccreditation period, chooses not to apply for reaccreditation, or fails to apply for reaccreditation in a timely manner is subject to the provisions in Section VIII and item 12 in Appendix A in this document (also see Sections 1.15, 4.5, and 9.5 in the [Accreditation Policies and Procedures](#)).

Estimated time: 2-3 weeks

6. The Site Visit Team conducts a site visit hosted by the Program in September, October, November, February, March, or April (see Section 7.1, in the Commission's *Accreditation Policies and Procedures* document for exceptions).

Estimated time: 3 days (Refer to *Accreditation Review Process Guidelines* for details.)

7. The Site Visit Team writes a Site Visit Report and submits it to the Program Director for comments, clarifications, and supporting documentation as necessary, and to the Chair of the Accreditation Review Committee for distribution to the full Committee. The Chair of the Accreditation Review Committee schedules a conference, and additional conference as necessary, and prepares an interim "Report on Accreditation" (without recommendation) for comment by the Program.

Estimated time: 3-4 weeks

8. The Chair of the Accreditation Review Committee writes the final "Report and Recommendation on Accreditation" for the Commission, incorporating any changes.

Estimated time: 2-3 weeks

9. The Chair of the Accreditation Review Committee submits the final "Report and Recommendation on Accreditation" to the Commission Board (summer meeting/August or winter meeting/February) with all available evidence for review. The Board accepts or rejects the recommendation.

Estimated time: 1 day

10. Process ends:

- The Program is recommended and accepted by the Commission Board for *Full Accreditation* (up to 5 years).
- The Program is recommended and accepted by the Commission Board for *Provisional Accreditation* (2 years).
- A program that is not recommended and accepted for accreditation by the Commission Board will receive a determination of *accreditation denied* (see Sections 1.14, and 8.3, in the Commission's *Accreditation Policies and Procedures* document).
- The Program is recommended and accepted by the Commission Board for *Full Reaccreditation* (up to 7 years).
- The Program is recommended and accepted by the Commission Board for *Probationary Reaccreditation* (2 years).
- A program that is not recommended and accepted for reaccreditation by the Commission Board will receive a determination of *Accreditation Revoked* (see Sections 1.14, 9.2, and 9.3, in the [Accreditation Policies and Procedures](#) document).

11. Post Accreditation Process: Annual Reports to the Commission

Following accreditation and reaccreditation, the Program submits an Annual Report to the Vice-Chair of the Commission within two months of the end of the Program's academic year (also see Section VII in this document; Section 11.2, in the *Accreditation Policies and Procedures document*; and Standard 4.2.4, in the *Standards* for all degree levels).

12. Post Accreditation Process: The Program Requests the Withdrawal of Accreditation, Chooses Not to Apply for Reaccreditation, or Fails to Apply for Reaccreditation in a Timely Manner

An accredited program that requests the withdrawal of accreditation during an accreditation or reaccreditation period, chooses not to apply for reaccreditation, or fails to apply for reaccreditation in a timely manner shall be responsible for graduating the students it has accepted and are currently enrolled in the program. The Program shall continue to be accredited until it indicates it has graduated all currently enrolled students in an Annual Report to the Commission. The period shall be determined by consensus of the Program and the Commission. Upon verification, the Commission shall withdraw the Program's accreditation (also see Section VIII in this document; and Sections 1.15, 4.5 and 9.5 in the [Accreditation Policies and Procedures](#)). The Program shall be responsible for the payment of annual continuation fees to the Commission through the agreed date of cessation.