Grant Title: **Accelerated Pathways in Advanced Manufacturing (APAM)**

Author: **Community College of Rhode Island**

Link: http://www.ccri.edu/

Document: ATMAE Board of Accreditation 2015 Meeting Agenda

DOL Disclaimer Statement:

ATMAE Board of Accreditation
2015 Business Meeting Agenda

A. Review and Approval of Minutes from 2014 (Anderson) *(page 2)*

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← AHMAD 2ND
ACCEPTED UNANIMOUS

B. Review and Approval of Agenda (Anderson)

C. Review of Board Activity from Wednesday (Anderson)

D. Reports on Related Agencies & Programs
1. Visiting Team Training (Zargari)
2. CHEA Interim Report (Schild) *(page 9)*
    i. MOU and Addendum to the Policies and Procedures *(page 24)*

E. Sub Committee Reports
1. Validity and Reliability Sub-Committee (Chin)
2. Distance Learning Sub-Committee
3. Standards and Accreditation Committee (Sarapin, Roberson)
4. Accreditation Personnel and Policy Recommendation Committee (Zargari)

F. Action Items (Anderson)
1. None

G. Other Business
1. Status related to motions and discussion items from 2014 Business Meeting *(page 26)*
2. Discuss Board Terms *(page 27)*
3. Discuss Budget *(page 29)*
    i. Operations vs. Other Costs
    ii. Budget Processing
4. Review and approval of the accreditation fee schedule for 2017-2019 *(page 31)*
5. ATMAE Accreditation Team Chair's Perception of the Performance of the Visiting Team *(page 32)*
6. Discuss International Accreditation *(page 33)*
7. Discuss electronic Board hearing material
8. Discuss Accreditation Software Systems *(page 34)*
9. Appointments to the ATMAE Board of Accreditation
10. Discuss Half-Yearly Teleconference Board Meetings
11. Reviewing standards, policies, and procedures
    i.   Committee membership
    ii. Process
    iii. Handbook policies and procedures
    iv. Current schedule
12. Approval of Consultant applications
13. Goals and Objectives

H. Closing Remarks --- (Anderson)

I. Adjourn (Anderson – Motion to adjourn)

ATMAE Board of Accreditation
Business Meeting Minutes
Hilton at the Ballpark, St. Louis, Missouri
Thursday, November 20, 2014
7:00 a.m. -9:30 a.m.

Call to Order: The meeting was called to order by Board Chair Dr. Andrew Anderson at 7:04 a.m.

Board Members Present: Dr. Andrew Anderson, Chair; Mr. Bob Dixon; Mr. John Haughery; Dr. Marvin Sarapin; Dr. Ahmad Zargari; Dr. John Sutton; Mr. Glenn Rettig; Mr. Charles Stevenson; Mr. Kirk Barnes; Dr. Charles Colen; Dr. Ivan Mosley; Mr. John M. Awbrey; and Director of Accreditation Ms. Michele Anderson (ex officio).

Board Members Absent: Mr. Michael Bledsoe; Dr. Earl Godt; Mr. James McPherson.

Guests Present: Dr. Robert Chin.

A.   Review and Approval of 2013 Business Meeting Minutes

Dr. Sutton moved to approve the Board of Accreditation minutes from the Thursday November 21, 2013 business meeting. The motion was seconded by Dr. Zargari. The motion passed.

B.   Review and Approval of 2014 Business Meeting Agenda

Dr. Anderson reviewed the agenda and made a request for additional topics. Dr. Sutton requested a discussion about visiting team reports, which Dr. Anderson will accommodate under agenda item G.8. *"Preparation of Self-Studies".*

C.   Review of Board Activity from Wednesday November 19, 2014

Dr. Anderson shared general observations about the hearings proceedings, noting that additional efforts are required to ensure that the hearings schedule is maintained through the on-time presence of the expected participants, and that the hearings venue should be pre-checked for noise levels that can be amplified by tabletop microphones.

Dr. Zargari moved to recognize Michele Anderson as the new Director of Accreditation, with appreciation for demonstrated commitment during the post-transition phase and leading up to the hearings. Dr. Mosley seconded and the motion passed.

Drs. Sutton and Sarapin offered their observations on the general flow of the hearings, citing arrival and no-show issues, and that this topic should be discussed in greater detail, possibly resulting in written policies. Michele Anderson will continue to send information to multiple contacts at the institutions regarding the hearings schedule and procedures for appearing before the Board.

Messrs. Rettig and Dixon raised the issue of recusal from voting due to conflicts of interest and what constitutes a conflict as perceived by others. Board discussion ensued. Michele Anderson will conduct research and report to the Board before the next scheduled Board meeting.

Dr. Zargari moved to clarify the conflict of interest threshold, as it pertains to visiting team chairs, to a period of seven years. The motion was seconded by Dr. Sarapin. The motion passed.

The Board discussed the need to define a quorum and whether it is established in the bylaws. Michele Anderson will conduct research on common definitions and those that are specific to ATMAE or may, by default, be defined in the nonprofit rules for its state of incorporation.

The Board discussed possible international expansion based on initial research conducted by Dr. Mohammed Fahmy. It was noted that an application for a change in scope would have to be made to CHEA, and that the Board passed a motion to this effect at the 2013 business meeting. Further discussion ensued about the countries in which relationships can be established, such as in the Americas initially and overseas eventually. Michele Anderson will review the corporate record for the research paper and determine whether an application was submitted to CHEA.

Dr. Anderson reviewed the action taken in response to a letter presented to the ATMAE Board of Directors regarding the autonomous relationship of the Board of Accreditation as required by CHEA. Financial statements are in the process of being clarified to show encumbered funds for future site visits, accreditation reserves, and deferred revenue. The services of an accounting firm have been engaged to ensure the veracity of the information that is present on the statements.

Further, Dr. Anderson reported that a conference call was held in August 2014 between CHEA president Dr. Judith Eaton, Dr. Anderson, Dr. Hallock, Kimberly LaBounty, and Michele Anderson. Dr. Eaton reinforced the need to demonstrate to CHEA that the Director of Accreditation has the "responsibility and the authority" to manage the daily operations of the accreditation program, and that the Board of Accreditation must have the ability to make decisions that are not subject to review.

D. Reports on Related Agencies & Programs

1. Visiting Team Training

Dr. Anderson noted the training events taking place at the conference and the updated visiting team member training guide that was developed to address areas that were identified in the visiting team member survey that was conducted in the summer of 2014. Dr. Sutton noted that an on-line training program was developed by Mr. Glen Roberson and should be located.

Dr. Sarapin identified the need to maintain accurate information about accredited programs. In addition, more accurate training records must be maintained to assist with visiting team formation. Team member and team chair evaluations are an essential part of the personnel selection process and must be administered according to policy.

2. CHEA Recognition

Dr. Anderson noted that an interim triennial report is due to CHEA on December 1, 2015 for recognition review in March 2016.

E. Subcommittee Reports

1. Validity & Reliability

ATMAE Accreditation policy 2.1.5 calls for the appointment of a Validity & Reliability officer to assess the accreditation criteria, procedures, and standards. The officer is charged with conducting a statistical study, at five year intervals, of the visiting teams' recommendations and Board of Accreditation decisions.

Dr. Zargari entered a motion to appoint Dr. Robert Chin to this role, and to conduct a study of outcomes assessment data that will be reviewed in October 2015. The motion was seconded by Dr. Mosley and passed.

Michele Anderson will support Dr. Chin's data collection efforts for this study. The discussion highlighted the need to collect data electronically through the use of an on-line database.

2. Distance Learning Subcommittee

The Board discussed the need to establish criteria to evaluate distance learning programs. Dr. Sutton pointed out that regional accreditors are checking equivalency and that various modalities should be integrated into the accreditation standards.

Michele Anderson was requested to research how the Higher Learning Commission is handling what is likely a national guideline. The members of the Distance Learning Subcommittee are Dr. Mosley, Mr. Dixon, a member of the Distance Learning division, and Michele Anderson.

Dr. Zargari entered a motion to charge the committee to study the standards and provide a report to the Board about the handling of on-line and distance learning by the 2015 conference. Mr. Stevenson seconded, and the motion was approved.

3. Standards & Accreditation Committee

Dr. Sarapin reported on the current effort to review and update the standards, policies, and procedures as required on a three-year cycle. A blog was set up in August 2014 to begin collecting comments, which remained open to the public for four months. Red-line edits will be made to the current documents, starting with minor edits as part of basic housekeeping and eventually leading to substantive changes that will require more extensive review.

The Board resumed the conversation about international accreditation and the associated costs. Michele Anderson will look for benchmarking information.

4. Accreditation Personnel & Policy Committee

Dr. Zargari reviewed current policy language under section 2.1 *"Board of Accreditation"* which references appointments to the Board. Dr. Sutton entered a motion to revise the language to necessarily meet CHEA compliance and to conduct an electronic vote to approve the revision. The motion was seconded by Dr. Sarapin; the motion passed.

F.   Action Items

None.

G.   Other Business

1. Status of 2013 Business Meeting Motions and Discussion Items

Nothing further to review.

2. Change in Association Management Companies

Dr. Anderson reiterated the need to establish a budget for accreditation and a separate bank account for accreditation funds. As the accountant's review

progresses, the balance sheet amounts will become clearer as will the amounts to transfer. Eventually, the accreditation program will have the ability to benefit from fund accounting and the identification of carry-over funds for future projects and development activities.

3. Travel Reimbursement

Dr. Anderson reviewed the Board of Accreditation travel reimbursement policy that was implemented in response to CHEA's observations about covering expenses incurred by volunteers in the course of conducting accreditation work. The policy will be reviewed, updated, and presented to the Board for further discussion. Michele Anderson will provide the Board members with the expense reimbursement form.

4. Consultant Fees

Dr. Sarapin identified the need to identify the programs that had consultant reports. In addition, a review of consultant fees was requested as part of the 2015-2016 and future years' fee schedule review.

5. Review and Approval of the Accreditation Fee Schedule

A draft fee schedule was not prepared and the topic was not discussed.

6. ATMAE Accreditation Visiting Team Chair and Team Member Survey

Michele Anderson provided redacted copies of the visiting team member and team chair survey that was conducted in the summer of 2014. The survey revealed areas of additional training needs and suggestions for ways to improve the annual site visit process, and accreditation overall. The survey results demonstrated the strong commitment that the volunteers have for the program and ways in which ATMAE can build on the program's strengths.

7. Electronic Board Hearing Materials

The Board agreed that the searchable PDF version of the Board hearings materials has continued to work well, and will be continued.

8. Preparation of Self-Studies

The Board briefly discussed two- versus three-member visiting teams, and the need for further discussion on determining the number of standards that are met with partial compliance that would warrant a biennial report. The Validity & Reliability report will identify trends that will be important for the discussion.

9. Submission of Team Reports and Recommendations

The Board requested that Michele Anderson review the visiting team draft and final reports before they are submitted to the institution. The goal is to provide reports that are prepared using a consistent format and have a professional appearance. The information contained in the body of the reports will be compared to the summary tables to ensure accuracy in transcription, and clarification on incongruent information will be sought from the team chairs as necessary. Further, the final reports will have the name of the institution inserted in the document footer to make it easier for the Board to locate information during the hearings.

10. Reviewing Standards, Policies, and Procedures

The topic was addressed during agenda item E.3. *"Standards & Accreditation Committee"..*

11. Training

The topic was addressed during agenda item D.1. *"Visiting Team Training"*.

12. Appointments to the ATMAE Board of Accreditation

Dr. Anderson reviewed Board terms and coterminous expirations of several slots, citing the need to stagger terms to eliminate this situation in future years. Three charts were prepared to show the board term expirations under the current model along with two other models using even and odd years and term extensions. Dr. Anderson and Michele Anderson will review the charts in greater detail and develop an approach to solve the problem.

13. Approval of Consultant Applications

Dr. Sarapin moved to approve Dr. Robert Chin's application as an ATMAE accreditation consultant. The motion was seconded by Dr. Zargari; the motion passed.

14. Goals and Objectives

Dr. Anderson reported that Michele Anderson attended the National Science Foundation's Advanced Technological Education (ATE) conference in Washington, DC in October 2014, which resulted in over twenty-five accreditation prospects over a three-day period. In addition, an invitation was secured to attend a December 2nd meeting at the National Academy of Engineering. Dr. Zargari has been asked to represent ATMAE at this meeting, which is about an eighteen month project to look at pathways for engineering technology.

H.   Closing Remarks

Dr. Anderson thanked the Board members for their active participation in the hearings and the business meeting, and for their continued support of ATMAE accreditation.

I.   Adjournment

Mr. Dixon entered a motion to adjourn. The motion was seconded by Mr. Rettig; the motion passed. The meeting adjourned at 9:36 a.m.

Board of Accreditation

ATMAE

The Association of Technology,
Management, and Applied Engineering

December, 2015

Committee on Recognition, CHEA
C/O Thomas J. Cornacchia, Vice President for Recognition Services
Council for Higher Education Accreditation
One Dupont Circle NW Suite 510
Washington, DC 20036

Dear Committee Members:

On behalf of the Association of Technology, Management, and Applied Engineering and the
Board of Accreditation we respectfully submit our CHEA Five Year Interim Report for your
review and acceptance.

ATMAE attests to the accuracy of the report that follows.

Respectfully,

Dr. Andrew Anderson, Chair, ATMAE Board of Accreditation

Contributors:
Ms. Kelly Schild, Director of Accreditation, ATMAE

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INTERIM REPORT CONTENTS

I. Introduction

    A. Name of organization: Association of Technology, Management, and Applied Engineering (ATMAE)

    B. Address: 275 N. York Street, Suite 40, Elmhurst, IL 60126

    C. Telephone: 630.433.4514

    D. Facsimile: 630.563.9181

    E. E-mail: Kelly@atmae.org

    F. Website: http://www.ATMAE.org

    G. Chief Executive: Dr. Andrew L. Anderson, Andrew@maine.edu

    H. Number of institutions/programs accredited by degree and non-degree at last review and currently: Institutions: 96

                Degree Programs: 454

                Non-Degree Programs: 0

    I. Date of most recent CHEA recognition: May 2010

    J. Date of interim report submission: December 2015

II. Scope of Accreditation

    A. Provide the organization's current CHEA-recognized scope of accreditation.

        ATMAE's Current Scope of Recognition:

            "Associate, baccalaureate, and master's degree programs in technology, applied technology, engineering technology, and technology-related disciplines delivered at national or regional accredited institutions in the United States."

        Geographic areas of operation, including any international activity.
        No major changes since the most recent recognition review of the standards, policies or procedures that address this standard.

        Required relationship to any other accrediting organization, e.g., a programmatic accreditor requires institutional accreditation; joint reviews.

        No major changes since the most recent recognition review of the standards, policies or procedures that address this standard.

    B. If applicable, identify and describe any accreditation activity conducted by the organization that is not part of its current CHEA-recognized scope of accreditation, e.g., institutions or programs outside the United States, consortia of providers, professional or continuing education, internships, residency programs, post-doctoral certification.

        Not applicable

    C. If applicable, describe any accreditation activity authorized by the accrediting organization's charter, bylaws or mission statement, but wherein the organization is not currently active.

        No major changes since the most recent recognition review of the standards, policies or procedures that address this standard.

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D. Describe any plans, initiatives or pilot projects that may result in the submission of a formal request for a change to the CHEA-recognized scope of accreditation and an approximate time frame for making the request. (See Paragraph 11, *2010* CHEA *Recognition Policy and Procedures.*)

> *ATMAE is considering a request to change the recognized scope of its accreditation to include related international programs within the next two years (2016-2017).*

III. **Narrative Reporting Major Changes that Relate to the CHEA Eligibility and Recognition Standards and Demonstrating that the Accrediting Organization Continues to Meet CHEA Eligibility and Recognition Standards**

The purpose of the interim report is to (1) present information about major changes affecting the accrediting organization since the last recognition review, and (2) provide evidence that the organization continues to meet the CHEA eligibility and recognition standards. *If there have been no major changes that relate to CHEA eligibility and recognition standards since the last recognition review or interim report, please indicate this by saying, "No changes since the last review." Please do not include content and information already provided in the prior recognition submission.*

For each CHEA eligibility and recognition standards under the *2010* CHEA *Recognition Policy and Procedures,* Paragraph 9 (A--H) and Paragraph 12 (A-F), discuss any major changes affecting the accrediting organization. Provide appropriate evidence demonstrating how the changes affect the organization's ability to continue to meet the CHEA eligibility and recognition standards. The report should be 12-15 pages maximum.

A. CHEA Eligibility Standards, Paragraph 9 (A--H) *2010* CHEA *Policy and Procedures*

To be eligible for CHEA recognition, the accrediting organization:

9A. demonstrates that the organization's mission and scope are consistent with the CHEA *Institutional Eligibility and Recognition Policy* (Appendix B), including that a majority of the institutions and programs accredited by the organization grant higher education degrees. The *Policy* provides, in part, that the recognition process will place increasing emphasis on the effectiveness of accrediting organizations in assuring academic quality of institutions or programs

> *No major changes since the most recent recognition review of the standards, policies or procedures that address this standard.*

9B. is nongovernmental;

> *No major changes since the most recent recognition review of the standards, policies or procedures that address this standard.*

9C. accredits institutions or programs in institutions that have legal authority to confer higher education degrees, whether U.S. or non-U.S. institutions; [1]

> *No major changes since the most recent recognition review of the standards, policies or procedures that address this standard.*

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[1]For non-U.S. institutions in countries in which legal authority to award degrees is not available, the accrediting organization meets this requirement if it demonstrates that it accredits only those institutions that have standing and significant support in the local community or other communities of interest, e.g., well-known professional organizations and other respected entities that support the institution.

Association of Technology, Management, and Applied Engineering 2015 CHEA Interim Report

9D.   accredits institutions or programs at generally accepted higher education levels;

No major changes since the most recent recognition review of the standards, policies or procedures that address this standard.

9E.   has written procedures that describe, officially and publicly:

•the organization's decision-making processes, policies and procedures that lead to
•accreditation actions, and
•the scope of accreditation that may be granted, evaluative criteria (standards or characteristics) used, and levels of accreditation status conferred;

No major changes since the most recent recognition review of the standards, policies or procedures that address this standard.

9F.   has procedures that include a self-evaluation by the institution or program and on-site review by a visiting team, or has alternative processes that CHEA considers to be valid;

No major changes since the most recent recognition review of the standards, policies or procedures that address this standard.

9G   demonstrates independence from any parent entity or sponsoring entity for the conduct of accreditation activities and determination of accreditation status; and

*ATMAE Bylaws 8.1 Board of Accreditation: 8.1.1 Established; Authority: A Board of Accreditation is established to coordinate and conduct all accreditation activity of the Association and the Board of Accreditation is the autonomous decision-making body with final authority for creating policies and procedures related to accreditation activities and activities authorized by Section 8.1.2, accreditation decisions, and decisions regarding recognition or certification of programs as provided in Section 8.1.2 8.1.2 Non-Accreditation Activities: The Board of Accreditation has authority to establish activities that may recognize or certify academic-based and industry-based educational, training, certification, and diploma and degree programs which would otherwise not qualify for accreditation by the Board of Accreditation. The Board of Accreditation has authority to establish a governing body to regulate and administer such activities.
(http://c.ymcdn.com/sites/www.atmae.org/resource/resmgr/Docs/ATMAE_Bylaws011915.pdf)*

ATMAE Accreditation Program Policies and Procedures 1.6 Responsibility: The Association of Technology, Management, and Applied Engineering is dedicated to the establishment and maintenance of curricula for degree programs as defined in 1.2 and derives the authority and responsibility for accreditation from its Constitution and Bylaws which state, "A Board of Accreditation is established to coordinate and conduct all accreditation activity of the Association and the Board of Accreditation is the autonomous decision-making body with final authority for creating policies and procedures related to accreditation activities..." The Association of Technology, Management, and Applied Engineering has been involved in the accreditation process since 1974.

ATMAE Accreditation Program Policies and Procedures 2 Administrative Organization: Functional decision-making authority for implementing all aspects of the accreditation process is the responsibility of the Board of Accreditation and the Accreditation Personnel & Policy Recommendation Committee. Decisions reached by these two autonomous decision-making bodies are not subject to approval by any other officers, committees, or boards of the Association of Technology, Management, and Applied Engineering. The existence of the Accreditation Program and existence of the Board of Accreditation remain under the

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Comment [TC1]: First, do these represent a change since the last CHEA review? If so, please reference in narrative format as the response must be self-contained what the changes are and why these are necessary and how these changes and current practices remain in compliance with 9G. Again, the narrative should be self-contained meaning that the exhibits support the written narrative.

establishing authority of the ATMAE Executive Board. The Executive Director of the Association is the executive with authority over operations of the Accreditation program, unless that authority, in whole or in part, devolves to a Director or Coordinator of Accreditation, pursuant to the Bylaws of the Association or by contractual agreement. Figure 2.1 illustrates the relationship of these two autonomous units to other administrative units of Association of Technology, Management, and Applied Engineering.
(ATMAE Accreditation Program Policies and Procedures online link:
http://c.ymcdn.com/sites/www.atmae.org/resource/resmgr/Docs/ATMAE_Accreditation_Polici es.pdf)

9H.   is operational, with more than one completed accreditation review, including action by the accreditation decision-making body at each degree level, or for each type of program, identified in the statement of proposed recognized scope of accreditation.

No major changes since the most recent recognition review of the standards, policies or procedures that address this standard.

B.   CHEA Recognition Standards, Paragraph 12 (A–F) *2010* CHEA *Policy and Procedures*

12A.   *ADVANCES ACADEMIC QUALITY.* Advancing academic quality is at the core of voluntary accreditation. "Academic quality" refers to results associated with teaching, learning, research and service within the framework of institutional mission. To be recognized, the accrediting organization provides evidence that it has:

1.   a clear description of academic quality in the context of institutional or program mission;

No major changes since the most recent recognition review of the standards, policies or procedures that address this standard.

2.   standards or policies that the institutions or programs have processes to determine whether quality standards are being met;

No major changes since the most recent recognition review of the standards, policies or procedures that address this standard.

3.   standards or policies that include expectations of institutional or program quality, including student achievement, consistent with mission;

No major changes since the most recent recognition review of the standards, policies or procedures that address this standard.

4.   standards or policies that focus on educational quality while respecting the institution's responsibility to set priorities and to control how the institution or program is structured and operates, and that incorporate an awareness of how programs function within the broader purposes of the institution; and

No major changes since the most recent recognition review of the standards, policies or procedures that address this standard.

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5. standards or policies designed to foster desired or needed student achievement and that refer to resources only to the extent required for students to emerge from institutions or programs appropriately prepared, or to address health and safety in the delivery of programs.

    No major changes since the most recent recognition review of the standards, policies or procedures that address this standard.

12B.   *DEMONSTRATES ACCOUNTABILITY.* The accrediting organization demonstrates public accountability in two ways. It has standards that call for institutions to provide consistent information about academic quality and student achievement and thus to foster continuing public awareness, confidence, and investment. Second, the accrediting organization itself demonstrates public involvement in its accreditation activities for the purpose of obtaining perspectives independent of the accrediting organization. Representatives of the public may include students, parents, persons from businesses and the professions, elected and appointed officials, and others. To be recognized, the accrediting organization provides evidence that it has implemented:

1. accreditation standards or policies that require institutions or programs routinely to provide reliable information to the public on their performance, including student achievement as determined by the institution or program;

    ATMAE requires that the program make available to the public information regarding the achievement and performance of their students. Our Policy 4.5 below specifically addresses this standard. We also require that the program gather applicable performance and achievement information to be made available to the public in other standards also shown below (see 5.3.16 & 6.3.16 on below). 4.5 Program Responsibility to Provide Information to the Public: The Program must make available via website, student performance and achievements to the public as may be determined appropriate by the institution or the Program and may also provide hard-copy of student performance and achievements as may be determined appropriate by the institution or the Program. Sources of potential information include, but are not limited to: Student Graduation Rates from the Program; Average Starting Salaries; Mean Grade Point Averages; Promotions Achieved; Time to Secure First Position; Average Years to Complete the Degree; Student Awards/Scholarships Received; etc. (ATMAE 2011 Accreditation Handbook Policies Section 1-4)

    5.3.16 & 6.3.16 Program Publicity: Adequate and Accurate Public Disclosure: Institutions shall broadly and accurately publicize, particularly to prospective students: (a) Industrial/Engineering Technology and Applied Engineering program goals and objectives, (b) preadmission testing, evaluation requirements, and standards, (c) assessment measures used to advance students through the program(s), and (d) fees and other charges. (ATMAE 2009 Accreditation Handbook)

    7.12 Graduate Satisfaction with Program/Option: Graduate evaluations of the program/option shall be made on a regular basis (two to five years). These evaluations shall include attitudes related to the importance of the general outcomes and specific competencies identified for the program/option. Summary data shall be available for graduate evaluations of the program/option. (ATMAE Outcomes Standards)

    7.13 Employment of Graduates: Placement, job titles, and salaries of graduates shall be tracked on a regular basis (two to five years). The jobs held by graduates shall be consistent with program/option goals. Summary data shall be available for the employment of graduates. (ATMAE Outcomes Standards)

    7.14 Job Advancement of Graduates: The advancement of graduates within organizations shall be tracked on a regular basis (two to five years) to ensure promotion to positions of

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increasing responsibility. Summary data shall be available for the job advancement of graduates. (ATMAE Outcomes Standards)

5.6.3 & 6.6.3 Placement of Graduates: *The initial placement, job titles, job descriptions, and salaries of graduates shall be consistent with the program(s) goals and objectives. Industry's reaction to graduates as employees must be favorable. Follow-up studies of graduates shall be conducted every two to five years. Summary statistics relating to follow-up studies of graduates shall be made available to the visiting team and the public. These statistics shall include placement rates as well as salary levels of program graduates. (ATMAE 2009 Accreditation Handbook)*

3.14 Accreditation Status of Programs: *The ATMAE Office maintains a list which identifies institutions with accredited programs, the programs at each institution which have been accredited, the accreditation status of each of the programs, and the date for the next scheduled review of accreditation. This list is made available on the ATMAE website, which is on multiple website pages, but the direct link is here: http://c.ymcdn.com/sites/www.atmae.org/resource/resmgr/docs/accredprograms_by_state.pdf) (ATMAE 2011 Accreditation Handbook Policies Section 1-4)*

2. accreditation standards or policies that focus only on the institutions or programs seeking accreditation and do not extend to other offerings;

    No major changes since the most recent recognition review of the standards, policies or procedures that address this standard.

3. accreditation standards or policies that require institutions to distinguish accurately between programs that have achieved accredited status and those that have not;

    No major changes since the most recent recognition review of the standards, policies or procedures that address this standard.

4. policies and procedures that include representatives of the public in decision making and policy setting;

    No major changes since the most recent recognition review of the standards, policies or procedures that address this standard.

5. policies or procedures, developed in consultation with institutions or programs, to inform the public of the basis for final decisions to grant or reaffirm accreditation and, in the case of denial or withdrawal of accreditation, to provide specific reasons for the decision accompanied by a response related to the final decision, from the institution or program;

    3.14 Accreditation Status of Programs: *The ATMAE Office maintains a list which identifies institutions with accredited programs, the programs at each institution which have been accredited, the accreditation status of each of the programs, and the date for the next scheduled review of accreditation. This list is made available on the ATMAE website, which is on multiple website pages, but the direct link is here: http://c.ymcdn.com/sites/www.atmae.org/resource/resmgr/docs/accredprograms_by_state.pdf) (ATMAE 2011 Accreditation Handbook Policies Section 1-4)*

Comment [TC3]: Again, the narrative (response) must be self-contained. Please describe the meaning, description, impact, and purpose of the standard and how this demonstrates compliance with 12B5. The exhibit then supports the narrative. In addition, the link should then provide access of accreditation decisions and actions and their meaning and impact on accreditation status.

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6.   policies or procedures that call for substantive and timely response to legitimate public concerns and complaints;

ATMAE's policies related to complaints are covered in Section 3.12 of the ATMAE Accreditation Handbook and have not changed. While infrequent, the policies have successfully been applied to the handling of complaints.

Comment [TC4]: Is this a change since last review? If so, when and why is this important?

7.   policies or procedures that call for appropriate consultation regarding, and resolution of conflicts between, accreditation standards and state or local laws governing the institution or program seeking accreditation;

No major changes since the most recent recognition review of the standards, policies or procedures that address this standard.

8.   standards, policies or procedures that, when the accrediting organization engages in international activities, assure reasonable efforts to communicate and consult with appropriate governmental and nongovernmental accreditation or quality assurance entities in other countries;

No major changes since the most recent recognition review of the standards, policies or procedures that address this standard. ATMAE currently doesn't accredit international activities.

9.   policies that call for the substantially equivalent application of standards and policies to U.S. and non-U.S. institutions and programs alike; and

No major changes since the most recent recognition review of the standards, policies or procedures that address this standard. ATMAE currently doesn't accredit international activities.

10.   a practice of informing the public about the harm of degree mills and accreditation mills.

Here is the link where ATMAE provides information. On our website it can be found under our Accreditation dropdown menu (www.ATMAE.org)
https://atmae.site-ym.com/?page=DegreeAccredMills

Comment [TC5]: Describe the practice here and the significance of informing the public regarding mills. The links then support this noted significance.

12C.   *ENCOURAGES, WHERE APPROPRIATE, SELF-SCRUTINY AND PLANNING FOR CHANGE AND FOR NEEDED IMPROVEMENT.* The accrediting organization encourages, where appropriate, ongoing self-examination and planning for change. Such self-scrutiny and planning entail thoughtful assessment of quality (especially student achievement) in the context of the institution's mission. Encouragement of such self-scrutiny and planning should not be confused with solely a demand for additional resources, but rather should enable institutions and programs to focus on effective ways to achieve their institution and program goals. Such self-scrutiny and planning are means to enhance the usefulness of accreditation to institutions and programs. To be recognized, the accrediting organization provides evidence that it has implemented standards or policies that:

1.   stress self-examination and self-analysis by institutions or programs for planning, where appropriate, for change and for needed improvement, in the context of institutional mission;

No major changes since the most recent recognition review of the standards, policies or procedures that address this standard.

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2.	enable institutions and programs to be creative and diverse in determining how to organize themselves structurally, how best to use their resources and what personnel and other policies and procedures are needed to attain their student achievement goals;

No major changes since the most recent recognition review of the standards, policies or procedures that address this standard.

3.	encourage institutions or programs to innovate or experiment; and

No major changes since the most recent recognition review of the standards, policies or procedures that address this standard.

4.	require the accrediting organization to distinguish clearly between actions necessary for accreditation and actions that are considerations for improvement.

No major changes since the most recent recognition review of the standards, policies or procedures that address this standard.

12D.	*EMPLOYS APPROPRIATE AND FAIR PROCEDURES IN DECISION MAKING.* The accrediting organization maintains appropriate and fair policies and procedures that include effective checks and balances. The accreditation process includes ongoing participation by higher education professionals and the public in decision making about accreditation policies and procedures. To be recognized, the accrediting organization provides evidence that it has implemented standards, policies or procedures that:

1.	require participation by higher education professionals and the public;

No major changes since the most recent recognition review of the standards, policies or procedures that address this standard.

2.	foster reasonable consistency in reviews of institutions or programs while respecting varying institution or program purposes and mission;

No major changes since the most recent recognition review of the standards, policies or procedures that address this standard.

3.	assure that the process to deny or remove accreditation is specified and fair, and inform the institution or program about the process to be used and actions that may be taken; and

No major changes since the most recent recognition review of the standards, policies or procedures that address this standard.

4.	assure a specified and fair appeals process when there is an action to deny or remove accreditation; inform the institution or program about the process by which the appeal will be conducted, the grounds for appeal, and any costs associated with an appeal; and continue the current accreditation status of the institution or program until an appeal decision is rendered.

No major changes since the most recent recognition review of the standards, policies or procedures that address this standard.

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12E.   *DEMONSTRATES ONGOING REVIEW OF ACCREDITATION PRACTICES.* Even as higher education institutions and programs undertake ongoing self-scrutiny to maintain and improve quality, accrediting organizations need self-scrutiny of their accrediting practices. Such review should also include examination of the accreditor's impact on institutions and responsiveness to the broader accreditation and higher education community. To be recognized, the accrediting organization provides evidence that it sustains ongoing:

1.   critical self-review that can further responsiveness, flexibility, and accountability when the accrediting organization works with institutions, programs and the public;

ATMAE considers self-review to be a critical part of its own continuous quality improvement. By policy, accreditation standards and policies must be reviewed on a three year cycle. The process solicits input from stakeholders on changes or improvements to accreditation policies, procedures and standards; reviews the input for potential modifications; and takes appropriate formal action to approve changes. The standards and policies have been under review during 2015 and input can be found on the ATMAE website in the form of blog. The blog was successfully used to seek broad input and provide information to stakeholders.

Comment [TC6]: Is this a change since the last review? What is the significance here?

2.   initiatives that enhance the efficiency and effectiveness of services to institutions or programs;

No major changes since the most recent recognition review of the standards, policies or procedures that address this standard.

3.   review of its value to the institution in its entirety and to the higher education community; and

As indicated earlier in this document, ATMAE conducts a comprehensive review of accreditation policies, procedures and standards on a three-year cycle. In addition, follow-up surveys are sent to each institution that has undergone accreditation or reaccreditation review. Surveys are also sent to each member of visiting teams seeking input on accreditation and the process.

Comment [TC7]: Is this a change since the last review? What is the significance here?

4.   review, within its resources, of the impact of its standards and procedures on institutions or programs.

No major changes since the most recent recognition review of the standards, policies or procedures that address this standard.

12F.   *POSSESSES SUFFICIENT RESOURCES.* Accreditors must have and maintain predictable and stable resources if they are to meet the expectations of institutions, programs, and the public. To be recognized, the accrediting organization presents evidence that it:

1.   has adequate financial, staff and operational resources to perform its accreditation functions efficiently and effectively;

Here is last year's fiscal year's budget and this fiscal year's budget. As you can see we have the adequate financial, staff and operational resources to preform accreditation functions. The day to day office supplies and equipment is provided by our parent organization.

	2014-2015	2015-2016
Accreditation Revenue	$	$
Annual Accreditation Fees	249,100	257,050
Visit Reserves	90,000	81,150

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Initial Accreditation Fees	15,000	22,000
Additional Site Visit Fees	0	0
Follow-up Visit Fees	0	1,700
Consultant Fees	15,000	13,200
Program Sponsorship Fees	0	0
Other	0	0
Total Accreditation Revenue	$369,100	$375,100
Expenditures	$	$
Reserve Allocation**	103,400	106,700
ASPA Dues	5,275	5,430
ASPA Meetings	600	600
Awards & Recognition	0	500
Committees - Personnel & Policy	0	0
Committees - Standards & Accreditation	0	0
Committees - Validity & Reliability	0	0
Conference Calls	0	200
Consultant Expenses	10,500	6,800
Consultant Fees	8,000	6,400
Credit Card Merchant Fees	0	1,000
Development	0	500
Insurance - D&O	500	500
Insurance - Errors & Omissions	0	4,500
Insurance - General Liability	0	500
Management Services***	46,965	48,680
Management Services - Other	0	0
Marketing & Promotion	10,000	7,500
Meeting Support - A/V	1,000	850
Meeting Support - Catering	1,800	1,300
Meeting Support - Personnel	500	2,600
Postage & Shipping	100	100
Printing & Reproduction	150	1,100
Supplies	0	100
Training Seminars & Webinars	3,300	1,300
Travel - Accreditation Visits*	90,000	90,000
Travel - Agency Fees	0	1,900
Travel - Board of Accreditation	0	10,000
Travel - Director of Accreditation	4,500	0
Travel - CHEA	0	1,000
Other Expenses Not Budgeted	2,350	0
Capacity Building Fund	0	0
Total Expenditures	$288,940	$300,060
Revenue Over Expenditures	$80,160	$75,040

Association of Technology, Management, and Applied Engineering 2015 CHEA Interim Report

* ATMAE's Travel costs associated with Accreditation Team Visits to Institutions.
** Amount released from Accreditation Reserves accumulated through annual payments by
institutions to fund expenses of current year visits.
*** The Salaries and overhead associated with Accreditation.

2.   conducts ongoing review of its capacity to support its accreditation mission; and

ATMAE considers self-review to be a critical part of its own continuous quality improvement. By policy, accreditation standards and policies must be reviewed on a three year cycle. The process solicits input from stakeholders on changes or improvements to accreditation policies, procedures and standards; reviews the input for potential modifications; and takes appropriate formal action to approve changes. The standards and policies have been under review during 2015 and input can be found on the ATMAE website in the form of blog. The blog was successfully used to seek broad input and provide information to stakeholders.

In addition, follow-up surveys are sent to each institution that has undergone accreditation or reaccreditation review. Surveys are also sent to each member of visiting teams seeking input on accreditation and the process.

Every three years the ATMAE accreditation board reviews the fee structure and makes changes as needed based on the costs of accreditation activities.

> **Comment [TC8]:** Is this a change since the last review? What is the significance here? Why is this a change and what are its impacts?

3.   sustains independent authority and capacity to deploy resources in the service of its mission.

ATMAE Bylaws 8.1 Board of Accreditation: 8.1.1 Established; Authority: A Board of Accreditation is established to coordinate and conduct all accreditation activity of the Association and the Board of Accreditation is the autonomous decision-making body with final authority for creating policies and procedures related to accreditation activities and activities authorized by Section 8.1.2, accreditation decisions, and decisions regarding recognition or certification of programs as provided in Section 8.1.2 8.1.2 Non-Accreditation Activities: The Board of Accreditation has authority to establish activities that may recognize or certify academic-based and industry-based educational, training, certification, and diploma and degree programs which would otherwise not qualify for accreditation by the Board of Accreditation. The Board of Accreditation has authority to establish a governing body to regulate and administer such activities. (http://c.ymcdn.com/sites/www.atmae.org/resource/resmgr/Docs/ATMAE_Bylaws011915.pdf)

> **Comment [TC9]:** Is this a change since the last review? What is the significance here? Why is this a change and what are its impacts?

ATMAE Accreditation Program Policies and Procedures 1.6 Responsibility: The Association of Technology, Management, and Applied Engineering is dedicated to the establishment and maintenance of curricula for degree programs as defined in 1.2 and derives the authority and responsibility for accreditation from its Constitution and Bylaws which state, "A Board of Accreditation is established to coordinate and conduct all accreditation activity of the Association and the Board of Accreditation is the autonomous decision-making body with final authority for creating policies and procedures related to accreditation activities..." The Association of Technology, Management, and Applied Engineering has been involved in the accreditation process since 1974.

ATMAE Accreditation Program Policies and Procedures 2 Administrative Organization: Functional decision-making authority for implementing all aspects of the accreditation process is the responsibility of the Board of Accreditation and the Accreditation Personnel & Policy Recommendation Committee. Decisions reached by these two autonomous decision-making bodies are not subject to approval by any other officers, committees, or boards of the

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Association of Technology, Management, and Applied Engineering. The existence of the Accreditation Program and existence of the Board of Accreditation remain under the establishing authority of the ATMAE Executive Board. The Executive Director of the Association is the executive with authority over operations of the Accreditation program, unless that authority, in whole or in part, devolves to a Director or Coordinator of Accreditation, pursuant to the Bylaws of the Association or by contractual agreement. Figure 2.1 illustrates the relationship of these two autonomous units to other administrative units of Association of Technology, Management, and Applied Engineering. (ATMAE Accreditation Program Policies and Procedures online link:
http://c.ymcdn.com/sites/www.atmae.org/resource/resmgr/Docs/ATMAE_Accreditation_Policies.pdf)

ATMAE Addendum to Accreditation Program Policies and Procedures Approved September 2015: *1. Accreditation Functions: The Board of Accreditation shall have complete and unfettered autonomy in formulating accreditation standards for educational programs within the framework of the formal process designated for stakeholder input and Board of Accreditation adoption; developing and implementing accreditation policies, rules and procedures for conducting accreditation activities; and determining accreditation status. 2. Budget: The Director of Accreditation, as the Board of Accreditation secretariat, shall have the authority to prepare and manage a budget for the conduct of accreditation activities, and propose an accreditation fee schedule. The Board of Accreditation shall review and approve the budget consistent with its fiduciary responsibilities, and the requirement that such budget provides for adequate resources as appropriate for the conduct of accreditation activities. Funds will be identifiable on the Statement of Financial Position and the Statement of Income and Expenses, and will be managed by the Director of Accreditation, in coordination with the ATMAE Executive Director, with periodic reports to the Board of Accreditation. 3. Accreditation Personnel: The Board of Accreditation will be supported by a Director of Accreditation to serve as the Board of Accreditation's principal representative on issues related to the conduct of accreditation activities. Input will be sought by ATMAE's Executive Director from the Board of Accreditation in the hiring, evaluation, and/or termination the Accreditation Director. The Director of Accreditation shall have the authority, within the staffing framework of ATMAE, to manage the operations of the accreditation program. (ATMAE Addendum to Accreditation Program Policies and Procedures online link:*
https://c.ymcdn.com/sites/atmae.site-ym.com/resource/resmgr/Docs/ATMAE_Accreditation_Program_.pdf)

IV. Accomplishments, Challenges, Future Directions *(optional)*

Provide a brief description of the organization's recent accomplishments, actions taken to address critical issues or anticipated changes needed for the future.

ATMAE has completed its transition to an "Outcomes Assessment" accreditation model that was a documented part of current CHEA recognition. Beginning in 2013, all programs seeking initial accreditation or reaccreditation were required to follow the outcomes model. The only legacy of the previous "prescriptive" model were those schools that were required by a previous accreditation review to provide an interim report.

ATMAE has formally adopted the concepts related the Society of Manufacturing Engineering's "4 Pillars of Manufacturing" for programs in manufacturing at the Associate, Baccalaureate and Masters levels to review and consider for adoption as a quality improvement tool as may be appropriate for their respective Programs.

As faced by many accrediting bodies, the challenge is the changing landscape of higher education. In particular, the continued increase in the availability of distance education and non-traditional activities, and how best to handle the transferability of credit and validation of outcomes. There is

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likely to be further growth in the use of non-traditional forms of program delivery and methods for attainment/recognition of competence.

V. Additional Items

1. **Response to CHEA Letter of July 8, 2014**
    The letter stated that it was not clear to the committee that these data were available to the public from the screenshots that were made available in the Special Report.

    Here is the link a pdf of active links of where our intuitions have the data requested is available to the public:
    http://www.atmae.org/resource/resmgr/Docs/ATMAE_Program_Public_Notific.xls

2. **Current ATMAE Accreditation Handbook**
    http://c.ymcdn.com/sites/www.atmae.org/resource/resmgr/docs/handbook_2011_outcomes_asses s.pdf

3. **Current Accreditation Policies & Procedures and Addendum** *(this document is in the process of being approved by the Board of Accreditation, we expect this approval prior to the December turn in).*
    https://c.ymcdn.com/sites/atmae.site-ym.com/resource/resmgr/Docs/ATMAE_Accreditation_Program_.pdf

4. **ATMAE Accredited Schools and Programs as of September, 2015**
    http://c.ymcdn.com/sites/www.atmae.org/resource/resmgr/docs/accredprograms_by_state.pdf

Comment [TC10]: You will want to relay this back to 12B1 compliance.

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CHEA Notes on Interim Draft Report

9G: First, do these represent a change since the last CHEA review? If so, please reference in narrative format as the response must be self-contained what the changes are and why these are necessary and how these changes and current practices remain in compliance with 9G. Again, the narrative should be self-contained meaning that the exhibits support the written narrative.

12B: Since what time frame has ATMAE required programs to make available this information? Describe how you arrived at this decision and process and the impacts of 4.5. What significance do 7.12, 7.13, and 7.14 play here, as well 5.6.3 and 6.6.3. and 3.14? Please explain the connection between these requirements and their significance and how this further demonstrates compliance with 12B1. In section V below you reference the active URL links. You will want to address this in 12B1. The expectation is that you provide all active and working links for ATMAE-accredited programs which specifically link to the student achievement data or information and not the program webpage. In addition, the student achievement data must be program-specific to ATMAE-accredited programs. Overall institutional data is fine; however, the Committee on Recognition expects to see program-specific data or information.

12B.5: Again, the narrative (response) must be self-contained. Please describe the meaning, description, impact, and purpose of the standard and how this demonstrates compliance with 12B5. The exhibit then supports the narrative. In addition, the link should then provide access of accreditation decisions and actions and their meaning and impact on accreditation status.

12B.6: Is this a change since last review? If so, when and why is this important?

12B.10: Describe the practice here and the significance of informing the public regarding mills. The links then support this noted significance.

12E.1: Is this a change since the last review? What is the significance here?

12E.3: Is this a change since the last review? What is the significance here?

12F.2: Is this a change since the last review? What is the significance here? Why is this a change and what are its impacts?

12F.3: Is this a change since the last review? What is the significance here? Why is this a change and what are its impacts?

An Amendment to

ATMAE ACCREDITATION POLICIES AND PROCEDURES

These Budget and Management Policies shall serve as an amendment to the ATMAE Accreditation Programs Policies and Procedures. They shall be in effect as of the approval date.

1. Accreditation Functions: The Board of Accreditation shall have complete and unfettered autonomy in formulating accreditation standards for educational programs within the framework of the formal process designated for stakeholder input and Board of Accreditation adoption; developing and implementing accreditation policies, rules and procedures for conducting accreditation activities; and determining accreditation status.

2. Budget: The Director of Accreditation, as the Board of Accreditation secretariat, shall have the authority to prepare and manage a budget for the conduct of accreditation activities, and propose an accreditation fee schedule. The Board of Accreditation shall review and approve the budget consistent with its fiduciary responsibilities, and the requirement that such budget provides for adequate resources as appropriate for the conduct of accreditation activities. Funds will be identifiable on the Statement of Financial Position and the Statement of Income and Expenses, and will be managed by the Director of Accreditation, in coordination with the Board of Accreditation and the ATMAE Executive Director.

3. Accreditation Personnel: The Board of Accreditation will be assisted by a Director of Accreditation who serves as the Board of Accreditation's principal representative on issues related to the conduct of accreditation activities. Input will be sought by ATMAE's Executive Director from the Board of Accreditation in the hiring, evaluation, and/or termination the Accreditation Director. The Director of Accreditation shall have the authority, within the staffing framework of ATMAE, to manage the operations of the accreditation program.

4. Governance: The Chair of the Board of Accreditation shall serve as a non-voting member of the ATMAE Board of Directors.

ATMAE ACCREDITATION BUDGET PROCEDURES

- The Director of Accreditation working in conjunction with the Chair of the Board of Accreditation, the ATMAE Executive Director, and the ATMAE treasurer shall annually prepare a preliminary budget and

proposed fee schedule. The budget must be constructed to project a positive end-of-fiscal-year balance.

- The Executive Director will provide the Director of Accreditation with all anticipated costs as they relate to the management and support of accreditation activities for budget inclusion.

- The Director of Accreditation shall present the preliminary budget and fee schedule to the Chair of the Board of Accreditation for feedback.

- Revenues designated as *Annual Accreditation Fees* will be set aside in a ratio of 60/40. Sixty percent will be allocated to current year accreditation operating costs and 40% will reside in ATMAE's general reserves as a line item designated to pay for future, committed, accreditation activities. The 40% will be listed yearly as an expense to accreditation reserves.

- A release of reserves will be determined each budget year to fund the yearly costs of accreditation for institutions that have previously paid accreditation fees. A cash flow budget will be developed to identify and prepare for the possible transfers of funds from reserves or investments during the fiscal year.

- The Director of Accreditation in conjunction with the ATMAE Executive Director and treasurer shall prepare any formal recommendations for consideration by the Board of Accreditation regarding the budget including desired changes and a rationale for those changes.

- The Board of Accreditation shall review and adopt the budget consistent with its fiduciary responsibilities. The budget must provide for adequate resources as appropriate for the anticipated scope of accreditation activities and operations.

- The ATMAE Executive director shall provide monthly financial summary statements to the Director of Accreditation and the Chair of the Board of Accreditation. Should it become necessary to make mid-year adjustments in the budget, *to fund the yearly costs of accreditation*, the Director of Accreditation will work with the Chair of the Board of Accreditation, Executive Director, and ATMAE Treasurer to prepare proposals for presentation to the Board of Accreditation and for adoption.

2014 Board of Accreditation business meeting motions & discussion items.

Approved Motions:

- Dr. Zargari moved to recognize Michele Anderson as the new Director of Accreditation, with appreciation for demonstrated commitment during the post-transition phase and leading up to the hearings. Dr. Mosley seconded and the motion passed.

- Dr. Zargari moved to clarify the conflict of interest threshold, as it pertains to visiting team chairs, to a period of seven years. The motion was seconded by Dr. Sarapin. The motion passed.

- Dr. Sarapin moved to approve Dr. Robert Chin's application as an ATMAE accreditation consultant. The motion was seconded by Dr. Zargari; the motion passed.

- Dr. Zargari entered a motion to appoint Dr. Robert Chin to this role, and to conduct a study of outcomes assessment data that will be reviewed in October 2015. The motion was seconded by Dr. Mosley and passed.

- Dr. Zargari reviewed current policy language under section 2.1 *"Board of Accreditation"* which references appointments to the Board. Dr. Sutton entered a motion to revise the language to necessarily meet CHEA compliance and to conduct an electronic vote to approve the revision. The motion was seconded by Dr. Sarapin; the motion passed.

Discussion Items:

- The board travel policy will be reviewed, updated, and presented to the Board for further discussion.

- The Board discussed possible international expansion based on initial research conducted by Dr. Mohammed Fahmy. It was noted that an application for a change in scope would have to be made to CHEA, and that the Board passed a motion to this effect at the 2013 business meeting. Further discussion ensued about the countries in which relationships can be established, such as in the Americas initially and overseas eventually. Michele Anderson will review the corporate record for the research paper and determine whether an application was submitted to CHEA.

- Discussed two- versus three-member visiting teams, and the need for further discussion on determining the number of standards that are met with partial compliance that would warrant a biennial report. The Validity & Reliability report will identify trends that will be important for the discussion.

- The Board requested that Michele Anderson review the visiting team draft and final reports before they are submitted to the institution. The goal is to provide reports that are prepared using a consistent format and have a professional appearance. The information contained in the body of the reports will be compared to the summary tables to ensure accuracy in transcription, and clarification on incongruent information will be sought from the team chairs as necessary. Further, the final reports will have the name of the institution inserted in the document footer to make it easier for the Board to locate information during the hearings.

Full Name	Board Position	Current Term	New Term
Dr. Andrew L. Anderson, CSTM	*Chair	2012-2016	2012-2016
Mr. Glenn Rettig	2-Year Degree Program Representative #1	2014-2015	2014-2016
Mr. Charles Stevenson	2-Year Degree Program Representative #2	2014-2015	2014-2017
Mr. Bob Dixon	2-Year Degree Program Representative #3	2014-2015	2014-2016
Mr. Kirk Barnes	2-Year Degree Program Representative #4	2014-2015	2014-2017
Dr. Charles Colen	4-Year Degree Program Representative #1	2012-2015	2012-2015
Dr. Marvin I. Sarapin, CSTM	4-Year Degree Program Representative #2	2012-2015	2011-2015
Dr. John Sutton	4-Year Degree Program Representative #3	2014-2015	2014-2017
Dr. Ahmad Zargari, CSTM	4-Year Degree Program Representative #4	2013-2015	2011-2016
Dr. Ivan T. Mosley, CSTM	Industry Representative #1	2012-2015	2011-2017
Mr. Michael Bledsoe	Industry Representative #2	2013-2015	2012-2015
Dr. Earl Godt	Lay Public Representative #1	2011-2014	2012-2017
Mr. James McPherson	Lay Public Representative #2	2012-2015	2012-2015
Mr. John Haughery	Student Representative #1	2014-2015	2012-2016
Mr. John Mikey Awbrey	Student Representative #2	2014-2015	2014-2015
Ms. Fatemeh Davoudi	Student Representative #2	N/A	2015-2017

Need to appoint the following:

- Chair-Elect
- 4-Year Degree Program Representative #1
- 4-Year Degree Program Representative #2
- Industry Representative #2
- Lay Public Representative #2

Positions / Year	Open Slots	Chair 4 Years Even	Chair-Elect 1 Year Odd	2-Year (1) 3 Years	2-Year (2) 3 Years	2-Year (3) 3 Years	2-Year (4) 3 Years	4-Year (1) 3 Years	4-Year (2) 3 Years	4-Year (3) 3 Years	4-Year (4) 3 Years	Industry (1) 3 Years	Industry (2) 3 Years	Public (1) 3 Years	Public (2) 3 Years	Student (1) 2 Years Even	Student (2) 2 Years (Opt) Odd
2011-2012		C.R. Diaz	A. Anderson	G. Rettig	M. Rice	B. Dixon	Open	Open	M. Sarapin (1)	L. Kenney	A. Zargari (1)	I. Mosley (1)	S. Shah	C. Colen	M. Benjamin	Open	Open
2012-2013		A. Anderson	N/A	Open	Open	B. Dixon	Open	C. Colen (1)	M. Sarapin (2)	Open	A. Zargari (1)	I. Mosley (2)	M. Bledsoe (1)	E. Godt (1)	J. McPherson (1)	J. Haughery (1)	Open
2013-2014		A. Anderson	N/A	Open	Open	Open	Open	C. Colen (1)	M. Sarapin (2)	Open	A. Zargari (2)	I. Mosley (2)	M. Bledsoe (1)	E. Godt (1)	J. McPherson (1)	J. Haughery (1)	Open
2014-2015	7	A. Anderson	N/A	G. Rettig (1)	C. Stevenson (1)	B. Dixon (1)	K. Barnes (1)	C. Colen (1)	M. Sarapin (2)	J. Sutton (1)	A. Zargari (2)	I. Mosley (2)	M. Bledsoe (1)	E. Godt (1)	J. McPherson (1)	J. Haughery (2)	JM Aubrey (1)
2015-2016	5	A. Anderson	Appoint	G. Rettig (1)	C. Stevenson (1)	B. Dixon (1)	K. Barnes (1)	Appoint	Appoint	J. Sutton (1)	A. Zargari (2)	I. Mosley (2)	Appoint	E. Godt (2)	Appoint	J. Haughery (2)	F Davoudi (1)
2016-2017	4	C-E Ascends	N/A	Appoint	C. Stevenson (1)	Appoint	K. Barnes (1)	Year 2	Year 2	J. Sutton (1)	Appoint	I. Mosley (2)	Year 2	E. Godt (2)	Year 2	Appoint	F Davoudi (1)
2017-2018	7	Year 2	N/A	Year 2	Appoint	Year 2	Appoint	Appoint	Year 3	Appoint	Year 2	Appoint	Year 3	Appoint	Year 3	Year 2	Appoint
2018-2019	5	Year 3	N/A	Year 3	Year 2	Year 3	Year 2	Year 2	Appoint	Year 2	Appoint	Year 2	Appoint	Year 2	Appoint	Appoint	Year 2
2019-2020	4	Year 4	Appoint	Appoint	Year 3	Appoint	Year 3	Year 3	Year 2	Year 3	Year 2	Year 3	Year 2	Year 3	Year 2	Year 2	Appoint
2020-2021	7	C-E Ascends	N/A	Year 2	Appoint	Year 2	Appoint	Appoint	Year 3	Appoint	Year 3	Appoint	Year 3	Appoint	Year 3	Appoint	Year 2
2021-2022	5	Year 2	N/A	Year 3	Year 3	Year 3	Year 2	Year 2	Appoint	Year 2	Appoint	Year 2	Appoint	Year 2	Appoint	Year 2	Appoint
2022-2023	3	Year 3	N/A	Appoint	Appoint	Appoint	Appoint	Year 3	Year 2	Year 3	Year 2	Year 3	Year 2	Year 3	Year 2	Appoint	Year 2
2023-2024	8	Year 4	Appoint	Year 2	Year 2	Year 2	Appoint	Appoint	Year 3	Appoint	Year 3	Appoint	Year 3	Appoint	Year 3	Year 2	Appoint
2024-2025	5	C-E Ascends	N/A	Year 3	Year 2	Year 3	Year 2	Year 2	Appoint	Year 2	Appoint	Year 2	Appoint	Year 2	Appoint	Appoint	Year 2

ATMAE Accreditation Budgets vs. Actual 2015-2016

Ordinary Income & Expenses	Actual 14-15	Budget 14-15	Budget 15-16	Estimate 15-16	Budget Assumptions
Income					
Annual Accreditation Fees (Fixed)	249,100.00	249,100.00	257,050.00	257,050.00	97 institution @ $2,650 annually
Annual Accreditation Fees (Variable)	0.00	0.00	0.00	0.00	454 programs @ $0 each
Application Fee in Escrow	0.00	0.00	0.00	0.00	Not budgeted; not in policies
Visit Reserves	72,575.00	105,950.00	81,150.00	81,625.00	From Reserve's schedule (13 Schools)
Initial Accreditation Fees	15,000.00	20,000.00	22,000.00	15,000.00	3 new schools @ $5,000 each
Additional Site Visit Fees	0.00	0.00	0.00	0.00	Not budgeted
Follow-up Visit Fees	0.00	0.00	1,700.00	2,175.00	One visit in 2016
Consultant Fees	7,436.68	20,500.00	13,200.00	13,200.00	4 visits @ $3,300 each ($1,600 fee; $1,700 travel)
Program Sponsorship Fees	0.00	0.00	0.00	0.00	
Total Income	344,111.68	395,550.00	375,100.00	369,050.00	

ATMAE Accreditation Budgets vs. Actual 2015-2016

Ordinary Income & Expenses	Actual 14-15	Budget 14-15	Budget 15-16	Estimate 15-16	Budget Assumptions
Expenses					
Reserve Allocation	90,100.00	0.00	106,700.00	106,700.00	1,100 from each institution
ASPA Dues	5,348.20	5,275.00	5,430.00	5,430.00	Actual invoice
ASPA Meetings	593.50	0.00	600.00	600.00	$400 registration; $90 parking; $110 mileage
Awards & Recognition	0.00	0.00	500.00	500.00	Board service recognition; team chair pins
Committees - Personnel & Policy	0.00	0.00	0.00	0.00	
Committees - Standards & Accreditation	0.00	0.00	0.00	0.00	
Committees - Validity & Reliability	0.00	0.00	0.00	0.00	
Conference Calls	0.00	200.00	200.00	200.00	
Consultant Expenses	4,435.00	10,500.00	6,800.00	6,800.00	Travel expenses for 4 visits
Consultant Fees	5,200.00	8,000.00	6,400.00	6,400.00	4 visits @ $800 per day; 2-day minimum
Credit Card Merchant Fees	0.00	0.00	1,000.00	1,000.00	
Development	0.00	0.00	500.00	500.00	
Insurance - D&O	86.37	6,000.00	500.00	500.00	50% of $1,000 policy
Insurance - Errors & Omissions	0.00	0.00	4,500.00	4,500.00	75% of $6,000 policy
Insurance - General Liability	0.00	0.00	500.00	500.00	50% of $1,000 policy
Management Services	50,201.26	46,965.00	48,680.00	48,680.00	
Management Services - Other	536.64	500.00	0.00	0.00	Provision for possible out of scope work
Marketing & Promotion	8,227.78	10,000.00	7,500.00	7,500.00	
Meeting Support - A/V	823.36	1,000.00	850.00	850.00	
Meeting Support - Catering	1,256.01	1,800.00	1,300.00	1,300.00	
Meeting Support - Personnel	2,587.69	500.00	2,600.00	2,600.00	Director travel and location hired staff
Postage & Shipping	77.97	100.00	100.00	100.00	
Printing & Reproduction	1,031.97	150.00	1,100.00	1,100.00	
Supplies	48.17	0.00	100.00	100.00	Certificates
Training Seminars & Webinars	0.00	3,300.00	1,300.00	1,300.00	
Travel - Accreditation Visits	52,146.80	90,000.00	90,000.00	81,000.00	14 reacc, 1 follow-up visit, 3 initials = 18 @ $4,500
Travel - Agency Fees	0.00	0.00	1,900.00	2,600.00	17 teams of 3; 1 team of 1; $50 per person
Travel - Board of Accreditation	10,046.98	0.00	10,000.00	10,000.00	Hearings; Washington for CHEA
Travel - Director of Accreditation	1,148.94	4,500.00	0.00	0.00	Hearings - Moved to Meeting Support
Travel - CHEA	0.00	0.00	1,000.00	1,000.00	Committee on Recognition - March 2016
Other Expenses Not Budgeted	2,499.22	2,350.00	0.00	0.00	
Capacity Building Fund	0.00	0.00	0.00	0.00	Balance sheet reserve fund
Total Expenses	236,395.86	191,140.00	300,060.00	291,760.00	
NET ORDINARY INCOME	107,715.82	204,410.00	75,040.00	77,290.00	