

# **ACCREDITATION POLICY AND PROCEDURE MANUAL**

Effective for Evaluations During the  
2011-2012 Accreditation Cycle

Incorporates all changes  
approved by the  
ABET  
Board of Directors  
as of  
October 30, 2010



Applied Science Accreditation Commission  
Computing Accreditation Commission  
Engineering Accreditation Commission  
Technology Accreditation Commission

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**Accreditation Policy and Procedure Manual**  
Effective for Evaluations during the 2011-2012 Accreditation Cycle

PLEASE NOTE:

- (1) SECTIONS BEGINNING WITH THE ACRONYMS ASAC, CAC, EAC, OR TAC INDICATE THOSE SECTIONS THAT APPLY ONLY TO THE INDICATED COMMISSION.
- (2) THIS DOCUMENT CONTAINS POLICIES AND PROCEDURES ESTABLISHED AND APPROVED BY THE ABET BOARD OF DIRECTORS.

I. INTRODUCTION

The purpose of this document is to articulate the policies and procedures that govern the ABET accreditation process. This document is consistent with the ABET Constitution, By-laws, and Rules of Procedure. It is provided for the use of programs, accreditation commissions, team chairs, and program evaluators. The program seeking accreditation is responsible to demonstrate clearly that it is in compliance with all applicable ABET policies, procedures, and criteria.

I.A. ABET Vision -- ABET will provide world leadership in assuring quality and in stimulating innovation in applied science, computing, engineering, and technology education.

I.B. ABET Mission -- ABET serves the public through the promotion and advancement of education in applied science, computing, engineering, and technology. ABET will:

- I.B.1. Accredite educational programs.
- I.B.2. Promote quality and innovation in education.
- I.B.3. Consult and assist in the development and advancement of education worldwide in a financially self-sustaining manner.
- I.B.4. Communicate with our constituencies and the public regarding activities and accomplishments.
- I.B.5. Anticipate and prepare for the changing environment and the future needs of constituencies.
- I.B.6. Manage the operations and resources to be effective and fiscally responsible.

I.C. Responsibilities

I.C.1. ABET accomplishes its accreditation mission through its commissions and the Accreditation Council.

I.C.1.a. The commissions include the: Applied Science Accreditation Commission (ASAC), Computing Accreditation Commission (CAC), Engineering Accreditation Commission (EAC), and Technology Accreditation Commission (TAC). The accreditation commissions are charged with the following responsibilities:

- I.C.1.a.(1) The accreditation commissions propose policies and criteria to the ABET Board of Directors for approval. Each commission is responsible for the continuous review and enhancement of its particular criteria, policies, and procedures.

I.C.1.a.(2) The accreditation commissions administer the accreditation process and make accreditation decisions based on criteria and the Accreditation Policy and Procedure Manual.

I.C.1.a.(3) Commission executive committees are authorized to take action on behalf of their respective commissions when the commission is not in session.

I.C.1.b. The Accreditation Council formulates and recommends policies to the ABET Board and coordinates procedures and practices among the commissions regarding ABET's accreditation processes. The council provides particular emphasis on process improvement and process uniformity across the commissions where appropriate. The emphasis on process uniformity shall not preclude the pursuit of improved best practices or the variation of practices among the commissions where the activities of the commissions appropriately differ.

I.C.2. Procedures and decisions on all appeals to accreditation actions shall be the responsibility of the Board of Directors.

I.C.3. Accreditation decisions are based solely on the policies and procedures as defined in the Accreditation Policy and Procedure Manual and applicable commission criteria as published by ABET.

I.C.4. ABET makes a list of currently accredited programs publicly available.

I.D. Recognition -- ABET is recognized in the United States by the Council for Higher Education Accreditation (CHEA) as the organization responsible for the accreditation of educational programs leading to degrees in applied science, computing, engineering, and engineering technology. CHEA is a non-profit organization of colleges and universities serving as the national advocate for voluntary self-regulation through accreditation. Graduation from an ABET-accredited program is a prerequisite for many licensing and certifying bodies and agencies. In addition, ABET is signatory to a number of mutual recognition agreements worldwide that provide recognition of graduates from ABET-accredited programs under certain conditions. Information about ABET's recognition can be found on ABET's public web site: <http://www.abet.org>.

I.E. Changes - Changes to accreditation policies and procedures, as outlined in this document, may be proposed by the commissions or the Accreditation Council and must be approved by the ABET Board of Directors. Typically changes to accreditation policies and procedures are effective in the evaluation cycle immediately following adoption. However, this period may be extended, where appropriate, and the adopting body may require a period for public review and comment prior to adoption.

## II. ACCREDITATION POLICIES AND PROCEDURES

### II.A. Public Release of Accreditation Information By the Institution

II.A.1. Institutions are required to represent the accreditation status of each program accurately and without ambiguity. Programs are either accredited or not accredited. ABET does not rank programs.

II.A.2. Unauthorized use of ABET's official logo is prohibited. Accredited programs are authorized to use special logos provided by ABET for use on websites, in course catalogs, and in other similar publications. These logos can be requested through ABET at [info@abet.org](mailto:info@abet.org).

II.A.3. When ABET awards accreditation to a program, the accreditation action indicates only the nature of the next review and is not an indicator of the program's quality. An institution must not publish or imply the length of the period of accreditation. Public announcement of the accreditation action should only relate to the attainment of accredited status. All statements on accreditation status must refer only to those programs that are accredited. No implication should be made that accreditation by one of the ABET commissions applies to any programs other than the accredited ones.

II.A.4. Direct quotation in whole or in part from any ABET statement to the institution is unauthorized, except as required by a Show Cause action. Correspondence and reports between ABET and the institution are confidential documents and should only be released to authorized personnel at the institution. Any document so released by the institution must clearly state that it is confidential. Wherever law or institution policy requires the release of any confidential document, the entire document must be released.

II.A.5. The institution must avoid any implication that programs are accredited under criteria against which they have not been evaluated.

II.A.6. Institution catalogs and similar publications must clearly indicate the programs accredited by the commissions of ABET as separate and distinct from any other programs or kinds of accreditation. Each accredited program must be specifically identified as "accredited by the \_\_\_\_\_ Accreditation Commission of ABET, <http://www.abet.org>."

II.A.7. If accreditation is withdrawn or discontinued, the institution may no longer refer to the program as being accredited.

II.A.8. The institution must make a public correction if misleading or incorrect information is released regarding the items addressed in Section II.A.

## II.B. Confidentiality of Information

II.B.1. ABET requires ethical conduct by each volunteer and staff member engaged in fulfilling the mission of ABET. The organization requires that every volunteer and staff member exhibit the highest standards of professionalism, honesty, and integrity. The services provided by ABET require impartiality, fairness, and equity. All persons involved with ABET activities must perform their duties under the highest standards of ethical behavior.

Information provided by the institution is for the confidential use of ABET and its agents, and will not be disclosed without specific written authorization of the institution concerned.

II.B.2. The contents of all materials furnished for review purposes and discussion during the commission meetings are considered privileged information. The contents of those documents and the accreditation actions taken may be disclosed only by ABET staff and only under appropriate circumstances. All communications between institutions and evaluators or commissioners regarding final accreditation actions must be directed to ABET Headquarters.

II.B.3. ABET publicly identifies only programs that have been accredited. ABET does not divulge information regarding programs that have requested ABET evaluation but have not received ABET accreditation.

## II.C. Conflict of Interest

II.C.1. Service as an ABET board member or alternate, committee member, commission member or alternate, team chair, program evaluator, accreditation consultant, or staff member creates situations that may result in conflicts of interest or questions regarding the objectivity and credibility of the accreditation process. ABET expects these individuals to behave in a professional and ethical manner, to disclose real or perceived conflicts of interest, and to recuse themselves from discussions or decisions related to real or perceived conflicts of interest. The intent of this policy is to:

- II.C.1.a. Maintain credibility in the accreditation process and confidence in the decisions of the Board of Directors, committee members, commission members, team chairs, program evaluators, consultants and staff members;
- II.C.1.b. Assure fairness and impartiality in decision-making; and
- II.C.1.c. Avoid the appearance of impropriety.

II.C.2. Individuals representing ABET must not participate in any decision-making capacity if they have or have had a close and active association with a program or institution that is being considered for official action by ABET. Close and active association includes, but is not limited to:

- II.C.2.a. Current or past employment as faculty, staff, or consultant by the institution or program;
- II.C.2.b. Current or past discussion or negotiation of employment with the institution or program;
- II.C.2.c. Attendance as a student at the institution;
- II.C.2.d. Receipt of an honorary degree from the institution;
- II.C.2.e. Involvement of a close family relative as a student or employee of the institution or program;
- II.C.2.f. An unpaid official relationship with an institution, e.g., membership on the institution's board of trustees or industry advisory board; or
- II.C.2.g. Any reason that prohibits the individual from rendering an unbiased decision.

II.C.3. Commission members are not eligible to serve concurrently on the Board of Directors; nor are members of the Board of Directors eligible to serve on an ABET commission. Board liaisons to the commissions serve as ex-officio, non-voting members of the commissions on which they sit. Members of the ABET Board of Directors and ABET staff members may observe an accreditation visit, but they are not eligible to serve as program evaluators or team chairs.

II.C.4. A record of known conflicts of interest will be maintained for every individual involved in the accreditation process. Each individual will be provided the opportunity to update this record annually. The records of conflicts of interest will be utilized in selection of team chairs and program evaluators.

II.C.5. Each individual representing ABET must sign a conflict of interest and confidentiality statement indicating that s/he has read and understands ABET policies on conflict of interest and confidentiality. The policies on conflict of interest and confidentiality will be presented and discussed at the start of each commission meeting.

II.C.6. Individuals must recuse themselves from any portion of an ABET meeting involving discussions or decisions for which they have a real or perceived conflict of interest.

II.C.7. ABET will maintain a record of the names of individuals recusing themselves for conflicts of interest at each meeting related to accreditation decision making.

#### II.D. Accreditation Criteria and Definition of Terms

II.D.1. General Criteria - These criteria address requirements for all programs accredited by a given commission. These criteria have been developed by the commissions. General Criteria are posted on the ABET web site: [www.abet.org](http://www.abet.org).

II.D.2. Program Criteria - These criteria address program-specific requirements within areas of specialization. These criteria have been developed by ABET Member Societies and the commissions. Program Criteria are posted on the ABET web site: [www.abet.org](http://www.abet.org).

II.D.3. Proposed New Criteria and Changes to Criteria – Proposed new criteria or changes to existing criteria will be published for a period of public review and comment. During the review and comment period, proposed criteria will be published in the “Proposed Criteria” section of the appropriate criteria document. The typical review and comment period is one year.

#### II.E. Eligibility of Programs for Accreditation Review

II.E.1. ABET defines an educational program as an integrated, organized experience that culminates in the awarding of a degree. The program will have program educational objectives, student outcomes, a curriculum, faculty, and facilities.

II.E.2. Programs will be considered for accreditation if they are offered by an institution of higher education that has verifiable governmental, national, or regional recognition to confer degrees. A program that does not meet this requirement may be considered for accreditation if its accreditation furthers ABET’s Mission (Refer to Section I.B.).

II.E.2.a. ABET accredits individual educational programs.

II.E.2.b. ABET does not accredit departments or institutions.

II.E.2.c. In order for a program to be accredited, all paths to completion of the program must satisfy the appropriate criteria.

II.E.3. A program must be accreditable under at least one or more of the four commissions of ABET:

II.E.3.a. ASAC - Programs accredited by ASAC are those leading to professional practice utilizing science and mathematics along with engineering concepts as a foundation for discipline-specific practice, including the recognition, prevention, and solution of problems critical to society. ASAC accredits a program at the associate, baccalaureate, or masters degree level.

II.E.3.b. CAC – Programs accredited by CAC are those leading to professional practice across the broad spectrum of computing, computational, information, and informatics disciplines. CAC accredits a program at the baccalaureate degree level.

II.E.3.c. EAC - Programs accredited by EAC are those leading to the professional practice of engineering. EAC accredits a program at the baccalaureate or masters degree level.

II.E.3.c.(1) EAC - All engineering program names must include the word “engineering” (with the exception of naval architecture programs accredited prior to 1984).

II.E.3.d. TAC - Programs accredited by TAC prepare baccalaureate degree graduates for careers as engineering technologists and prepare associate degree graduates for careers as engineering technicians. TAC accredits a program at the associate or baccalaureate degree level.

II.E.3.d.(1) TAC - The name of every TAC-accredited program must include the word “technology,” but the preferred title would include the phrase “engineering technology.”

II.E.4. Program names must meet ABET requirements.

II.E.4.a. The program name must be descriptive of the content of the program.

II.E.4.a.(1) Each program in a country where English is not the native language must provide ABET with both the name of the program in English and the name of the program in the official language(s) of the country.

II.E.4.b. The program name must be shown consistently on transcripts of its graduates, in the institution’s electronic and print publications, and on the ABET Request for Evaluation (RFE).

II.E.4.c. The program name determines the commission and the criteria applicable to its review.

II.E.4.c.(1) Every program must meet the General Criteria for the commission(s) under which it is being reviewed.

II.E.4.c.(2) If a program name implies specialization(s) for which Program Criteria have been developed, the program must satisfy all applicable Program Criteria.

II.E.4.c.(3) A program may choose to have an option, or similar designation implying specialization within the program, reviewed as a separate program.

II.E.4.c.(4) If a program name invokes review by more than one commission, then the program will be jointly reviewed by all applicable commissions.

II.E.5. To be eligible for an initial accreditation review, a program must have at least one graduate within the academic year prior to the academic year of the on-site review.

## II.F. Application and Timeline for Accreditation Review

II.F.1. Programs are considered for accreditation review only at the written request of the institution. An institution contemplating an ABET review for the first time must contact ABET for more information prior to making the formal request.

II.F.1.a. An institution wishing to have programs considered for accreditation or reaccreditation must submit to ABET a Request for Evaluation (RFE) not later than January 31 of the calendar year in which the review is desired. The RFE must be signed by the institutional Chief Executive Officer (President, Chancellor, Rector, or equivalent) and must be submitted with one official transcript of a recent graduate for each program listed on the RFE. A separate RFE must be submitted for each commission that will review any of the institution’s programs that year.

II.F.1.b. Institutions outside of the U.S. are also required to secure approval from the governmental, national, or regional recognizing body or accreditor in the home jurisdiction. The institution must provide a completed ABET Request for Approval (RFA) form from each appropriate agency along with the RFE. The institution must submit all forms by January 31.



II.F.1.c. If more than one ABET commission will be reviewing programs at an institution in the same academic year, the institution may request that all on-site reviews be conducted simultaneously.

II.F.1.d. ABET conducts all reviews in English. Programs must submit all documentation including the Self-Study Report, transcripts, display materials, and correspondence in English.

II.F.2. The Accreditation Fee Schedule will be posted on the ABET web site by April 1 of each year. By May 1 of the calendar year in which the review is requested, the institution will receive an invoice for fees associated with the requested review. Payment is due 45 days from date of the invoice.

II.F.3. Prior to the final appointment of the team, the institution will have the opportunity to review all assigned team members with regard to ABET's published Conflict of Interest Policy (Section II.C.). The institution may reject a team member only in the case of real or perceived conflicts of interest.

II.F.4. The institution and the team chair will mutually determine dates for any on-site review that is required. On-site reviews are normally conducted during September through December of the calendar year in which the review is requested.

II.F.5. The institution will submit a Self-Study Report or an Interim Report, as required, for each program to be reviewed.

II.F.5.a. The Self-Study Report or Interim Report is due to ABET Headquarters no later than July 1 of the calendar year in which the review is to be conducted.

II.F.5.b. The institution will provide the appropriate report directly to the team chair no later than July 1.

II.F.5.c. The institution will provide the appropriate report directly to each program evaluator at the direction of the team chair.

II.F.6. When an on-site review is required, the duration of the review is normally three days from team arrival to departure but may be extended or shortened depending on review requirements. Typically the on-site review is conducted from Sunday through Tuesday.

II.F.7. As a result of the review, the institution will typically receive a Draft Statement to the Institution for review and comment.

II.F.8. The institution has 30 days from receipt to provide a Due Process Response to the Draft Statement. This response will be evaluated and used as the basis for revising the Draft Statement to create the Final Statement.

II.F.9. Final action on each program will be based upon the commission's consideration of the findings in the Draft Statement, the evaluation of the Due Process Response, and the evaluation of additional information received in time for proper consideration. The Draft Statement will be modified to reflect these evaluations, resulting in a Final Statement that reflects the final action by the commission.

II.F.10. The institution will receive the Final Statement and the Summary of Accreditation Actions no later than August 31 of the calendar year following the review.

## II.G. Program Reviews

II.G.1. Reviews are conducted to verify that a program is in compliance with the appropriate accreditation criteria, policies, and procedures.

## II.G.2. Types of Review

II.G.2.a. A Comprehensive Review addresses all applicable criteria, policies, and procedures.

II.G.2.a.(1) A Comprehensive Review consists of:

II.G.2.a.(1)(a) The examination of a Self-Study Report prepared by the program and

II.G.2.a.(1)(b) An on-site review by a team.

II.G.2.a.(2) An Initial Program Review, conducted on a program that is not already accredited, must be a comprehensive review.

II.G.2.a.(3) Comprehensive Reviews must be conducted for each accredited program at intervals no longer than six years for continuous accreditation, except as provided in Section II.J.

II.G.2.a.(3)(a) ABET establishes a six-year cycle of scheduled general reviews for each institution. This general review applies to all programs accredited by a particular commission. A year in which such a review occurs is called a general review year.

II.G.2.a.(3)(b) In a general review year for a given institution, all accredited programs under the purview of a given commission will receive a comprehensive review simultaneously.

II.G.2.a.(3)(c) The general review cycle for a given commission will be set by the date on which that commission accredits its first program at the institution.

II.G.2.a.(3)(d) An institution with accredited programs in more than one commission can request alignment of general review years so that general reviews by more than one commission occur in the same year.

II.G.2.b. An Interim Review occurs between Comprehensive Reviews when Weaknesses or Deficiencies remain unresolved in a prior review. An Interim Review typically uses the accreditation criteria in effect at the time of the previous comprehensive review. However, an institution may elect to base its interim review on criteria in effect at the time of the last comprehensive review or on those in effect at the time of the Interim Review.

II.G.2.b.(1) A review following an Interim Report (IR) or a Show Cause Report (SCR) accreditation action consists of:

II.G.2.b.(1)(a) The examination of an Interim Report prepared by the program addressing Concerns, Weaknesses, and Deficiencies that remained unresolved in the Final Statement from the prior review.

II.G.2.b.(2) A review following an Interim Visit (IV) or a Show Cause Visit (SCV) accreditation action consists of:

II.G.2.b.(2)(a) The examination of an Interim Report prepared by the program addressing Concerns, Weaknesses, and Deficiencies that remained unresolved in the Final Statement from the prior review, and

II.G.2.b.(2)(b) An on-site review focused on Concerns, Weaknesses, and Deficiencies that remained unresolved in the Final Statement from the prior review.

II.G.2.b.(3) New Concerns, Weaknesses, and Deficiencies can be cited if they become evident during the conduct of an Interim Review.

II.G.3. Self-Study Report – Educational programs at an institution will be evaluated, in part, on the basis of information and data submitted to ABET in the form of a Self-Study Report. The Self-Study Report addresses how a program meets each criterion in addition to applicable policy requirements. The Self-Study Report must include information about all methods of program delivery, all possible paths to completion of the degree, and remote offerings. To assist programs in completing a Self-Study Report, each commission has developed a Self-Study Questionnaire that is posted on the ABET website.

II.G.4. Final Preparation for On-Site Review

II.G.4.a. Submittal of Transcripts - Prior to arriving on-site, the team will request official transcripts of the most recent graduates from each program. Each program being evaluated will provide official transcripts with associated worksheets and any guidelines used by the advisors.

II.G.4.b. Additional Information – Prior to arriving on-site, the team may request additional information it deems necessary for clarification.

II.G.5. On-Site Review - ABET conducts an on-site review to assess factors that cannot be adequately described in the Self-Study Report.

II.G.5.a. Teams for on-site reviews will typically consist of a team chair and one program evaluator for each program being reviewed. The typical minimum team size is three members.

II.G.5.a.(1) Team chairs will typically be current members of the appropriate commission. Program evaluators will typically be selected from the approved list maintained by the appropriate ABET Member Society designated as Lead for that curricular area.

II.G.5.a.(2) For a program in a curricular area where no Lead Society has been designated, the program evaluator will be selected from a member society that the commission leadership, in consultation with the program and representatives of any potentially interested member society(ies), believes most closely encompasses the program's technical content.

II.G.5.a.(3) In the case where a program must satisfy more than one set of Program Criteria, there typically will be one program evaluator for each set of Program Criteria to be used in the review.

II.G.5.a.(4) For cases such as the following, the team size and/or duration of the on-site review may be adjusted:

II.G.5.a.(4)(a) A very high degree of overlap between two programs being reviewed.

II.G.5.a.(4)(b) A simultaneous or joint review by two or more commissions.

II.G.5.a.(4)(c) A program with multiple sites or nontraditional delivery method.

II.G.5.a.(4)(d) A single associate-level program.

II.G.5.a.(4)(e) An Interim Review with a very limited focus.

II.G.5.a.(5) A review team may include observers at the discretion of the team chair and the institution. Observers are typically:

II.G.5.a.(5)(a) Program evaluator trainees from ABET Member Societies,

II.G.5.a.(5)(b) Members of State Boards of Licensure and Registration, or

II.G.5.a.(5)(c) Representatives from ABET's international accrediting partners.

II.G.6. Comprehensive Review - The review team will examine all program aspects to judge compliance with criteria and policies. ABET will assist each program in recognizing its strong and weak points. To accomplish this, the team will:

II.G.6.a. Interview faculty, students, administrators, and staff to obtain an understanding of program compliance with the applicable criteria and policies and of specific issues that arise from the examination of the Self-Study Report and from the on-site review.

II.G.6.b. Examine the following:

II.G.6.b.(1) Facilities - to assure the instructional and learning environments are adequate and are safe for the intended purposes. Neither ABET nor its representatives offer opinions as to whether, or certify that, the institution's facilities comply with any or all applicable rules or regulations pertaining to: fire, safety, building, and health codes, or consensus standards and recognized best practices for safety.

II.G.6.b.(2) Materials - Evaluators will review samples of displayed course materials including course syllabi, textbooks, example assignments and exams, and examples of student work, typically ranging from excellent through poor.

II.G.6.b.(3) Evidence that the program educational objectives stated for each program are based on the needs of the stated program constituencies.

II.G.6.b.(4) Evidence of the assessment, evaluation, and attainment of the program educational objectives stated for each program.

II.G.6.b.(5) Evidence of the assessment, evaluation, and attainment of student outcomes for each program.

II.G.6.b.(6) Evidence of actions taken to improve the program.

II.G.6.b.(7) Student support services to confirm adequacy of services appropriate to the institution's mission and the program's educational objectives and student outcomes.

II.G.6.b.(8) The process for certifying completion of the program and awarding of the degree, including visits with persons responsible to ascertain that the process works as reported.

II.G.6.c. Present the team's factual findings orally at the conclusion of the visit in an Exit Meeting for the institution's chief executive officer or designee and such personnel as the chief executive officer wishes to assemble.

II.G.6.d. Provide to the dean or other appropriate academic officer, a copy of the Program Audit Form (PAF) for each program reviewed along with an explanation of the seven-day period in which the institution can provide the Team Chair with corrections to any errors of fact in the oral statement or on the PAFs.

II.G.7. Effective Date of Initial Accreditation – For a program obtaining initial accreditation, the accreditation normally will apply to all students who graduated from the program after October 1 of the academic year preceding the on-site review. Each commission, at the time of the accreditation decision, has the authority to set the date of initial accreditation as conditions warrant, but the date of initial accreditation can be no earlier than two academic years prior to the on-site review.

II.G.7.a. An institution may wish to delay the accreditation review of a new program by one year to coincide with a scheduled general review of other accredited programs in the same commission. Under those circumstances ABET will consider extending accreditation of the new program retroactively to encompass two academic year(s) prior to the academic year in which the on-site review was conducted. The following additional information must be provided to the review team:

II.G.7.a.(1) Documentation in the Self-Study Report that no substantive curricular changes have occurred during the two academic years prior to that of the initial review.

II.G.7.a.(2) Transcripts and sample student work for both academic years prior to that of the initial review.

#### II.G.8. Interim Review

II.G.8.a. Types of Interim Reviews – There are two types of interim reviews:

II.G.8.a.(1) Those that do not require an on-site review (resulting from an Interim Report or Show Cause Report action), and

II.G.8.a.(2) Those that require an on-site review (resulting from an Interim Visit or Show Cause Visit action).

#### II.G.8.b. Composition of Interim Review Team

II.G.8.b.(1) If an on-site review is not required, a team chair will typically review an Interim Report or a Show Cause Report.

II.G.8.b.(2) If an on-site review is required, review teams will typically consist of a team chair and one program evaluator for each program having an on-site review.

II.G.8.b.(2)(a) The minimum team size for an Interim Review following a Show Cause Visit action is three persons.

II.G.9. Draft Statement to the Institution – The team chair prepares a Draft Statement of preliminary findings and recommendations to be edited by designated officers of the appropriate commission and for transmission to the institution. ABET will prepare a Draft Statement to the Institution for each review conducted. The Draft Statement will consist of general information plus a program-specific section for each program reviewed.

II.G.9.a. The statement to each program will typically include the following:

II.G.9.a.(1) Findings of Fact – A finding of fact indicates a program characteristic that exists and is verifiable through the review process.

II.G.9.a.(2) Findings of shortcomings:

II.G.9.a.(2)(a) Deficiency – A Deficiency indicates that a criterion, policy, or procedure is not satisfied. Therefore, the program is not in compliance with the criterion, policy, or procedure.

II.G.9.a.(2)(b) Weakness – A Weakness indicates that a program lacks the strength of compliance with a criterion, policy, or procedure to ensure that the quality of the program will not be compromised. Therefore, remedial action is required to strengthen compliance with the criterion, policy, or procedure prior to the next review.

II.G.9.a.(2)(c) Concern – A Concern indicates that a program currently satisfies a criterion, policy, or procedure; however, the potential exists for

the situation to change such that the criterion, policy, or procedure may not be satisfied.

II.G.9.a.(3) Findings of Observation – An Observation is a comment or suggestion that does not relate directly to the current accreditation action but is offered to assist the institution in its continuing efforts to improve its programs.

II.G.10. 30-Day Due Process - ABET provides the institution with a Draft Statement. The institution may respond in 30 days to report progress in addressing shortcomings or to correct errors of fact in the Draft Statement. This is referred to as the 30-day Due Process Response.

II.G.10.a. Shortcomings are considered to have been resolved only when the correction or revision has been implemented during the academic year of the review and substantiated by official documents signed by the responsible administrative officers.

II.G.10.b. All unresolved shortcomings will be evaluated by the appropriate commission at the time of the next review.

II.G.10.c. Supplemental Information from the Institution – The team chair may, at his or her discretion in consultation with the commission chair, accept additional information after the 30-day Due Process period. Any such information must be received in time for proper consideration prior to the Summer Commission Meeting.

II.G.11. Final Statement to the Institution - The team chair will prepare a draft of the Final Statement after reviewing the institution's Due Process Response. Designated officers of the appropriate commission will edit the draft and the appropriate commission will determine the accreditation actions based on this draft. The Final Statement to the Institution will be completed after all updates from the Summer Meeting are incorporated.

II.G.12. Accreditation Actions - The decision on program accreditation rests with the appropriate commission of ABET. The following actions are available to the commissions. In the case where two or more commissions are involved in the review of a single program, each commission determines an action independently. Normally, the more severe of the actions voted will be indicated as the action for the program.

II.G.12.a. NGR (Next General Review) – This action indicates that the program has no Deficiencies or Weaknesses. This action is taken only after a Comprehensive General Review and has a typical duration of six years.

II.G.12.b. IR (Interim Report) – This action indicates that the program has one or more Weaknesses. The Weaknesses are such that a progress report will be required to evaluate the remedial actions taken by the institution. This action has a typical duration of two years.

II.G.12.c. IV (Interim Visit) – This action indicates that the program has one or more Weaknesses. The Weaknesses are such that an on-site review will be required to evaluate the remedial actions taken by the institution. This action has a typical duration of two years.

II.G.12.d. SCR (Show Cause Report) – This action indicates that a currently accredited program has one or more Deficiencies. The Deficiencies are such that a progress report will be required to evaluate the remedial actions taken by the institution. This action has a typical duration of two years. This action cannot follow a previous SC action for the same Deficiency(s).

II.G.12.d.(1) ABET expects the institution to notify students and faculty that the program is required to make specific corrective actions to maintain accreditation.

II.G.12.e. SCV (Show Cause Visit) - This action indicates that a currently accredited program has one or more Deficiencies. The Deficiencies are such that an on-site review will

be required to evaluate the remedial actions taken by the institution. This action has a typical duration of two years. This action cannot follow a previous SC action for the same Deficiency(ies).

II.G.12.e.(1) ABET expects the institution to notify students and faculty that the program is required to make specific corrective actions to maintain accreditation.

II.G.12.f. RE (Report Extended) – This action indicates that satisfactory remedial action has been taken by the institution with respect to Weaknesses identified in the prior IR action. This action is taken only after an IR review. This action extends accreditation to the next General Review and has a typical duration of either two or four years.

II.G.12.g. VE (Visit Extended) -- This action indicates that satisfactory remedial action has been taken by the institution with respect to Weaknesses identified in the prior IV action. This action is taken only after an IV review. This action extends accreditation to the next General Review and has a typical duration of either two or four years.

II.G.12.h. SE (Show Cause Extended) -- This action indicates that satisfactory remedial action has been taken by the institution with respect to all Deficiencies and Weaknesses identified in the prior SC action. This action is taken only after either a SCR or SCV review. This action typically extends accreditation to the next General Review and has a typical duration of either two or four years.

II.G.12.i. NA (Not to Accredite) -- This action indicates that the program has Deficiencies such that the program is not in compliance with the applicable criteria. This action is usually taken only after a SCR or SCV review, or the review of a new, unaccredited program. Accreditation is not extended as a result of this action. This action can be appealed as specified in the Appeals Section (II.L.) of this document.

II.G.12.i.(1) An Executive Summary of the findings leading to the not-to-accredit action will be provided to the institution along with the Final Statement.

II.G.12.i.(2) A “Not to Accredite” action, as a result of a “Show Cause” focused review, is effective September 30 of the year of the “not to accredit” decision, pending final action on any request from the institution for immediate revisit, reconsideration, or appeal.

II.G.12.i.(3) For accredited programs, ABET will require the institution to formally notify students and faculty affected by the revocation of the program’s accredited status, not later than September 30 of the calendar year of the “not to accredit” action and to remove the accreditation designation from all program catalog copy, electronic and print.

II.G.12.j. T (Terminate) – This action is generally taken in response to a request by an institution that accreditation be extended for a program that is being phased out. The intent is to provide accreditation coverage for students remaining in the program.

II.G.12.j.(1) The duration of this action may be up to three years.

II.G.12.j.(2) This action may not follow either Show Cause action.

## II.H. Changes During the Period of Accreditation

II.H.1. The institutional administrative officer responsible for ABET accredited programs will notify the ABET Accreditation Director of changes that potentially impact the extent to which an accredited program satisfies ABET accreditation criteria or policies. The institution provides ABET with detailed

information about the nature of each change and its impact on the accredited program. Such changes include, but are not limited to:

- II.H.1.a. Changes related to criteria
  - II.H.1.a.(1)(a) Students
  - II.H.1.a.(1)(b) Program Educational Objectives
  - II.H.1.a.(1)(c) Student Outcomes
  - II.H.1.a.(1)(d) Continuous Improvement
  - II.H.1.a.(1)(e) Curriculum
  - II.H.1.a.(1)(f) Faculty
  - II.H.1.a.(1)(g) Facilities
  - II.H.1.a.(1)(h) Institutional Support
  - II.H.1.a.(1)(i) Program Criteria

- II.H.1.b. Changes related to ABET policy
  - II.H.1.b.(1)(a) Program name
  - II.H.1.b.(1)(b) Methods or Venues of Program Delivery
  - II.H.1.b.(1)(c) Institutional Authority to Provide Post-secondary Education
  - II.H.1.b.(1)(d) Status of Institutional Accreditation
  - II.H.1.b.(1)(e) Decision Not to Continue Accreditation
  - II.H.1.b.(1)(f) Decision to Terminate a Program

II.H.2. ABET will review the information provided by the institution and any third party as follows:

II.H.2.a. The ABET Accreditation Director sends copies of the information provided by the institutions or the third party to the appropriate commission chair(s) and to two commissioners from each applicable commission.

II.H.2.b. The selected commissioners review the documentation provided and make recommendations to the Commission Executive Committee within 30 days.

II.H.2.b.(1) These commissioners may request additional information through ABET Headquarters.

II.H.2.b.(2) These commissioners will recommend either: (1) that accreditation be maintained for the duration of the current accreditation period, or (2) that a focused on-site review be required to determine the accreditation status of the changed program.

II.H.2.c. The Commission Executive Committee will review the recommendations and make one of the follow decisions:

II.H.2.c.(1) The program must provide specific additional information.

II.H.2.c.(2) Accreditation will be maintained for the duration of the current accreditation period.

II.H.2.c.(3) A focused on-site review is required to determine the accreditation status of the changed program and the review will be scheduled in the earliest available review cycle.

II.H.2.c.(3)(a) The accreditation status of the program is changed.

II.H.2.d. ABET will notify the institution of the commission's decision.

II.H.2.e. If an immediate focused on-site review is required and the



institution declines to do so, this action shall be cause for revocation of accreditation of the program under consideration (see Sections II.K.5 and II.K.6).

II.H.2.f. If an accredited program ceases to exist or ceases to be offered by an institution, the program accreditation will terminate as of the date the program ceases to exist or ceases to be offered.

II.I. Accreditation Termination - From time to time, an institution may decide to terminate accreditation of a program or to terminate an accredited program from its offerings.

II.I.1. Terminating a program's accreditation – An institution may decide to terminate a program's accreditation within its current period of accreditation.

II.I.1.a. The program must notify ABET in accordance with Section II.H. above.

II.I.2. Terminating a program – An institution may decide to terminate a program from its offerings. The following process may provide an extension of accreditation up to three years beyond the current period of accreditation in order to provide accreditation coverage for students remaining in the program until it completes the phase-out.

II.I.2.a. The program submits a Request for Evaluation (RFE) indicating the decision to terminate accreditation along with the date when the last student is expected to graduate.

II.I.2.b. The program submits a Termination Plan by July 1 after the RFE is submitted. The Termination Plan demonstrates the program's ability to continue delivery of an accredited program during its phase-out. The Plan should include the following information:

II.I.2.b.(1) Name of Institution;

II.I.2.b.(2) Name of Program;

II.I.2.b.(3) The number of students remaining in the program, by class, with the expected date of graduation for each class;

II.I.2.b.(4) Copies of all notices to students in the program regarding the discontinuation of the program;

II.I.2.b.(5) The name, official position, and contact information of the individual responsible for the continuing administration of the program;

II.I.2.b.(6) The names of the faculty members teaching all required technical courses and any other courses specific to the program. Courses being taught in connection with other programs whose accreditation is being continued need not be covered in the report;

II.I.2.b.(7) Biographical data sheets for all persons included in (5) and (6) above;

II.I.2.b.(8) Descriptions of any substitutions or major changes in the curriculum since the time of the last accreditation review or that are planned through to the termination of the program;

II.I.2.b.(9) Descriptions of how instructional laboratory facilities will be maintained for remaining students;

II.I.2.b.(10) Descriptions of advising processes that will be available to students remaining in the program; and

II.I.2.b.(11) Descriptions of any remedial actions taken with respect to any Weaknesses remaining at the time of the last accreditation review.

II.I.2.c. If the requested accreditation period will extend more than six years from the date

of the most recent general review, an on-site termination review will be required.

II.I.2.c.(1) The on-site termination review will be focused on the Termination Plan.

II.I.2.c.(2) The on-site termination review will be conducted by a team chair only and will typically be a one-day visit.

II.I.2.d. If an on-site termination review is not required, the Termination Plan will be reviewed by a commission member.

II.I.2.e. A decision on the “Termination” action will be made by the appropriate commission.

II.J. Continuation of Accreditation – From time to time programs may find it necessary to seek an extension of accreditation outside a scheduled review.

II.J.1. The program must submit an official request to ABET with a detailed rationale for the request.

II.J.2. Continuation of accreditation beyond a normal scheduled review year requires commission approval and can be granted only under very limited circumstances:

II.J.2.a. Events clearly beyond the control of the institution that prevent the program from preparing for the review and/or prevents the team from conducting a complete on-site review.

II.J.2.a.(1) Length of continuation is limited to one year.

II.J.2.a.(2) General review year would not change.

II.J.2.b. Desire of an institution to synchronize general reviews conducted by different commissions.

II.J.2.b.(1) Length of continuation is limited to two years.

II.J.2.b.(2) Continuation of accreditation for a period greater than one year may necessitate an on-site focused review or report.

II.J.2.b.(3) General review year would change accordingly.

II.J.2.c. Desire of ABET to change the general review year to achieve a better balance in commission workload.

II.J.2.c.(1) The change must be agreeable to the institution.

II.J.2.c.(2) Length of continuation is limited to one year.

II.J.2.c.(3) General review year would change accordingly.

II.K. Revocation of Accreditation - If, during the period of accreditation, a program appears to be no longer in compliance with criteria or policies, ABET may institute Revocation for Cause according to the following procedures:

II.K.1. ABET will notify the institution, providing a comprehensive document showing the reasons why revocation is being considered.

II.K.2. The institution will be asked to provide an analysis and response to the reasons provided by ABET.

II.K.3. An on-site review may be scheduled to evaluate the reasons provided by ABET.

II.K.4. If the on-site review and/or the institution’s response fail to demonstrate compliance with accreditation criteria and/or policies, accreditation will be revoked.

II.K.5. ABET will promptly notify the institution of such revocation. The notice will be accompanied by a supporting statement detailing the cause for revocation.

II.K.6. Revocation for Cause constitutes a Not to Accredite (NA) action and the institution may appeal.

## II.L. Appeals, Reconsiderations, and Immediate Re-Visits

II.L.1. Appeals, requests for reconsideration, and requests for immediate revisits may be made only in response to not-to-accredit actions. Further, those appeals or requests for reconsideration may be based only upon the grounds that the not-to-accredit decision of the commission was inappropriate because of errors of fact or failure to conform to ABET's published criteria, policies, or procedures. Only conditions known to the commission at the time of the commission's decision will be considered by ABET in the cases of appeals or requests for reconsideration. In the case of a request for immediate revisit, substantive improvements and corrective actions taken prior to the request and documented by the institution will also be considered.

II.L.2. In lieu of an immediate appeal, an institution may first request reconsideration or an immediate revisit. If such a request is denied, the institution may appeal the original not-to-accredit action. Requests for reconsideration or an immediate revisit must be made in writing to the Executive Director of ABET within 30 days of receiving notification of the not-to-accredit action.

II.L.3. Appeals must be made in writing to the Executive Director of ABET within 30 days of receiving notification of the not-to-accredit action or notification of the denial of a request for reconsideration or an immediate revisit.

### II.L.4. Immediate Revisit

II.L.4.a. A program that has received a not-to-accredit action may be a candidate for an immediate revisit if it will undergo substantive and documented improvement before the onset of the next accreditation cycle.

In such cases, the institution must submit a written request for an immediate revisit to the Executive Director of ABET within 30 days of receiving notification of the not-to-accredit action. This request must be accompanied by 10 copies of a report stating the actions already taken to eliminate the deficiencies cited in ABET's statement to the institution. This report should contain appropriate documentation of substantive improvements and corrective actions taken, and should support the request for a revisit. The institution is cautioned, however, that the extent to which corrective actions have not been made effective may make a revisit unproductive.

II.L.4.b. The executive committee of the appropriate commission shall accept or deny the institution's request within 15 days of ABET's receipt of the institution's request for immediate revisit. This action will be based solely on the report and supporting documentation supplied by the institution in accordance with the nature of the deficiencies which led to the not-to-accredit action.

II.L.4.c. If the executive committee of the appropriate commission judges that an immediate revisit is not warranted, the request will be denied with a statement of reasons and a reiteration of the institution's right to pursue an appeal of the not-to-accredit action.

II.L.4.d. When an immediate revisit is granted by the executive committee of the appropriate commission, the institution shall be deemed to have waived its right to appeal either the original not-to-accredit action or the action that will result from the revisit. If the request for revisit is granted, the institution will be charged the regular visitation fee for the revisit.

II.L.4.e. If, following the immediate revisit, the executive committee of the appropriate commission, upon unanimous vote, judges that the institution is correct

in its claim of substantive improvement, the executive committee may overturn the not-to-accredit decision and grant whatever accreditation action it deems appropriate, within the choices that were available to the commission itself.

#### II.L.5. Reconsideration

II.L.5.a. A program that has received a not-to-accredit action may be a candidate for reconsideration if it can demonstrate that there were major, documented errors of fact in the information used by the commission in arriving at the not-to-accredit decision.

In such cases, the institution must submit a written request for reconsideration to the Executive Director of ABET within 30 days of receiving notification of the not-to-accredit action. This request must be accompanied by 10 copies of a report specifying the major, documented errors of fact and how such errors contributed to the not-to-accredit action, along with substantiating documentation.

II.L.5.b. The executive committee of the appropriate commission shall accept or deny the institution's request for reconsideration of the not-to-accredit decision within 15 days of ABET's receipt of the institution's request for reconsideration. This action will be based solely on the report and supporting documentation supplied by the institution in accordance with the nature of the deficiencies which led to the not-to-accredit action.

II.L.5.c. If the executive committee of the appropriate commission judges that reconsideration is not warranted, the request for reconsideration will be denied with a statement of reasons and a reiteration of the institution's right to pursue an appeal of the not-to-accredit action.

II.L.5.d. When a reconsideration is granted by the executive committee of the appropriate commission, the institution shall be deemed to have waived its right to appeal either the original not-to-accredit action or the action that will result from the reconsideration.

II.L.5.e. If, following reconsideration, the executive committee of the appropriate commission, upon unanimous vote, judges that the institution is correct in its claim of such error leading to an erroneous conclusion by the commission, the executive committee may overturn the not-to-accredit decision and grant whatever accreditation action it deems appropriate, within the choices that were available to the commission itself. The new accreditation action must be decided by unanimous vote of the executive committee.

#### II.L.6. Appeal

II.L.6.a. Only not-to-accredit actions may be appealed. A notice of appeal must be submitted in writing by the chief executive officer of the institution to the Executive Director of ABET within 30 days of receiving notification of the not-to-accredit action. This submission must include the reasons why the not-to-accredit decision of the responsible accreditation commission is inappropriate because of either errors of fact or failure of the respective accreditation commission to conform to ABET's published criteria, policies, or procedures.

II.L.6.b. Upon receipt of a notice of appeal, the President of ABET will select three or more members or past members of the ABET Board of Directors to serve as an appeal committee. At least one member of this committee will be experienced as a program evaluator and/or former member of the appropriate commission. At least

one member of this committee shall represent the Member Society with curricular responsibility for each of the programs for which there is an appeal, unless said program is under the curricular responsibility of an ABET commission. The President of ABET will designate one of the committee members as chair of the committee.

II.L.6.c. The appeal committee will be provided with copies of all documentation that has been made available to the institution during the different phases of the accreditation cycle, including the institution's due process response and other materials submitted by the institution or the commission.

II.L.6.d. The institution is required to submit a response (normally one page) to the commission's executive summary previously sent to the institution. The institution may also submit other material it deems necessary to support its appeal. However, such materials must be confined to the status of the program at the time of the accreditation action of the commission and to information that was then available to the commission.

II.L.6.e. It is emphasized that improvements made to a program subsequent to the annual meeting of the commission will not be considered by the appeal committee.

II.L.6.f. The respective commission, through its executive committee, may submit written materials beyond the statement to the institution and the executive summary for clarification of its position. Such materials must be provided to the institution and appeal committee at least 60 days prior to the date of the committee's meeting. Any rebuttal by the institution must be submitted to the committee at least 30 days prior to the committee meeting.

II.L.6.g. The appeal committee will meet and consider only the written materials submitted by the institution and the respective commission in determining its recommendation. Representatives from the institution and the commission may not attend this meeting. The appeal committee's decision is limited to the options available to the commission responsible for the not-to-accredit determination. The appeal committee's decision will be reported to the ABET Board of Directors in writing by the appeal committee chair. The decision rendered by the appeal committee is the final decision of ABET.

II.L.6.h. The institution and the Commission will be notified in writing of this decision, and the basis for the decision, by the Executive Director within 15 days of the final decision.

## II.M. Complaints

II.M.1. It is the policy of ABET to review all complaints received from any source, including students, against either an accredited program or ABET itself that are related to compliance with ABET's standards, criteria, or procedures and to resolve any such complaints in a timely, fair, and equitable manner. Furthermore, it is the policy of ABET to retain all documentation associated with any such complaint received against an accredited program for a period of not less than one accreditation cycle (typically six years), and for a period of not less than five (5) years for any complaints received against ABET itself.

II.M.2. Accredited programs must maintain a record of student complaints made to the institution and upon written request make that record available to ABET.

II.M.3. ABET will not pursue complaints that are not in writing or that are anonymous. The receipt of a complaint will be acknowledged to the complainant within fourteen (14) days.

II.M.4. ABET cannot assume authority for enforcing the policies of programs or institutions regarding faculty, professional staff, or student rights. ABET does not adjudicate, arbitrate, or mediate individual grievances against a program or institution.

II.M.5. Complaints will be reviewed initially by the ABET Executive Director. If the complaint is not within the purview of ABET, the complainant will be notified and no further action will be taken. If the complaint appears to warrant further investigation, the Executive Director will forward a copy of the complaint to the appropriate Board, Commission or institutional authorities within fourteen (14) days of receipt of the complaint. The complainant will be notified within fourteen (14) days of the receipt whether the complaint falls within the purview of ABET and the next steps in the investigative process.

II.M.6. Complaints Against an Institution or its Programs

II.M.6.a. If the complaint appears to warrant further investigation, the Executive Director will forward a copy of the complaint to the appropriate commission and to the principal administrative officers of the institution within fourteen (14) days of receipt of the complaint with a request for an institutional response within thirty (30) days. The institutional response will be reviewed by the executive committee of the appropriate commission within thirty (30) days of receipt of the institutional response.

II.M.6.b. If ABET determines that the institutional response satisfactorily addresses the issue or issues raised in the complaint, the matter will be considered closed. Within fourteen (14) days of the determination, the complainant will be informed in writing of the results of the determination.

II.M.6.c. In the event that an institutional response is not received by ABET within thirty (30) days of the request for the response, or if the response is not deemed to have satisfactorily resolved the issue, ABET may initiate further proceedings as circumstances warrant, up to and including revocation of accreditation.

II.M.6.d. If the institution has released incorrect or misleading information regarding the accreditation status of the institution or program, the contents of visit reports and final statements, or the accreditation action taken by ABET, the institution will be required to make a public correction.

II.M.7. Complaints Against ABET

II.M.7.a. If the complaint is concerned with ABET's criteria, policies, or procedures or with the implementation of these, the Executive Director will forward a copy of the complaint to the executive committee of the appropriate commission or Board of Directors within fourteen (14) days of receipt.

II.M.7.b. If it appears that an ABET representative or an individual working on behalf of ABET may have violated ABET's criteria, policies, or procedures, that individual will be asked to respond to the issues raised in the complaint within thirty (30) days. The appropriate executive committee will make its determination within thirty (30) days of receipt of the response. The complainant

will be notified of the final action of the executive committee in writing within fourteen (14) days of the determination.

II.M.7.c. If ABET determines that a violation has occurred, ABET will counsel the responsible party and may take further action as circumstances warrant, up to and including termination as an ABET representative. If ABET finds that a violation of its policies or procedures has occurred which may have had an effect on the accreditation action, ABET may initiate further proceedings as circumstances warrant, up to and including an immediate revisit to the institution.

II.M.7.d. Complaints against ABET employees will be handled in accordance with the ABET Employee Operations & Procedures Manual and may result in actions up to and including termination of employment.

