



## Accreditation Policy and Procedure Manual

Effective for Reviews during the 2025-2026 Accreditation Cycle  
Incorporates all changes approved by the ABET Board of Delegates  
as of October 26, 2024

Applied and Natural Sciences Accreditation Commission

Computing Accreditation Commission

Engineering Accreditation Commission

Engineering Technology Accreditation Commission

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## Accreditation Policy and Procedure Manual

Effective for Reviews during the 2025-2026 Accreditation Cycle

### Manual Purpose

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 for both the Board of Directors and Board of Delegates and Area Delegations. It is provided for the use of programs, accreditation commissions, team chairs, and program evaluators. The program seeking accreditation is responsible for demonstrating clearly that it is in compliance with all applicable ABET policies, procedures, and criteria.

### Please Note:

1. Sections beginning with the acronyms ANSAC, CAC, EAC, or ETAC indicate those sections that apply only to the indicated Commission.
2. Section I and Section IV contain policies, processes, and procedures established and approved by the ABET Board of Delegates.
3. Section II contains policies and procedures established and approved by the ABET Board of Directors.
4. Section III contains basic information about ABET and the functioning of its Commissions.
5. Section V contains an ABET glossary.

Segments in bold reflect revisions approved by the ABET Board of Directors or the ABET Board of Delegates for the 2025-2026 review cycle.

## Section I - ACCREDITATION POLICIES AND PROCEDURES

### I.A. Public Release of Information

I.A.1. In accordance with ABET's confidentiality policy ([APPM Section II.B.](#)) ABET publicly identifies currently accredited programs and formerly accredited programs that are not currently accredited. ABET will make the accreditation status of a program publicly available at <https://www.abet.org> in accordance with the effective date of the most recent final accreditation action for that program.

I.A.2. Publicly-accessible media (as defined in the glossary appended to this APPM) from an institution or program must not publish or imply the length of the period of accreditation resulting from a specific ABET review, except as required by certain accreditation actions (Not to Accredit [[I.E.12.i](#)], Termination [[I.H.2](#) and [I.G.1.c](#)] and Revocation [[I.I.](#)]), and as allowed in announcing the effective date for the start of accreditation. An accreditation action indicates only the nature of the next review, and the timing of that review is not indicative of program quality. Public announcement of the final results of an ABET review should relate solely to accreditation status and can include other program-specific information that is publicly-accessible at <https://www.abet.org>.

I.A.3. Correspondence and documents communicated between ABET and the institution or program as part of program review process are confidential.

I.A.3.a. Correspondence and documents from an institution or program to ABET can be released by ABET only to parties authorized by the institution or program and to parties within ABET who conduct and process program reviews.

I.A.3.b. Correspondence and documents from ABET to an institution or program can be released by the institution or program only to parties within the institution or program. Such a release must clearly state that the correspondence or document is confidential.

I.A.3.c. Direct quotation in whole or in part from any ABET correspondence or document to the institution or program is unauthorized in publicly-accessible media.

I.A.3.d. Wherever law or institution policy requires the release of any confidential document from ABET, the entire document must be released.

I.A.4. An institution or program must represent the accreditation status of each program accurately and without ambiguity. ABET accreditation criteria are minimum standards that do not provide a basis for comparative ranking of programs, so a program is either accredited or not accredited.

I.A.4.a. An institution or program may not use the same program name at a given degree level to identify both an accredited program and a non-accredited program.

I.A.4.b. When a program is no longer accredited, the institution or program must remove from publicly-accessible media under the institution's control all implications that the program is currently accredited.

I.A.5. An institution or program must avoid implication that any program is accredited by any ABET Commission or under any accreditation criteria against which the program has not been evaluated.

I.A.6. When publicly-accessible media from an institution or program refer to ABET accreditation, every such reference must, as a minimum, clearly and accurately identify the accredited program(s) and the ABET commission by which each is accredited

I.A.6.a. In at least one location readily accessible by the public (such as program home page or institution catalog) , written media referring to accreditation must provide the following details for each specific ABET-accredited program: "accredited by the \_\_\_\_\_ Accreditation Commission of **ABET**, under the commission's General Criteria and Program Criteria for \_\_\_\_\_." If the program was evaluated under more than one set of program criteria, each Program Criteria must be listed. If the program was accredited under General Criteria only, the program must be identified as "accredited by the \_\_\_\_\_ Accreditation Commission of **ABET**, under the commission's General Criteria with no applicable program criteria." If the program was accredited by more than one commission, the accreditation details must be provided for each commission. **The text "ABET" in written electronic media referring to accreditation must link to ABET's homepage.**

I.A.6.b. Each ABET-accredited program must publicly state its Program Educational Objectives (PEOs) and Student Outcomes (SOs) as defined in the glossary appended to this APPM and as utilized by accreditation General Criteria 2 and 3.

I.A.7. If misleading or incorrect information regarding ABET accreditation has been released by an institution or program in publicly-accessible media, the institution or program must publicly and promptly correct this information.

I.A.8. Only accredited programs are authorized to use ABET's official logo. Special logos are provided by ABET for use in publicly-accessible media. These logos can be requested through ABET at [info@abet.org](mailto:info@abet.org).

## I.B. Accreditation Criteria and Definition of Terms

**I.B.1. General Criteria** – These criteria address requirements for all programs at each specific program degree level accredited by a given commission. These criteria have been developed by the commissions and approved by the ABET Board of Delegates or the appropriate Area Delegation. General Criteria are posted on the ABET website: <https://www.abet.org>. For baccalaureate and associate degree level programs, the eight General Criteria are:

1. Students,
2. Program Educational Objectives,
3. Student Outcomes,
4. Continuous Improvement,
5. Curriculum,
6. Faculty,
7. Facilities, and
8. Institutional Support.

**I.B.1.a. Harmonized General Criteria** – These criteria are a subset of the General Criteria for baccalaureate and associate degree level programs. They are identical in language across all of ABET’s accreditation commissions. The harmonized criteria are:

1. Students,
2. Program Educational Objectives,
4. Continuous Improvement,
7. Facilities, and
8. Institutional Support.

**I.B.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 contained in each commission’s criteria document posted on the ABET website: <https://www.abet.org>.

**I.B.3. Proposed New Criteria and Changes to Criteria** – Proposed new criteria or substantive 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 minimum review and comment period is 180 days.

## **I.C. Eligibility of Programs for Accreditation Review**

**I.C.1.** ABET defines institutions and programs for the purpose of establishing eligibility.

**I.C.1.a.** ABET defines an institution of higher education as an organization that has verifiable governmental, national, or regional recognition to provide educational programs and confer degrees.

**I.C.1.a.(1)** ABET does not accredit departments or institutions.

**I.C.1.b.** 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 (PEOs), student outcomes (SOs), a curriculum, faculty, and facilities.

**I.C.1.b.(1)** ABET accredits individual educational programs.

**I.C.2.** The institution must demonstrate control over the program to ensure compliance with all accreditation criteria and policies.

**I.C.2.a.** The institution must demonstrate the authority and ability to produce for each student a record of academic work that describes his or her academic performance. This record must provide, for each student who completes the program, at least the following:

**I.C.2.a.(1)** The name and address of the institution.

**I.C.2.a.(2)** The name and other identification as appropriate of the student.

**I.C.2.a.(3)** A record of academic work pursued at the institution including identification of courses and/or credits attempted, academic years of each attempt, grade or other evaluation for each attempt, and an indication of all required work attempted.

**I.C.2.a.(4)** A list of required courses/and or credits for which academic work pursued at another institution(s) was accepted to meet the requirements of the program.

**I.C.2.b.** The institution must demonstrate the authority and ability to produce, for each student who completes the program, a statement of graduation that certifies completion of all program requirements and includes the name of the program (major, field of study), the degree awarded including an indication of the degree level (associate, baccalaureate, masters) and the date the degree was awarded. The program name and



degree awarded must be shown in English exactly the same as they appear on the Request for Evaluation accepted by ABET.

**I.C.2.c.** The institution must have a means of certifying that the record of academic work and the statement of graduation were produced by the institution and all such documents must include the date of issuance. The requirements of Sections I.C.2.a. and I.C.2.b. may be met by the issuance of one or more documents.

**I.C.3.** A program must be accreditable under one or more of the four commissions of ABET:

**I.C.3.a.** ANSAC - Programs accredited by ANSAC are those utilizing mathematics and the sciences as the foundation for discipline-specific professional practice, including increasing the knowledge base in a field of research or solving problems critical to society. ANSAC accredits a program at the associate, baccalaureate, or master's degree level.

**I.C.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 programs at the associate, baccalaureate, or master's degree level.

**I.C.3.c.** EAC – Programs accredited by EAC are those leading to the professional practice of engineering. EAC accredits a program at the baccalaureate or master's degree level.

**I.C.3.c.(1)** EAC – All engineering program names must include the word “engineering” (with the exception of naval architecture programs accredited prior to 1984).

**I.C.3.d.** ETAC – Baccalaureate programs accredited by ETAC are those leading to the professional practice of engineering technology. Associate degree programs prepare graduates for careers as engineering technicians. ETAC accredits a program at the associate or baccalaureate degree level.

**I.C.3.d.(1)** ETAC – The name of every ETAC-accredited program that includes the word “engineering” in the name of the program must also include the word “technology” directly after the word “engineering.”

**I.C.4.** Program names must meet the following ABET requirements.

**I.C.4.a.** The program name must be descriptive of the content of the program.

**I.C.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.

**I.C.4.b.** The program name must be shown consistently on the record of academic work of its graduates, in the institution's electronic and print publications, and on the ABET Request for Evaluation (RFE).

**I.C.4.b.(1)** The program name must be distinguishable from the degree conferred on the record of academic work of graduates and in all publications referring to program accreditation.

**I.C.4.b.(2)** A program may choose to have an option, or similar designation implying specialization within the program, reviewed as a separate program.

**I.C.4.b.(3)** If there is an option, or similar designation implying a specialization within the program, that is not reviewed by ABET as a separate program, such an option must be displayed separately from and in a subordinate position to the program name on the record of academic work of graduates and in all publications referring to program accreditation.

**I.C.4.c.** The program name, curriculum, electronic and print publications, program educational objectives, and graduate transcripts determine the commission and the criteria applicable to a program's review.

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

**I.C.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.

**I.C.4.c.(3)** If a program name invokes review by more than one commission, then the program will be jointly reviewed by all applicable commissions.

**I.C.5.** For a program to be eligible for an initial accreditation review ABET requires that:

**I.C.5.a.** A program must have had at least one graduate within the two academic years prior to the on-site review.

**I.C.5.b.** A Readiness Review (REv) must be completed for a program(s) within an institution without previously ABET-accredited programs in a given commission. An institution contemplating an ABET review for the first time must contact ABET for more information prior to making a formal request.

**I.C.5.b.(1)** Occurring before a program requests an initial accreditation review, REv is a mandatory document screening process that determines an institution's preparedness to have its program(s) reviewed. It serves to reduce the possibility that an institution without ABET accreditation experience will expend resources for an on-site review before there are adequate preparations and that ABET will commit volunteer resources before a program is sufficiently prepared for the review.

**I.C.5.b.(2)** A committee comprising ABET staff and former commissioners will perform the screening process.

**I.C.5.b.(3)** The outcome of a Readiness Review (REv) for a program is one of three non-binding options:

**I.C.5.b.(3)(a)** A recommendation to submit the RFE in the immediate upcoming accreditation review cycle, addressing the REv suggestions, if any;

**I.C.5.b.(3)(b)** A recommendation to postpone the RFE submission unless substantive changes in the Self-Study preparation and documentation are made; or

**I.C.5.b.(3)(c)** A recommendation not to submit the RFE in the immediate upcoming accreditation review cycle because it is likely to be rejected or the accreditation review is likely to be unsuccessful because of factors that do not appear to be addressable in a timely manner.

## **I.D. Application and Timeline for Accreditation Review**

**I.D.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.

**I.D.1.a.** An institution wishing to have programs considered for accreditation 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 record of academic work 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.

**I.D.1.b.** When submitting an RFE for either a general or an interim on-site review, the institution may suggest the on-site review start date. ABET's first priority is to assign the most appropriate volunteer expert as the team chair, and meeting this priority might require a modification of the suggested on-site visit date.

**I.D.1.c.** Institutions outside the U.S. are also required to provide evidence that they are a degree-granting institution as well as acknowledgement of the ABET RFE from the governmental, national, or regional recognizing body or accreditor in the home jurisdiction. The institution must provide a completed ABET Request for Acknowledgement (RFA) form from each appropriate agency along with the RFE. The institution must submit all forms by January 31.

**I.D.1.d.** 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.

**I.D.1.e.** An RFE may be modified or withdrawn by the institution at any time up to the beginning of the July Commission meeting. Withdrawal of an RFE for a currently accredited program is a request to terminate that program's accreditation and the provisions of Section I.F. and I.G. apply. Changes to the RFE must be in writing, signed by the institutional administrative officer responsible for ABET accredited programs, and transmitted to ABET Headquarters via electronic mail.

**I.D.1.f.** 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.

**I.D.1.g.** ABET conducts all reviews in English. All programs must submit the Self-Study Report in English, and all correspondence between ABET and the program will be in English. Records of academic work and supporting materials are expected to be in English. However, for programs where the language of instruction is not English, official

records of academic work may be provided in the language of instruction with English translation of the records of academic work. Likewise, supporting materials may be in the language of instruction, with an English translator, provided by the program, available to the visit team to assist the visit team in understanding the supporting materials. English translations of selected supporting materials may be requested if written translation is needed to demonstrate the extent of attainment of student outcomes or compliance with Criterion 3 Outcomes, Criterion 5 Curriculum or an applicable Program Criteria.

**I.D.2.** The Accreditation Fee Schedule will be posted on the ABET website 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 30 days from date of the invoice.

**I.D.3.** Prior to the final appointment of the team of volunteer experts, the institution will have the opportunity to review all assigned team members with regard to ABET's published Conflict of Interest Policy ([APPM Section II.A.](#)). The institution may reject a team member only in the case of real or perceived conflicts of interest.

**I.D.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.

**I.D.5.** The institution will submit **via the Accreditation Management System (AMS)** a Self-Study Report or an Interim Report, as required, for each program to be reviewed to ABET Headquarters no later than July 1 of the calendar year in which the review is being conducted. **These documents must be self-contained with no active links to information outside of the uploaded file(s).**

**I.D.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.

**I.D.7.** As a result of the review, the institution will receive a Draft Statement to the Institution for review and comment.

**I.D.8.** The institution has 30 days from receipt of the Draft Statement to provide a Due Process Response to the Draft Statement. **The 30-Day Due-Process Response must be uploaded to the Accreditation Management System (AMS) to be considered. The response must be self-contained with no links to information outside of the uploaded file. Information stored outside of AMS will not be considered. If the program is planning on making a request to**

**submit Post 30-Day Due Process Information (See I.E.10) the 30-Day Due-Process response must describe what progress has been made toward resolving the shortcoming(s), and additional information, if any, the program is planning to provide to show the shortcoming(s) has been resolved. It must also indicate when the program expects this additional information to be submitted.**

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

**I.D.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.

### **I.E. Program Reviews**

**I.E.1.** Reviews are conducted to verify that a program is in compliance with the appropriate accreditation criteria, policies, and procedures. In order for a program to be accredited, all paths to completion of the program must satisfy the appropriate criteria.

#### **I.E.2. Types of Review**

**I.E.2.a.** A Comprehensive Review addresses all applicable criteria, policies, and procedures.

**I.E.2.a.(1)** A Comprehensive Review consists of:

**I.E.2.a.(1)(a)** The examination of a Self-Study Report prepared by the program and

**I.E.2.a.(1)(b)** An on-site review by a team.

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

**I.E.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 I.H.

**I.E.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.

**I.E.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.

**I.E.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.

**I.E.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 review cycle.

**I.E.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.

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

**I.E.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.

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

**I.E.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

**I.E.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.

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

**I.E.2.c.** ABET reserves the right to reschedule, cancel, or otherwise reconfigure any scheduled **on-site** visit in order to protect the health, safety, and welfare of ABET's volunteer experts.

**I.E.2.c.(1)** The decision to reschedule, cancel, or otherwise reconfigure a scheduled on-site visit in order to protect the health, safety, and welfare of ABET's volunteer experts is made by ABET Headquarters staff.

**I.E.2.c.(2)** An Initial Program Review cannot be reconfigured and must be either rescheduled or cancelled.

**I.E.2.c.(3)** Any Comprehensive Review that follows a reconfigured Comprehensive Review cannot be reconfigured.

**I.E.2.c.(4)** In a case where an on-site Comprehensive Review subsequent to a reconfigured Comprehensive Review cannot be conducted to protect the health, safety, and welfare of ABET's volunteer experts, the Comprehensive Review must be rescheduled or cancelled.

**I.E.2.c.(4)(a)** In the case where an on-site Comprehensive Review subsequent to a reconfigured Comprehensive Review is cancelled, the program may request an extension of accreditation as described in Section I.H [APPM I.H.].

**I.E.2.c.(4)(b)** In the case where an on-site Comprehensive Review subsequent to a reconfigured Comprehensive Review is cancelled and a program does not seek extension of accreditation or the maximum extension of accreditation has concluded, accreditation of the program will lapse.

**I.E.2.c.(5)** Any request for variance of requirements in I.E.2 must be made electronically in writing by the institutional administrative officer responsible for ABET accredited programs to ABET's Chief Accreditation Officer (CAO) within 30 business days of receiving official notification of the decision to reschedule, cancel, or otherwise reconfigure a scheduled on-site visit. The request must include detailed rationale for the request. Upon receipt, the request will be reviewed by both the executive committee of the appropriate commission and ABET Headquarters staff



**within 15 business days. A decision will be provided within 30 days; that decision will be final.**

**I.E.3. Final Preparation for On-Site Review**

**I.E.3.a.** Submittal of records of academic work- Prior to arriving on-site, the team will request official records of academic work of the most recent graduates from each program. Each program being evaluated will provide official records of academic work with associated worksheets and any guidelines used by the advisors.

**I.E.3.b.** Additional Information – Prior to arriving on-site, the team may request additional information that it deems necessary for clarification.

**I.E.4. On-Site Review – ABET conducts an on-site review to assess factors that cannot be adequately described in the Self-Study Report.**

**I.E.4.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.

**I.E.4.a.(1)** Team chairs will typically be current members of the appropriate commission. Program evaluators will typically be selected from the approved list maintained, in consultation with its Cooperating Societies, by the applicable ABET Member Society designated as Lead for that curricular area.

**I.E.4.a.(2)** In the case where a program name requires a joint review by two or more commissions, there typically will be a team chair from each appropriate commission and one program evaluator for each appropriate set of program criteria.

**I.E.4.a.(3)** 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.

**I.E.4.a.(4)** 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.

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

**I.E.4.a.(5)(a)** A very high degree of overlap between two programs being reviewed.

**I.E.4.a.(5)(b)** A simultaneous or joint review by two or more commissions.

**I.E.4.a.(5)(c)** A program with multiple sites or nontraditional delivery method.

**I.E.4.a.(5)(d)** A single associate-level program.

**I.E.4.a.(5)(e)** An Interim Review with a very limited focus.

**I.E.4.a.(5)(f)** A single program seeking reaccreditation.

**I.E.4.a.(6)** A review team may include observers at the discretion of the team chair and the institution. All observers are subject to ABET's Confidentiality and Conflict of Interest policies (See [APPM Section II.A.](#) and [Section II.B.](#)). Observers are typically:

**I.E.4.a.(6)(a)** Newly trained program evaluators from ABET Member Societies,

**I.E.4.a.(6)(b)** Members of State Boards of Licensure and Registration, or

**I.E.4.a.(6)(c)** Representatives from ABET's international accrediting partners.

**I.E.5.** 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:

**I.E.5.a.** Interview faculty, students, administrators, and staff to obtain an understanding of program compliance with the applicable criteria, policies, and any specific issues that arise from the examination of the Self-Study Report and from the on-site review.

**I.E.5.b.** Examine the following:

**I.E.5.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.

**I.E.5.b.(2)** Materials – Evaluators will review materials that are sufficient to demonstrate that the program is in compliance with the applicable criteria and policies. Much of this information should be incorporated into the Self-Study Report (see **I.D.1.f**); additional evidence of program compliance may be made available to evaluators prior to and during the visit, using an on-line storage location. The program should make the following on-site materials available to the team during the visit, without duplicating materials provided in the Self-Study Report.

**I.E.5.b.(2)(a)** Materials addressing issues arising from the team's review of the Self-Study Report or on-line instructional materials

**I.E.5.b.(2)(b)** Documentation of actions taken by the program after submission of Self-Study Report as being available for review during the visit

**I.E.5.b.(2)(c)** Materials necessary for the program to demonstrate compliance with the criteria and policies

**I.E.5.b.(2)(d)** Representative examples of graded student work including, when applicable, major design or capstone projects

**I.E.5.b.(3)** Evidence that the program educational objectives (PEOs) stated for each program are based on the needs of the stated program constituencies.

**I.E.5.b.(4)** Evidence of a documented, systematically utilized, and effective process, involving constituents, for periodic review of the PEOs stated for each program.

**I.E.5.b.(5)** Evidence of the assessment, evaluation, and attainment of student outcomes (SOs) for each program.

**I.E.5.b.(6)** Evidence of actions taken to improve the program.

**I.E.5.b.(7)** Evidence of curricular topic coverage as specified in general and applicable program criteria.

**I.E.5.b.(8)** Student support services to confirm adequacy of services appropriate to the institution's mission and the PEOs and SOs.

**I.E.5.b.(9)** 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.

**I.E.5.c.** Present the team's preliminary 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. The team's findings will be appropriately refined and revised in subsequent process steps as described later in this section.

**I.E.5.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 presentation at the Exit Meeting or in the PAFs.

**I.E.5.d.(1)** For the purpose of continuous improvement, a Member Society may require that its program evaluators, whether veteran or newly trained, provide to the society copies of the PEV Report Form, the PEV Worksheet (pre- and post- visit), and the Program Audit Form (PAF).

**I.E.6.** Effective Date of Initial Accreditation – For a program obtaining initial accreditation, the accreditation normally will apply to all students who graduated from the program no earlier than the academic year prior to 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. In order for a program to be considered for retroactive accreditation two academic years prior to the on-site review, the program must inform the ABET team chair and the program reviewer prior to the on-site review. The program must also provide the following additional information to the review team:

**I.E.6.a.** Documentation in the Self-Study Report that no changes that potentially impact the extent to which an accredited program satisfies ABET accreditation criteria and policies have occurred during the two academic years prior to that of the initial review.

**I.E.6.b.** Records of academic work and sample student work for both academic years prior to that of the initial review.

**I.E.7.** Interim Review

**I.E.7.a.** Types of Interim Reviews – There are two types of interim reviews:

**I.E.7.a.(1)** Those that do not require an on-site review (resulting from an Interim Report or Show Cause Report action), and

**I.E.7.a.(2)** Those that require an on-site review (resulting from an Interim Visit or Show Cause Visit action).

**I.E.7.b.** Composition of Interim Review Team

**I.E.7.b.(1)** If an on-site review is not required, a team chair will typically review an Interim Report or a Show Cause Report.

**I.E.7.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.

**I.E.7.b.(2)(a)** The minimum team size for an Interim Review following a Show Cause Visit action is three persons.

**I.E.8.** 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.

**I.E.8.a.** The statement to each program will typically include the following:

**I.E.8.a.(1)** Findings of Fact – A finding of fact indicates a program characteristic that exists and is verifiable through the review process.

**I.E.8.a.(2)** Findings of shortcomings:

**I.E.8.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.

**I.E.8.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.

**I.E.8.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.

**I.E.8.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.

**I.E.9. 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.

**I.E.9.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.

**I.E.9.b.** All unresolved shortcomings will be evaluated by the appropriate commission at the time of the next review.

**I.E.10. Post 30-Day Due-process Information** – **After** the program has submitted a **30-Day Due-Process** response within the 30-day due-process period, **describing actions taken to address the shortcomings identified in the Draft Statement, it may request permission to provide additional information at a later date.** The team chair may, at his or her discretion, in consultation with the commission leadership, **and after reviewing the due-process response already submitted, agree to** accept additional information after the 30-day due-process period. **Post 30-Day Due Process Information will only be permitted in situations where the team chair judges** such information **may have a material impact on the accreditation action resulting from the review. Additionally, post 30-day submissions** must be limited to information that was judged by the team chair to be not available at the time of the 30-day due-process period. **It must be uploaded to the Accreditation Management System (AMS) in a single self-contained file with no active links to information outside of the upload file** and must be received in time for proper consideration prior to the July Commission Meeting. **Due to the limited amount of team time for review, only reasonable amounts of additional information can be considered.**

**I.E.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 July Commission Meeting are incorporated.

**I.E.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.

**I.E.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.

**I.E.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.

**I.E.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.

**I.E.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 SCR or SCV action for the same Deficiency(ies).

**I.E.12.d.(1)** The institution must provide, within 60 days of receipt of the Final Statement to the Institution, a summary to the students and faculty of ABET's reasons for the Show Cause Report accreditation action and specific corrective actions the program intends to implement to maintain accreditation.

**I.E.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 SCR or SCV action for the same Deficiency(ies).

**I.E.12.e.(1)** The institution must provide, within 60 days of receipt of the Final Statement to the Institution, a summary to the students and faculty of

ABET's reasons for the Show Cause Visit accreditation action and specific corrective actions the program intends to implement to maintain accreditation.

**I.E.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.

**I.E.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.

**I.E.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.

**I.E.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. The program may request an immediate re-visit or reconsideration as described in [Section I.J.](#) The program also may appeal the Not to Accredite action ([APPM Section II.D](#)).

**I.E.12.i.(1)** An Executive Summary of the findings leading to the not-to-accredite action will be provided to the institution along with the Final Statement.

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

**I.E.12.i.(3)** 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 accredite” action. If prior to the “not to accredite” action the program was accredited, ABET will



further require the institution to remove the accreditation designation from all program publications, to include electronic and print, as stated in **I.A.4.**

**I.E.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.

**I.E.12.j.(1)** The duration of this action may be up to three years.

## **I.F. Changes During the Period of Accreditation**

**I.F.1.** The institutional administrative officer responsible for ABET accredited programs will submit to ABET a Notification of Program Changes (NPC) during the period of accreditation when the program changes potentially impact the extent to which an accredited program satisfies ABET accreditation criteria or policies. A third party may also notify ABET of a change to an accredited program. The institution will complete an NPC electronically, providing ABET with detailed information about the nature of each change and its impact on the accredited program. In the case of a third-party notification, ABET will notify the institutional administrative officer of the change notification. Such changes include, but are not limited to:

**I.F.1.a.** Changes related to criteria

- I.F.1.a.(1)** Students
- I.F.1.a.(2)** Program Educational Objectives
- I.F.1.a.(3)** Student Outcomes
- I.F.1.a.(4)** Continuous Improvement
- I.F.1.a.(5)** Curriculum
- I.F.1.a.(6)** Faculty
- I.F.1.a.(7)** Facilities
- I.F.1.a.(8)** Institutional Support
- I.F.1.a.(9)** Program Criteria
- I.F.1.a.(10)** EAC – General Criteria for Master’s Level Programs

**I.F.1.b.** Changes related to ABET policy

- I.F.1.b.(1)** Program name
- I.F.1.b.(2)** Methods or Venues of Program Delivery
- I.F.1.b.(3)** Institutional Authority to Provide Post-secondary Education
- I.F.1.b.(4)** Status of Institutional Accreditation

**I.F.1.b.(5)** Decision to Terminate a Program's Accreditation (Refer to [Section I.G.](#))

**I.F.1.b.(6)** Decision to Terminate an Accredited Program (Refer to [Section I.G.](#))

**I.F.2.** ABET will review the information provided by the institution and any third party as follows: a. The ABET Director for Accreditation Operations, in consultation with the appropriate commission chair(s) will select two team chairs (reviewers) from each applicable commission to review the information provided by the program or the third party. The assigned reviewers shall not have a Conflict of Interest (COI) for the institution before the assignment and shall have a COI for the institution annotated to them per ABET's COI policy (Refer to [APPM Section II.A.](#))

**I.F.2.a.** The reviewers shall review the documentation provided and make recommendations to the Commission Executive Committee within 60 business days.

**I.F.2.b.** The reviewers may request additional information through ABET Headquarters.

**I.F.2.c.** The reviewers will recommend with rationale either: 1) that accreditation be maintained for the duration of the current accreditation period, or 2) that an immediate focused on-site review at the program's expense be required to determine the accreditation status of the changed program. b. The Commission Executive Committee will review the recommendations and make one of the following decisions:

**I.F.2.d.** The program must provide specific additional information.

**I.F.2.e.** Accreditation will be maintained for the duration of the current accreditation period.

**I.F.2.f.** An immediate focused on-site review at the program's expense is required to determine the accreditation status of the changed program.

**I.F.2.f.(1)** Based on the recommendation coming from the immediate focused on-site review, the accreditation status of the program may be changed upon vote of the Commission's Executive Committee, selecting from all applicable accreditations (Refer to [I.E.12](#))

**I.F.2.f.(1)(a)** ABET will notify the institution of the commission's decision.

**I.F.2.f.(1)(b)** 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 [II.5](#) and [II.6](#)).

### **I.G. Program Accreditation Termination**

**I.G.1.** An institution may decide to terminate ABET accreditation for a program. Accreditation termination can occur under the circumstances listed below. The termination could be effective either prior to, synchronous with, or shortly after the program's accreditation expiration date. In the case where the program's accreditation termination date is beyond the expiration date of the current period of accreditation, extension of accreditation up to three years may be granted.

**I.G.1.a.** Sunset – Occurs in the cases where the program is continuing, but the program no longer desires to be accredited or the program has been discontinued prior to the expiration date of the current period of accreditation.

**I.G.1.b.** Lapse – Occurs in the cases where the program is continuing, but the program no longer desires to be accredited or the program is being removed from an institution's offerings synchronous with the expiration date of the current period of accreditation.

**I.G.1.c.** Extend – Occurs in the case where the program's requested accreditation termination date is beyond the expiration date of the current period of accreditation. The program may request an extension of accreditation up to three years to cover students remaining in the program.

**I.G.2.** The institutional administrative officer responsible for ABET accredited programs will submit a Request for Termination (RFT) through the institution's Notification of Program Changes (NPC) indicating the decision to terminate the program's accreditation. In all cases the program will submit a Termination Plan, describing in detail the extent to which the accredited program continued to, is continuing to, or will continue to satisfy ABET criteria and policies until the termination of accreditation.

**I.G.2.a.** The Termination Plan should include the following information:

**I.G.2.a.(1)** Name of Institution;

**I.G.2.a.(2)** Name of Program;

**I.G.2.a.(3)** The number of students remaining in the program with the expected date of graduation for the last student for programs where accreditation is lapsing at the time of or to be extended beyond the expiration date of the current period of accreditation.

**I.G.2.a.(4)** Copies of all notices to students in the program: regarding the discontinuation of the program;

**I.G.2.a.(4)(a)** For Sunset Accreditation: regarding the discontinuation of the program's accreditation;

**I.G.2.a.(4)(b)** For Lapse Accreditation: regarding the discontinuation of the program and/or its accreditation;

**I.G.2.a.(4)(c)** For Extend Accreditation: regarding the discontinuation of the program;

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

**I.G.2.a.(6)** The names of the faculty members who taught, are teaching or will teach 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 plan;

**I.G.2.a.(7)** Biographical data sheets for all persons included in (5) and (6) above;

**I.G.2.a.(8)** Description of how the program continued, is continuing, or will continue to support student attainment of the Student Outcomes in view of each major change/substitution made or being made in the curriculum through to the termination date of the program's accreditation;

**I.G.2.a.(9)** Descriptions of how instructional laboratory facilities were maintained are being maintained, or will be maintained through to the termination date of the program's accreditation.

**I.G.2.a.(10)** Descriptions of how instructional laboratory facilities were maintained, are being maintained or will be maintained for through to termination date of the program's accreditation.

**I.G.2.a.(11)** Descriptions of advising processes that were, are or will be available to students remaining in the program; and

**I.G.2.a.(12)** Descriptions of any remedial actions taken with respect to any Weaknesses remaining at the time of the last accreditation review.

**I.G.3.** The ABET Director of Accreditation Operations, in consultation with the appropriate commission chair(s), will select two team chairs (reviewers) from each applicable commission to review the Termination Plan provided by the program. The assigned reviewers shall not have a Conflict of Interest (COI) for the institution before the assignment and shall have a COI for the institution annotated to them per ABET's COI Policy (Refer to [APPM Section II.A.](#))

**I.G.3.a.** The selected reviewers will review the Termination Plan provided and make recommendations to the Commission Executive Committee within 60 business days.

**I.G.3.b.** The reviewers may request additional information through ABET Headquarters

**I.G.3.c.** The reviewers will recommend with rationale either:

**I.G.3.c.(1)** confirmation of the expiration date as requested by the program;

**I.G.3.c.(2)** an alternative expiration date of accreditation from that requested by the program; or

**I.G.3.c.(3)** an on-site termination review at the program's expense be required to determine the expiration date of accreditation of the program.

**I.G.4.** The Commission Executive Committee will review the recommendations and make of one the following decisions:

**I.G.4.a.** The program must provide specific additional information.

**I.G.4.b.** The expiration date of the program's accreditation.

**I.G.4.c.** An immediate on-site termination review at the program's expense is required to determine the expiration date of the program's accreditation.

**I.G.4.c.(1)** Based on the recommendation from the immediate on-site termination review, the date of the expiration of accreditation may be changed upon vote of the Commission's Executive Committee.

**I.G.5.** ABET will notify the institution of the commission's decision.

**I.G.6.** If an immediate 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 (Refer to Section I.I.5. and 6.).

## I.H. Continuation of Accreditation

From time to time programs may find it necessary to seek an extension of accreditation outside a scheduled review.

**I.H.1.** The program must submit an official request to ABET with a detailed rationale for the request.

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

**I.H.2a.** 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.

**I.H.2.a.(1)** Length of continuation is limited to one year.

**I.H.2.a.(2)** General review year would not change.

**I.H.2b.** Desire of an institution to synchronize general reviews conducted by different commissions.

**I.H.2.b.(1)** Length of continuation is limited to two years.

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

**I.H.2.b.(3)** General review year would change accordingly.

**I.H.2c.** Desire of ABET to change the general review year to achieve a better balance in commission workload.

**I.H.2.c.(1)** The change must be agreeable to the institution.

**I.H.2.c.(2)** Length of continuation is limited to one year.

**I.H.2.c.(3)** General review year would change accordingly.

## I.I. 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:

- I.I.1.** ABET will notify the institution, providing a comprehensive document showing the reasons why revocation is being considered.
- I.I.2.** The institution will be asked to provide an analysis and response to the reasons provided by ABET.
- I.I.3.** An on-site review may be scheduled to evaluate the reasons provided by ABET.
- I.I.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.
- I.I.5.** ABET will promptly notify the institution of such revocation. The notice will be accompanied by a supporting statement detailing the cause for revocation.
- I.I.6.** Revocation for Cause constitutes a Not to Accredite (NA) action. The program may request an immediate re-visit or reconsideration as described in Section I.K. below. The program also may appeal the revocation as described in [APPM Section II.D.](#)
- I.I.7.** ABET requires the institution to provide documentation that the program has notified, immediately and formally, students and faculty affected by the revocation of the program's accredited status. In accordance with [I.A.4](#), the program will remove the accreditation designation from all print and electronic publications.

#### **I.J. Immediate Re-Visit and Reconsideration of a Not-to-Accredite Action**

- I.J.1.** In lieu of an appeal (see [APPM Section II.D.](#)), a program that received a not-to-accredite action may request an immediate revisit or a reconsideration of the not-to-accredite action.
  - I.J.1.a.** A request for an immediate revisit or a reconsideration of the not-to-accredite action must be made in writing (electronically) by the institutional administrative officer responsible for ABET accredited programs to ABET's Chief Accreditation Officer (CAO) within 30 business days of receiving official notification of the not-to-accredite action.
- I.J.2.** Immediate Revisit
  - I.J.2.a.** A program that has received a not-to-accredite 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.
  - I.J.2.b.** A request for an immediate revisit must include a report detailing the actions already taken to eliminate the deficiency(ies) cited in ABET's Final 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.

Substantive improvements and corrective actions taken prior to the request and documented by the institution will be considered. The institution is cautioned, however, that the extent to which corrective actions have not been made effective may make a revisit unproductive.

**I.J.2.c.** The CAO will acknowledge receipt of the immediate revisit request within five business days and forward the request to the appropriate commission's executive committee for consideration.

**I.J.2.d.** The executive committee of the appropriate commission shall accept or deny the program's request within 15 business days of receipt of the request from the CAO. Acceptance or denial of the request will be based solely on the report and supporting documentation supplied by the program in accordance with the nature of the deficiency(ies) which led to the not-to-accredit action.

**I.J.2.e.** If the executive committee of the appropriate commission judges that an immediate revisit is not warranted, the CAO will inform the program that the request is denied with a statement of reasons and a reiteration of the program's right to pursue an appeal of the not-to-accredit action (See [APPM Section II.D.](#)).

**I.J.2.f.** If the executive committee of the appropriate commission grants the immediate revisit request, the program 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.

**I.J.2.g.** The immediate revisit will be conducted as a focused visit on the deficiency(ies) that led to the not-to-accredit action. The visit will be conducted according to the policies and procedures detailed in [Section I.E.](#)

**I.J.2.h.** 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.

**I.J.2.i.** The Final Statement to the Institution will be revised and transmitted to the institutional representative(s) within 15 business days of the executive committee's action.

### **I.J.3.** Reconsideration



**I.J.3.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 or the commission failed to conform to ABET's published criteria, policies, or procedures.

**I.J.3.b.** Only conditions known to the commission at the time of the commission's decision will be considered by ABET in the case of a request for reconsideration. No new information may be included.

**I.J.3.c.** A request for reconsideration must include a report specifying the major, documented error of fact or the failure to conform to ABET's published criteria, policies, or procedures and how such errors contributed to the not-to-accredit action, along with substantiating documentation.

**I.J.3.d.** The CAO will acknowledge receipt of the reconsideration request within five business days and forward the request to the appropriate commission's executive committee for consideration.

**I.J.3.e.** The executive committee of the appropriate commission shall accept or deny the program's request within 15 business days of receipt of the request from the CAO. Acceptance or denial of the request will be based solely on the report and supporting documentation supplied by the program.

**I.J.3.f.** If the executive committee of the appropriate commission judges that a reconsideration is not warranted, the CAO will inform the program that the request is denied with a statement of reasons and a reiteration of the program's right to pursue an appeal of the not-to-accredit action. (See [APPM Section II.D.](#))

**I.J.3.g.** If a reconsideration is granted by the executive committee of the appropriate commission, the program 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.

**I.J.3.h.** The executive committee shall have 30 business days to complete the reconsideration.

**I.J.3.i.** If, following reconsideration, the executive committee of the appropriate commission, upon unanimous vote, judges that the program 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.

**I.J.3.j.** The Final Statement to the Institution will be revised and transmitted to the institutional representative(s) within 15 business days of the executive committee's action.

## SECTION II – ABET BOARD OF DIRECTORS POLICIES AND PROCEDURES

### II.A. Conflict of Interest

(Board of Directors Rules of Procedure Section Two)

**II.A.1.** Policy – Service as an ABET Board Director, Board Delegate, Member Society representative to an Area Delegation, on a Committee, Council, or Commission, as a Team Chair or Program Evaluator, Alternate to the Board of Delegates, Area Delegation, or Commission, or ABET staff member creates situations that may result in conflicts of interest or questions regarding the objectivity and credibility of ABET’s 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 or questions regarding the objectivity and credibility of the accreditation process. The intent of this policy is to:

- II.A.1.a.** Maintain credibility in the accreditation process and confidence in the decisions of the Board of Directors, the Board of Delegates, Area Delegations, Committees and Councils, Commissions, Team Chairs, Program Evaluators, and staff members;
- II.A.1.b.** Assure fairness and impartiality in decision-making;
- II.A.1.c.** Disclose real or perceived conflicts of interest; and
- II.A.1.d.** Act impartially to avoid the appearance of impropriety.

### II.A.2. Procedure

**II.A.2.a.** Real or perceived conflicts of interest are defined as a close, active association with a program or institution that is being or has been considered for official action by ABET. These include but are not limited to:

- II.A.2.a.(1)** Employment as faculty, staff, or consultant by the institution or program;
- II.A.2.a.(2)** Discussion or negotiation of employment with the institution or program;
- II.A.2.a.(3)** Attendance as a student at the institution within the past 10 years;

**II.A.2.a.(4)** Award of a degree (may include but not limited to honorary degrees) from the institution;

**II.A.2.a.(5)** An institution or program where a close family relative is, or was, a student or employee within the past 10 years. Close family relatives are defined as grandparents, parents, siblings, spouses/partners, children, grandchildren, stepchildren, or other family members with a relationship similar to those listed;

**II.A.2.a.(6)** Current or past membership on the institution's governing board or any institutional, departmental or program advisory board.

**II.A.2.a.(7)** Current or past paid or unpaid, official or informal relationship or affiliation within the past 10 years with an institution, such as providing significant assistance or review for a program's accreditation preparation, working on a fundraising campaign, being a volunteer club advisor, or similar. This does not include serving on an ABET evaluation team, which is covered in Section II.A.2.b.(1).

**II.A.2.a.(8)** A financial or personal interest.

**II.A.2.a.(9)** Any reason that the individual cannot render an unbiased decision.

**II.A.2.b.** ABET will observe the following procedures:

**II.A.2.b.(1)** ABET will not assign individuals to an evaluation team if they have served as an ABET team member (Team Chair, PEV or Observer) at the institution during any part of the last two institutional general review cycles.

**II.A.2.b.(2)** Individuals representing ABET must decline an assignment for which they have a real or perceived conflict of interest per section II.A.1.

**II.A.2.b.(3)** Editors will not be assigned to edit a statement for an institution where they have been employed, engaged in consulting, or have been on an ABET team (Team Chair, PEV or Observer) during any part of the current institutional general review cycle. Editors must declare any conflicts of interest before the start of the accreditation cycle program assignments.

**II.A.2.b.(4)** Individuals who have been employed at or provided significant consulting services or assistance (paid or unpaid) with a program's accreditation preparation during the period of an accreditation cycle for which

accreditation decisions are under consideration shall declare their conflict of interest and not participate in discussions or vote on any accreditation action.

**II.A.2.c.** Members of the ABET Board of Directors and staff members may observe an accreditation visit, but they are not eligible to serve as Program Evaluators or Team Chairs. Commissioners are not eligible to serve concurrently on the Board of Directors, the Board of Delegates, or Area Delegations; nor are ABET Directors or Delegates eligible to serve concurrently on an ABET Commission. Area Directors, in their role as liaisons to the Commissions, serve as ex-officio, non-voting members of the Commissions.

**II.A.2.d.** A record of real or perceived conflicts of interest will be maintained for all those involved in the accreditation process. Each individual will be provided the opportunity to update this record annually. Each Member Society will have access to its volunteers' records for the purposes of annually updating or removing Program Evaluators from the approved list. The records of conflicts of interest will be used annually in team chair and program evaluator selection.

**II.A.2.e.** All individuals representing ABET must annually review and acknowledge conflict of interest and confidentiality statements indicating that they have read and understand these policies. The policies on conflict of interest and confidentiality will be reviewed at the start of each Board of Directors, Board of Delegates, Area Delegation, and Commission meeting.

**II.A.2.f.** 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.B. Confidentiality**

(Board of Directors Rules of Procedure Section Three)

**II.B.1. Ethical Conduct** – ABET requires ethical conduct by each volunteer and staff member engaged in fulfilling the purposes 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 personnel, including but not necessarily limited to, members of the Board of Directors, Board of Delegates, Area Delegations, Commissions, Committees, Councils, Team Chairs, Program Evaluators, ABET staff, and ad hoc participants in other ABET activities. The information provided by the institution will not be disclosed without specific written authorization of the designated official institution contact.

**II.B.2. Privileged Information** – The contents of all materials furnished for review purposes, from the submission of the Self-Study through the Final Statement completion, and discussion during the Commissions’ 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 referred to ABET headquarters.

**II.B.3. Accredited Program Identifications** – ABET publicly identifies accredited programs that have been accredited and formerly accredited programs that are no longer accredited by ABET.

## **II.C. Code of Conduct**

(Board of Directors Rules of Procedure Section Four A & B)

We are committed to ensure public confidence in STEM professionals, present and future, who strive to make the world a better place. ABET requires that each volunteer and staff member engaged in fulfilling the purposes of ABET commit to exhibiting and promoting the highest standards of professionalism, honesty, and integrity, including compliance with the ABET Constitution, Bylaws, appropriate Rules of Procedure and the Accreditation Policy and Procedure Manual (APPM). The services provided by ABET must be conducted impartially, fairly, and follow best practices for being inclusive and equitable in interactions with others. ABET seeks to promote inclusive, equitable, diverse, and comfortable working environments that facilitate a sense of belonging for everyone, regardless of personal, cultural, or academic backgrounds. We are united by ABET’s values, and we value our unique differences.

**II.C.1. The Code** – All ABET volunteers and staff members commit to the highest ethical and professional conduct and agree:

**II.C.1.a.** To accept responsibility in making all decisions, particularly on accreditation actions, consistent with approved Criteria and the safety, health, and welfare of the public, and to disclose promptly, factors that might endanger the public;

**II.C.1.b.** To perform services only in areas of their competence. All must be willing to accept that mistakes will happen and commit to an intentional and persistent effort to improve the quality of their service, and to give, seek and accept feedback that is clear, respectful and focused on common goals and values;

**II.C.1.c.** To act as faithful agents or trustees of ABET, avoiding real or perceived conflicts of interest whenever possible, disclosing them to affected parties when they do exist and to reject bribery in all forms;

- II.C.1.d.** To keep confidential all matters relating to accreditation decisions unless required by law to disclose information, or unless the public is endangered by doing so;
- II.C.1.e.** To make or issue either public or internal statements only in an objective and truthful manner;
- II.C.1.f.** To conduct themselves honorably, responsibly, ethically, and lawfully so as to enhance the reputation and effectiveness of ABET;
- II.C.1.g.** To report concerns regarding accounting, internal accounting controls, or auditing matters without fear of retaliation, subsequently known as ABET's Whistleblower Policy;
- II.C.1.h.** To treat all persons involved in accreditation activities with fairness and not engage in discrimination or harassment. We encourage inclusive and equitable actions that support the highest levels of collaboration and effective teamwork. ABET does not allow the use of exclusionary or threatening language and encourages all persons to be mindful of potentially hurtful words. Using terms that are sexist, racist, ableist or exclusionary in nature to address an individual or a group of individuals will not be tolerated;
- II.C.1.i.** To assist colleagues in continuous improvement efforts and in following this code of conduct;
- II.C.1.j.** To support a mechanism for the prompt and fair adjudication of alleged violations of this code.

**II.C.2.** Guidelines for Interpretation of the Code of Conduct – The ABET guidelines for interpretation of the Code of Conduct connect the principles expressed in the Code of Conduct with the day-to-day activities and decisions faced by ABET volunteers and staff. The 10 elements of the Code (numbered a-j in Section II.C.2.) are repeated below followed by specific Guidelines for their interpretation. All ABET volunteers and staff members agree:

**II.C.2.a.** To accept responsibility in making accreditation decisions consistent with the Code of Conduct, approved Criteria and the safety, health, and welfare of the public, and to disclose promptly factors that might endanger the public.

**II.C.2.a.(1)** All those involved in ABET activities shall recognize that the lives, safety, health, and welfare of the general public are dependent upon a diverse pool of qualified graduate professionals.

**II.C.2.a.(2)** Programs shall not receive accreditation that do not meet the Criteria.

**II.C.2.a.(3)** If ABET volunteers or staff members have knowledge of, or reason to believe that, an accredited program may be non-compliant with the appropriate Criteria, they shall present such information to the ABET Executive Director in writing and shall cooperate with ABET in furnishing such further information or assistance as may be required.

**II.C.2.b.** To perform services only in areas of their competence.

**II.C.2.b.(1)** All those involved in ABET activities shall undertake accreditation assignments only when qualified by education, training and/or experience.

**II.C.2.c.** To act as faithful agents or trustees of ABET, avoiding real or perceived conflicts of interest whenever possible, disclosing them to affected parties when they do exist.

**II.C.2.c.(1)** All those involved in ABET activities shall avoid all known or perceived conflicts of interest when representing ABET in any situation.

**II.C.2.c.(2)** They shall disclose all known or potential conflicts of interest that could influence or appear to influence their judgment or the quality of their services.

**II.C.2.c.(3)** They shall not serve as a consultant in accreditation matters to a program or institution while serving as a Director, Commissioner, or Alternate Commissioner. Delegates, Alternate Delegates, Team Chairs (not Commissioners) and Program Evaluators may do so. Those who have or will serve as consultants must disclose this to ABET per the ABET Conflict of Interest Policy and may not participate in any deliberations regarding ABET matters for that institution.

**II.C.2.c.(4)** They shall not undertake any assignments or take part in any discussions that would knowingly create a potential conflict of interest between themselves and ABET or between themselves and the institutions seeking programmatic accreditation.

**II.C.2.c.(5)** They shall not solicit or accept gratuities, directly or indirectly, from programs under review for accreditation.



**II.C.2.c.(6)** They shall not solicit or accept any contribution, directly or indirectly, to influence the accreditation decision of programs.

**II.C.2.d.** To keep confidential all matters relating to accreditation decisions unless; required by law to disclose information; directed to disclose by ABET with the consent of the institutions/programs involved; or unless the public is endangered by not disclosing.

**II.C.2.d.(1)** All those involved in ABET activities shall treat information used in the course of their assignments as confidential, and shall not use such information as a means of making personal profit under any circumstances.

**II.C.2.e.** To make or issue either public or internal statements only in an objective and truthful manner.

**II.C.2.e.(1)** When speaking on behalf of ABET, volunteers and staff are only authorized to reiterate official positions, policies and procedures of ABET.

**II.C.2.e.(2)** All those involved in ABET activities shall be objective and truthful in reports, statements, or testimony. They shall include all relevant and pertinent information in such reports, statements, or testimony and shall avoid any act tending to promote their own interest at the expense of the integrity of the process.

**II.C.2.e.(3)** They shall issue no statements, criticisms, or arguments on accreditation matters which are inspired or paid for by an interested party, or parties, unless they preface their comments by identifying themselves, by disclosing the identities of the party or parties on whose behalf they are speaking, and by revealing the existence of any financial interest they may have in matters under discussion.

**II.C.2.e.(4)** They shall not use statements containing a material misrepresentation of fact or omitting a material fact.

**II.C.2.e.(5)** They shall admit their own errors when proven wrong and refrain from distorting or altering the facts to justify their mistakes or decisions.

**II.C.2.f.** To conduct themselves honorably, responsibly, ethically, and lawfully so as to enhance the reputation and usefulness of ABET.

**II.C.2.f.(1)** All those involved in accreditation activities shall refrain from any conduct that deceives the public.

**II.C.2.f.(2)** They shall not falsify or permit misrepresentation of their or their associates' academic or professional qualifications.

**II.C.2.f.(3)** They shall not maliciously or falsely, directly or indirectly, injure the professional reputation, prospects, practice or employment of another. If they believe others are guilty of unethical or illegal behavior, they shall present such information to the proper authority for action.

**II.C.2.g.** To report concerns regarding accounting, internal accounting controls, or auditing matters without fear of retaliation, subsequently known as ABET's Whistleblower Policy.

**II.C.2.g.(1)** The Whistleblower Policy is intended to encourage and enable ABET volunteers and staff to report concerns regarding questionable or improper accounting, internal accounting controls, and auditing matters (collectively: accounting matters).

**II.C.2.g.(2)** Concerns involving accounting matters should be reported directly to the Chair of the ABET Board of Directors Audit Committee, and may be reported verbally, on a confidential basis, or anonymously.

**II.C.2.g.(3)** The Chair of the Audit Committee shall immediately notify the Audit Committee members, the ABET President, and the Executive Director that a concern has been received. Unless the concern is reported anonymously, the Chair will also acknowledge receipt of the concern within five (5) business days, if possible. The Audit Committee will promptly investigate all concerns and recommend appropriate corrective action to the ABET Board of Directors, if warranted by the investigation. Action taken must include a conclusion and, except for concerns reported anonymously, follow-up with the complainant for complete closure of the concern.

**II.C.2.g.(4)** If, as part of its investigation, the Audit Committee finds evidence of a Code violation by an ABET volunteer, that individual will be notified and asked to respond to the issues raised as per Section Four C.1.c. of the ABET Board of Directors Rules of Procedure. Subsequently the procedures of Section Four C.1 will be followed. If the violation is by an ABET staff member, the Executive Director will be notified, and the procedures in the Employee Operations and Procedures Manual will be followed. The Audit Committee has the authority to retain outside legal counsel, accountants, private investigators, or other resources deemed necessary to conduct a full and complete investigation of the allegations.

**II.C.2.g.(5)** No individual who, in good faith, reports a concern shall be subject to harassment, retaliation, or other adverse employment or volunteer consequence for reporting that concern. A volunteer or employee who retaliates against someone who has reported a concern in good faith is subject to discipline, up to and including dismissal as a volunteer or employee according to Section Four C. of the Board of Directors Rules of Procedure or the Employee Operations and Procedures Manual. If the whistleblower believes that s/he is experiencing retaliation, s(he) should submit a Code violation complaint alleging such retaliation.

**II.C.2.g.(6)** Anyone reporting a concern must act in good faith and have reasonable grounds for believing the information disclosed indicates an improper accounting, internal controls, or auditing practice. The act of making allegations maliciously, recklessly, or with the foreknowledge that the allegations are false, will be viewed as a serious offense and may result in discipline, up to and including dismissal from the volunteer position or termination of employment if an aggrieved individual files a Code violation complaint.

**II.C.2.g.(7)** Disclosure of reports of concerns to individuals not involved in the investigation will also be viewed as a serious offense and may result in a Code violation finding.

**II.C.2.h.** To treat all persons with fairness.

**II.C.2.h.(1)** All ABET volunteers and staff shall support the development of inclusive and equitable environments that support the involvement of all persons involved in accreditation activities regardless of personal, cultural and academic backgrounds.

**II.C.2.h.(2)** All ABET volunteers and staff are committed to actively engaging and involving as many individuals as necessary in discussions, decisions, and events.

**II.C.2.i.** To assist colleagues and co-workers in their professional development and to support them in following this Code of Conduct. All ABET volunteers and staff shall be mindful of colleagues in need of assistance.

**II.C.2.i.(1)** ABET will provide broad dissemination of this Code of Conduct to its volunteers, staff, representative organizations, and other stakeholders impacted by accreditation.

**II.C.2.i.(2)** ABET will provide training in the use and understanding of the Code of Conduct for all new volunteers and staff members.

**II.C.2.i.(3)** All those involved in accreditation matters shall continue their professional development throughout their service with ABET and shall provide/participate in opportunities for the professional and ethical development of all stakeholders.

**II.C.2.j.** It is the policy of ABET to review all complaints received from any source, including students, against ABET that are related to compliance with ABET's Constitution, Bylaws, appropriate Rules of Procedure and APPM, and to resolve any such complaints in a timely, fair, and equitable manner. Section Four C. of the Board of Directors Rules of Procedure specifies the process for adjudicating alleged violations. Furthermore, it is the policy of ABET to retain all documentation associated with any such complaint received for a period of not less than five years.

## **II.D. Appeal of Accreditation Action**

(Board of Directors Rules of Procedure Section Five)

**II.D.1.** Appeals may be made only in response to not-to-accredit (NA) actions. Further, appeals 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.

**II.D.2.** If a commission's executive committee has already considered and denied a request from the program for a reconsideration or immediate revisit, the program may appeal the original not-to-accredit action.

**II.D.3.** A notice of appeal must be submitted electronically in writing by the chief executive officer of the program's institution to the ABET Executive Director within 30 business days of receiving notification of the not-to-accredit action. This submission must include the reasons why, with detailed evidence, 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.D.4.** Upon receipt of a notice of appeal, the ABET President will notify the ABET Board of Directors of the appeal and will select three or more members or past members of the Board of Directors, or members or past members of the Board of Delegates, to serve as an appeal

committee. Current members of the ABET staff, the ABET Foundation staff, and of the ABET Foundation volunteer leadership are ineligible to serve on 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 the program submitting the appeal, unless said program is under the curricular responsibility of an ABET commission. The ABET President shall designate one of the committee members as chair of the committee.

**II.D.5.** The appeal committee will be provided with all documentation that has been made available to the program during the different phases of the accreditation cycle, including the program's due process response, any supplemental information, and other materials submitted by the program or the commission.

**II.D.6.** The program is required to submit a response (normally one page) to the commission's executive summary previously sent to the program. The program 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.D.7.** 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.D.8.** The respective commission, through its executive committee, may submit written materials beyond the Final Statement to the Institution and the Executive Summary for clarification of its position. Such materials must be provided to the program and appeal committee at least 60 business days prior to the date of the committee's meeting. Any rebuttal by the program must be submitted to the committee at least 30 business days prior to the committee meeting.

**II.D.9.** The appeal committee will meet and, on behalf of the ABET Board of Directors, consider only the written materials submitted by the program and the respective commission in arriving at its determination. Representatives from the institution, the program, 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 findings and its 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.D.10.** The institution, the program, and the Commission will be notified in writing of this decision, and the basis for the decision, by the Executive Director within 15 business days of the final decision.

## II.E. Complaints

(Board of Directors Rules of Procedure Section Seventeen)

**II.E.1.** Policy – 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 policies, 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 years for any complaints received against ABET itself.

**II.E.1.a.** ABET will not pursue complaints that are not made in writing or that are anonymous. The receipt of a complaint will be acknowledged to the complainant within 10 business days.

**II.E.1.b.** ABET cannot assume authority for enforcing the policies of programs or institutions regarding faculty member, professional staff, or student rights. ABET does not adjudicate, arbitrate, or mediate individual grievances against a program or institution.

### II.E.2. Procedure

**II.E.2.a.** Complaints will be reviewed initially by the ABET Executive Director, acting as an agent of the ABET Board of Directors, or by his/her staff designee.

**II.E.2.b.** If the complaint is not within the purview of ABET, the complainant will be notified within 10 business days and no further action will be taken.

**II.E.2.c.** If the complaint appears to warrant further investigation, the Executive Director will follow procedures appropriate to the nature of the complaint. If it appears that an ABET representative or an individual working on behalf of ABET may have violated ABET’s Code of Conduct, the Executive Director will forward a copy of the complaint within 10 business days of receipt of receipt of the complaint to the Board of Directors Audit Committee for adjudication according to the Board of Directors Rules of Procedure Section Four. If the complaint is against an institution or its accredited programs, the Executive Director will follow the procedures described in the Board of Directors Rules of Procedure Section Seventeen B.4 (**II.E.2.d** in current document). If the complaint is against ABET, the Executive Director will follow the procedure described in Board of Directors Rules of Procedures Section Seventeen B.5 (**II.E.2.e** in current document). The complainant will be notified within 10 business days of the receipt of the

complaint that the complaint falls within the purview of ABET and the next steps in the investigative process.

**II.E.2.d. Complaints To ABET Against an Institution or its Accredited Programs**

**II.E.2.d.(1)** If the complaint appears to warrant further investigation, the Executive Director will forward a copy of the complaint to the principal administrative officers of the institution within 10 business days of receipt of the complaint. The Executive Director will request an institutional response within 20 business days receipt of the request. In the event that an institutional response is not received by ABET within 20 business days of the request for the response, ABET may initiate further proceedings as circumstances warrant, up to and including revocation of accreditation.

**II.E.2.d.(2)** Upon receipt of the institutional response, the Executive Director will forward a copy of the complaint and the institutional response to the executive committee(s) of the appropriate commission(s). The executive committee(s) will review the institutional response within 20 business days of receipt of the complaint and the institutional response. If more than one executive committee is involved, those committees will work together, as appropriate, to review the institutional response. The commission chair(s) will provide the Executive Director with the executive committee(s)' determination, including a brief rationale for the determination, within 20 business days of receipt of the forwarded information.

**II.E.2.d.(3)** If the executive committee(s) determine(s) that the institutional response satisfactorily addresses the issue or issues raised in the complaint, the matter will be considered closed. Within 10 business days of receipt of the executive committee(s)' determination, the Executive Director will inform the complainant and the institution in writing of the determination and the matter will be closed.

**II.E.2.d.(4)** If the executive committee(s) determines(s) that the institutional response does not satisfactorily address the issue or issues raised in the complaint, ABET may initiate further proceedings as circumstances warrant, up to and including revocation of accreditation. Within 10 business days of receipt of the executive committee(s)' determination, the Executive Director will inform the complainant and the institution in writing of the determination.

**II.E.2.d.(5)** 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.E.2.e. Complaints Against ABET**

**II.E.2.e.(1)** 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(s) of the appropriate commission(s) or to the Board of Directors within 10 business days of receipt of the complaint.

**II.E.2.e.(2)** 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 20 business days of receipt of the request.

**II.E.2.e.(3)** Upon receipt of the individual's response, the appropriate commission executive committee(s) or the Board of Directors will make a determination as to whether a violation occurred or not within 20 business days of receipt of the response. The commission chair(s) or the ABET President will provide the Executive Director with the executive committee(s)' or the Board of Directors', respectively, determination including a brief rationale for the determination, within 20 business days of receipt of the individual's response.

**II.E.2.e.(4)** If the determination is that no violation has occurred, the matter will be considered closed. The Executive Director will inform the complainant of the determination in writing within 10 business days of receipt of the determination and the matter will be closed.

**II.E.2.e.(5)** If ABET determines that a violation has occurred, the Executive Director will inform the complainant of the determination in writing within 10 business days of receipt of the determination. ABET will counsel the responsible party and may take further action as circumstances warrant, up to and including termination as an ABET representative.

**II.E.2.e.(6)** If ABET finds that a violation of its policies or procedures has occurred that may have had an effect on a program's accreditation action, ABET



may initiate further proceedings as circumstances warrant, up to and including an immediate revisit to the program at no cost to the institution.

**II.E.2.e.(7)** 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.

## SECTION III – GENERAL ABET INFORMATION

### III.A. ABET Constitution Article One – Name

The name of this organization is Accreditation Board for Engineering and Technology, Inc., hereafter referred to as ABET.

### III.B. ABET Constitution Article Two – Purposes

**III.B.1.** ABET is a membership not-for-profit corporation based in the United States and incorporated in New York focused on quality assurance and world leadership in fulfillment of its purposes. It is a federation of societies organized for the public good. Its purposes are educational, charitable, and scientific.

**III.B.2.** To further the public welfare ABET assures quality through the accreditation of educational programs, thereby assuring the competence of graduates entering professional practice. ABET accomplishes this through the development and promulgation of accreditation criteria.

**III.B.3.** ABET will help assure educational quality within the academic community by stimulating innovation, fostering continuous improvement, and facilitating the strategic planning needed to achieve these goals.

**III.B.4.** Educational programs of interest to ABET include applied science, computing, engineering, and engineering technology, and other such disciplines as may be approved by the ABET Board of Directors.

**III.B.5.** In support of the programs described, ABET will engage in other appropriate projects and programs.

### III.C. ABET's Responsibilities

**III.C.1.** The ABET Board of Directors delegates authority for establishing and revising accreditation policies, procedures, and criteria to the Board of Delegates with the constraint that compliance is maintained with all requirements of Recognitions, Accords, and Agreements in which the Board of Directors has committed ABET to be a participant. (ABET Constitution Article Six)

**III.C.2.** At times, the Board of Delegates shall operate in Area Delegations; one for each Accreditation Commission of ABET. (ABET Constitution Article Seven B)

**III.C.3.** The ABET Board of Directors delegates responsibilities for conducting accreditation activities to the Accreditation Commissions. The Accreditation Commissions are responsible for conducting accreditation evaluations of educational programs and rendering decisions on these programs based on policies and accreditation criteria that have been approved by the Board of

Delegates or appropriate Area Delegation. The Accreditation Commissions shall make final decisions, except for appeals, of accreditation actions. In the event of an appeal of a Commission's action, the Board of Directors shall render the final decision on behalf of ABET. Each Accreditation Commission is responsible for the continuous review and improvement of its particular criteria, policies, and procedures. All changes to the area-specific parts of the accreditation criteria require approval of the appropriate Area Delegation; changes to other parts of the accreditation criteria and changes to the accreditation policies require approval by the Board of Delegates. (ABET Constitution Article Nine)

**III.C.4.** The Commissions of ABET shall be: the Applied and Natural Science Accreditation Commission (ANSAC), the Computing Accreditation Commission (CAC), the Engineering Accreditation Commission (EAC), and the Engineering Technology Accreditation Commission (ETAC). (ABET By-laws Section Twelve)

**III.C.5.** Each Commission shall have an Executive Committee. The Executive Committee is authorized to take action on behalf of the Commission on matters that require action when the Commission is not in session. With respect to accreditation decisions, such action must be unanimous; otherwise, the entire Commission must be polled. (Board of Delegates Rules of Procedure Section Eight D) The Accreditation Council, reporting to the Board of Delegates, formulates and recommends accreditation process, policies and procedures. The Council 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. (ABET By-laws Section Eleven B)

**III.C.6.** Procedures and decisions on all appeals to accreditation actions shall be the responsibility of the Board of Directors. (ABET Constitution Article Nine)

**III.C.7.** ABET makes a list of currently accredited programs publicly available. (Board of Directors Rules of Procedure Section Two)

### **III.D. Recognition**

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. Membership in these mutual recognition agreements is subject to periodic peer evaluation by other signatories, to ensure ABET's compliance with international norms. Finally,

ABET's accreditation process is ISO 9001:2015 certified. Information about ABET's recognition can be found on ABET's public web site: <https://www.abet.org>.

### **III.E. Changes**

Changes to accreditation policies and procedures, as outlined in this document may be proposed by the Commissions or the Accreditation Council, in consultation with the ABET Board of Delegates, or by any member of the ABET Board of Delegates, in consultation with the Accreditation Council, and must be **reviewed by the Governance Committee and** approved by the ABET Board of Delegates.

**III.E.1.** The ABET Board of Delegates will review the change(s) and make one of the following decisions:

**III.E.1.a.** Approve the change(s) as submitted.

**III.E.1.a.(1)** Typically changes to accreditation policies and procedures are effective in the review cycle immediately following adoption. However, this period may be extended, where appropriate, and the ABET Board of Delegates may require a period for additional review and comment prior to adoption.

**III.E.1.b.** Disapprove the change(s) as submitted.

**III.E.1.c.** Return the change(s), with guidance for additional consideration, to the Commission(s) or the Accreditation Council.

## SECTION IV – CRITERIA APPROVAL PROCESS

### IV.A. Criteria Initiation

**IV.A.1.** Suggestions for new or revised non-harmonized General Criteria (**APPM Section I.B.1**) shall be submitted to the Criteria Committee of the appropriate ABET Commission; suggestions for new or revised harmonized General Criteria can be submitted to the Criteria Committee of any ABET Commission.

**IV.A.2.** Suggestions for new or revised Program Criteria (**APPM Section I.B.2**) shall be submitted to a Lead, Co-Lead, or Cooperating Society assigned to the curricular area.

**IV.A.3.** All suggestions for new or revised Criteria should be addressed to the ABET Director, Accreditation Operations for routing to the appropriate body.

### IV.B. Substantive and Non-substantive Criteria Changes

**IV.B.1.** A substantive change is a new criterion or a revision to an existing criterion that modifies its prior meaning.

**IV.B.2.** A non-substantive change does not modify the prior meaning of a criterion and is normally intended to improve clarity, structural consistency, syntax, or typography.

**IV.B.3.** A given Criteria proposal can contain substantive and/or non-substantive changes.

### IV.C. Approval Process for General Criteria

**IV.C.1.** The Commission Criteria Committee shall propose changes in General Criteria to the Commission and shall designate proposed changes as substantive or non-substantive.

**IV.C.1.a.** Normally, substantive changes shall require approval by the Commission, and non-substantive changes shall require approval by the Commission Executive Committee.

**IV.C.1.a.(1)** In exercising its authority to act on behalf of the Commission during times the Commission is not in session, the Commission Executive Committee can approve substantive or non-substantive changes.

**IV.C.1.a.(2)** Approval of a criteria proposal by a Commission Executive Committee requires a two-thirds vote of the quorum in attendance.

**IV.C.1.a.(3)** Actions on criteria proposals by the Commission Executive Committee will be reported to the full Commission within ten business days.

**IV.C.2.** Proposals may be approved in whole or in part by the body considering them.

**IV.C.2.a.** Proposals or parts thereof that are not approved may be returned to the Commission Criteria Committee with guidance for additional consideration.

**IV.C.3.** Criteria proposals approved at the Commission level shall be forwarded for final approval as follows.

**IV.C.3.a.** Harmonized Criteria.

**IV.C.3.a.(1)** All proposals involving Harmonized General Criteria (Section I.B.1.a) must be submitted for approval to the Board of Delegates, following approval by the Accreditation Council.

**IV.C.3.a.(2)** The Accreditation Council may approve a proposal in whole or in part. Proposals or parts thereof that are not approved by the Accreditation Council may be returned to the Commissions with guidance for additional consideration.

**IV.C.3.a.(3)** Proposals approved by the Accreditation Council are forwarded to the Board of Delegates for final approval. (a). For substantive changes, the Accreditation Council shall recommend a suitable review-and-comment period (**APPM Section I.B.3**) and an appropriate implementation plan.

**IV.C.3.a.(3)(a)** For non-substantive changes, the Accreditation Council shall recommend either immediate implementation or another appropriate implementation plan.

**IV.C.3.a.(4)** ABET HQ shall inform the public, when appropriate, of revisions proposed to the Board of Delegates by the Accreditation Council.

**IV.C.3.a.(5)** The Board of Delegates acts on the proposal from the Accreditation Council. Proposals that are not approved may be returned to the Accreditation Council with guidance for additional consideration.

**IV.C.3.b.** Non-Harmonized Criteria.

**IV.C.3.b.(1)** All proposals involving Non-harmonized General Criteria shall be forwarded for final approval from the Commission to its Area Delegation.

**IV.C.3.b.(1)(a)** For substantive changes, the Commission shall recommended a suitable review-and-comment period (Section I.B.3) and an appropriate implementation plan.

**IV.C.3.b.(1)(b)** For non-substantive changes, the Commission shall recommend either immediate implementation or another appropriate implementation plan.

**IV.C.3.b.(2)** ABET HQ shall inform the public, when appropriate, of revisions proposed to the Area Delegation by the Commission.

**IV.C.3.b.(3)** The Area Delegation acts on the proposal from the Commission. Proposals that are not approved may be returned to the Commission with guidance for additional consideration.

**IV.C.3.b.(4)** The Area Delegation will inform the Board of Delegates of action taken.

**IV.C.4.** Non-substantive revisions approved for immediate implementation are included in Criteria for the upcoming cycle.

**IV.C.5.** ABET HQ distributes substantive General Criteria revisions to affected constituents for review and comment; collects feedback during the comment period; provides feedback on non-harmonized criteria to the appropriate Commission; and provides feedback on Harmonized General Criteria to the Accreditation Council.

**IV.C.5.a.** The appropriate steps in Section IV.C are repeated based on constituent feedback. However, substantive changes resulting from feedback may be implemented in Criteria for the upcoming review cycle without further review and comment.

#### **IV.D. Approval Process for Program Criteria**

**IV.D.1.** The appropriate body within a Lead Society, Co-Lead Society or Cooperating Society (hereinafter “Proposing Society”) normally prepares proposals for new or revised Program Criteria. Each Commission shall provide guidance to its Member Societies regarding format and scope of Program Criteria.

**IV.D.1.a.** If the proposal is a revision to current Program Criteria, the Proposing Society provides a rationale for the changes and suggests which components of the proposal are substantive changes and which components are non-substantive changes, in accordance with the definitions in **Section IV.B.**

**IV.D.1.b.** If the proposal is for Program Criteria that previously did not exist, the Proposing Society seeks feedback from the constituent community of programs in the curricular area that would be affected by the proposed Program Criteria.

**IV.D.1.c.** The Proposing Society requests input/feedback from all other ABET Lead, Co- Lead and Cooperating Societies assigned to the curricular area.

**IV.D.2.** The Proposing Society submits the proposal and rationale to the Commission Criteria Committee via the ABET Director, Accreditation Operations. The rationale should include letters of endorsement deemed appropriate by the Proposing Society:

**IV.D.2.a.** from a sampling of potential constituent programs, in the case of Program Criteria that previously did not exist, and

**IV.D.2.b.** from all Lead, Co-Lead and Cooperating Societies assigned to the curricular area, whether new Program Criteria or proposed revisions to Program Criteria currently in effect.

**IV.D.3.** The ABET Director, Accreditation Operations distributes the proposal and rationale to the leadership of the appropriate Commission, to the Society liaison of the Proposing Society and to the society liaisons of all other Lead, Co-Lead and Cooperating Societies assigned to the curricular area.

**IV.D.4.** The Commission Criteria Committee may:

**IV.D.4.a.** approve the proposal as a whole,

**IV.D.4.b.** approve the proposal in part, and communicate with the Proposing Society regarding whether to

**IV.D.4.b.(1)** proceed with approval of only the acceptable portions, or

**IV.D.4.b.(2)** return the entire proposal to the Proposing Society with guidance for revision and later re-submittal.

**IV.D.4.c.** reclassify components into substantive and non-substantive changes.

**IV.D.4.d.** The Commission Criteria Committee will communicate its decision, via ABET HQ, to the Society Liaisons of the Proposing Society and any other Lead, Co-Lead, and Cooperating Society assigned to the curricular area.

**IV.D.5.** Proposal components approved by the Commission Criteria Committee will be forwarded to the Commission or to the Commission Executive Committee, in accordance with the principles of [Section IV.C.1.](#)

**IV.D.6.** Based on the classification of the proposed revision(s) to the Program Criteria, the Commission and/or Commission Executive Committee shall discuss and vote on the proposal.



**IV.D.6.a.** Proposals may be approved in whole or in part by the body considering them. Approval of a criteria proposal by a Commission Executive Committee requires a two-thirds vote of the quorum in attendance.

**IV.D.6.b.** Proposals or parts thereof that are not approved may be returned to the Proposing Society and Commission Criteria Committee with guidance for additional consideration.

**IV.D.7.** ABET HQ will notify the Proposing Society and any other Co-Lead and Cooperating Societies assigned to the curricular area of the outcome from the Commission and/or Commission Executive Committee.

**IV.D.8.** Criteria approved by the Commission or Commission Executive Committee shall be forwarded to the Area Delegation for additional consideration and final approval in accordance with the procedures of [Sections IV.C.3.b](#), and [IV.C.4-IV.C.5](#).

**IV.D.8.a.** ABET HQ will communicate the Area Delegation's decision to the Society Liaisons of the Proposing Society and any other Lead, Co-Lead and Cooperating Societies assigned to the curricular area.

**IV.D.8.b.** ABET HQ will provide feedback from review and comment to the Proposing Society and any other Lead, Co-Lead and Cooperating Societies assigned to the curricular area, in addition to providing this feedback to the Commission.

## **Glossary**

### **Accord**

An agreement among the bodies responsible for accrediting specific degree programs in each of the signatory countries. Accords recognize the substantial equivalency of programs accredited by each of these bodies and recommends that graduates of accredited programs in any of the signatory countries be recognized by the other countries as having met the academic requirements for entry-level practice. Accords are intended to improve technical education worldwide and foster the mobility of students and graduates.

### **Accreditation**

An assurance that a program or institution meets established quality standards. In the United States, it is a non-governmental, voluntary peer-review process.

### **Accreditation Council (AC)**

Council composed of the chair, chair-elect, and past chair of each of the ABET accreditation commissions, as well as a chair who leads the council itself. The Accreditation Council formulates and recommends to the ABET Board of Directors policies and procedures regarding ABET accreditation processes, with particular emphasis on process improvement and process uniformity across the commissions.

### **Accreditation Policy and Procedure Manual (APPM)**

Document that spells out the policies and procedures that govern the ABET accreditation process, almost always used with the accreditation criteria.

### **Applied and Natural Science Accreditation Commission (ANSAC)**

Programs accredited by ANSAC are those utilizing mathematics and the sciences as the foundation for discipline-specific professional practice, including increasing the knowledge base in a field of research or solving problems critical to society. ANSAC accredits a program at the associate, baccalaureate, or master's degree level.

### **Assessment**

One or more processes that identify, collect, and prepare data to evaluate the attainment of student outcomes. Effective assessment uses relevant direct, indirect, quantitative, and qualitative measures as appropriate to the objective or outcome being measured. Appropriate sampling methods may be used as part of an assessment process.

### **Associate's**

An undergraduate degree that is conferred upon completion of a two-year program of study; may be earned at community colleges, technical schools, or baccalaureate degree-granting colleges and universities.

### **Associate Member Society**

An organization that participates in and contributes to the ABET community but is not a full member of ABET. Associate member societies do not nominate members for the ABET accreditation commissions or have voting rights on the ABET Board of Directors.

### **Baccalaureate**

An undergraduate degree that is conferred upon completion of a three- to five-year program of study; may be earned at technical schools, colleges, or universities.

### **Capstone**

A culminating course that allows students who are nearing graduation to “put together” the knowledge and skills they have acquired in their program and apply it to a major project or assignment.

### **Commission**

Entities within ABET that conduct the accreditation of educational programs; established by the Board of Directors.

### **Commission Executive Committee**

Committee consisting of the commission officers, members-at-large, public commissioner, and the Board Liaison.

### **Competency**

Knowledge, skill, or ability.

### **Comprehensive Review**

A review team examines all aspects of a program to judge compliance with criteria and policies and to help the program in recognizing its strong and weak points. The team interviews faculty, students, administrators, and staff; examines materials and facilities; presents orally its factual findings to the institution leadership; and provides to the dean a copy of the Program Audit Form (PAF) for each program reviewed.

### **Computing Accreditation Commission (CAC)**

The commission that accredits programs leading to professional practice across the broad spectrum of computing, computational, information, and informatics disciplines. CAC accredits programs at the associate, baccalaureate, or master's degree level.

**Concern**

Statement that a program currently satisfies a criterion, policy, or procedure, but the potential exists for the situation to change such that the criterion, policy, or procedure may not be satisfied.

**Continuous Quality Improvement (CQI)**

An approach based on evaluating a product or a process and on understanding the needs and expectations of those who use or benefit from a product or a process.

**Criteria**

Standard on which a judgment or decision is based.

**Dean**

Senior leader of an academic unit, such as a school or college.

**Deficiency**

Statement that a criterion, policy, or procedure is not satisfied. The program is not in compliance with the criterion, policy, or procedure.

**Degree Level**

Tier of study, also called program level. See "Associate's," "Baccalaureate," and "Master's."

**Draft Statement**

Compilation of program exit statements and institutional section of strengths, shortcomings, and/or observations; written by the team chair after the visit and includes the institution's seven-day response; sent to the institution for due process response.

**Due Process Response**

The institution's changes to the draft statement. After ABET provides the institution with a draft statement, it has 30 days to correct errors of fact in the statement and report progress in addressing shortcomings.

**Editor**

Member of the commission's executive committee who reviews and edits Draft and Final Statements to the institution.

**Engineering Accreditation Commission (EAC)**

The commission that accredits programs leading to the professional practice of engineering. EAC accredits programs at the baccalaureate and master's degree levels.

**Engineering Technology Accreditation Commission (ETAC)**

The commission that accredits programs that prepare baccalaureate degree graduates for careers as engineering technologists and associate's degree graduates for careers as engineering technicians. ETAC accredits programs at the associate and baccalaureate degree levels.

**Evaluation**

One or more processes for interpreting the data and evidence accumulated through assessment practices. Evaluation determines the extent to which program educational objectives and student outcomes are being attained. Evaluation results in decisions and actions regarding program improvement.

**Exit Meeting**

The conclusion of a review visit, when the review team presents orally its factual findings about the programs it reviewed to institution's leadership and answers clarifying questions.

**Exit Statement**

Statement of program strengths, shortcomings, and/or observations that the program evaluator reads during the exit meeting.

**Final Statement**

Compilation of program statements and institutional section of strengths, shortcomings, and/or observations that incorporates institutional due process responses and is the result of a second editing cycle; sent to the institution with the final accreditation action voted upon by the commission.

**Hybrid Program**

A program delivered by more than one modality or at different physical sites.

**Institution**

Higher learning organization that delivers one or more educational programs leading to degrees.

**Institutional Representative**

A faculty member, dean, department head, or other administrator who represents an educational program.

**Interim Report (IR)**

This action indicates that the program has one or more weaknesses. The weaknesses are such that a progress report to evaluate the remedial actions that the institution has taken will be required. This action has a typical duration of two years.

**Interim Visit (IV)**

This action indicates that the program has one or more weaknesses. The weaknesses are such that an on-site review to evaluate the remedial actions that the institution has taken will be required. This action has a typical duration of two years.

**International Observer**

A representative from a non-U.S. higher education organization or educational program who attends an ABET meeting or event to learn more about ABET activities rather than to actively participate in the meeting or event.

**Master's**

A post-graduate degree that is conferred upon completion of one to three years of course that demonstrates a mastery or high-order overview of a specific field of study or area of professional practice; may be earned at colleges or universities.

**Member Society**

One of more than two-dozen professional and technical societies that comprise the federation known as ABET.

**Memorandum of Understanding (MOU)**

An agreement between ABET and a peer accrediting agency. An MOU provides a structure that guides collaboration of organizations with ABET to facilitate implementation of quality assurance organizations in other countries during their developmental period. Typical activities conducted under these agreements are sharing of best practices, assisting organizations in their development of accreditation processes,

and providing training workshops for staff and volunteers. MOUs do not extend to the recognition of programs or graduates.

### **Mutual Recognition Agreement (MRA)**

An agreement among organizations that accredit academic degree programs. These are nongovernmental agreements that recognize the substantial equivalency of the organizations' accreditation processes and the graduates' preparedness to begin professional practice at the entry level. The "mutual recognition" of accrediting systems is intended to improve technical education worldwide and foster the mobility of students and graduates.

### **Next General Review (NGR)**

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.

### **Not to Accredite (NA)**

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 is the only action can be appealed.

### **Observation**

A comment or suggestion that does not relate directly to the accreditation action but is offered to assist the institution in its continuing efforts to improve its programs.

### **Online Program**

An integrated, organized experience in which both students and instructors communicate via their computers for all coursework, culminating in the awarding of a degree.

### **Program**

An integrated, organized experience that culminates in the awarding of a degree.

### **Program Area**

A curricular concentration or major.

### **Program Educational Objectives**

Broad statements that describe what graduates are expected to attain within a few years of graduation. Program educational objectives are based on the needs of the program's constituencies.

**Program Evaluator (PEV)**

A volunteer selected by his or her member society to represent ABET on visit team. They are professionals from academe, industry, government, and private practice who care about sustaining their respective professions through quality education.

**Program Head**

Administrative leader of an educational program.

**Program Level**

Tier of study, also called degree level. See "Associate's," "Baccalaureate," and "Master's."

**Provost**

Senior academic officer of an academic institution.

**Publicly-accessible Media**

This term encompasses text, audio, or video communication created or initiated by institutions or programs and made available to consumers outside the institution administration via hard copy, digital copy, websites, or other platforms. (This definition excludes properly-dated and intentionally archived media.)

**Record of Academic Work**

Describes a student's academic performance, providing at least the following information: name and address of institution; name and other identification of the student; courses and/or credits attempted, academic years of each attempt, grade or other evaluation for each attempt, and an indication of all required work attempted; and, a list of required courses/credits for which academic work pursued at other institutions was accepted to meet the program's requirements. ABET recognizes transcripts as the official record of student coursework in the United States; however, it may be referred to differently in other countries.

**Report Extended (RE)**

This action indicates that the institution has taken satisfactory remedial action 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.



### **Request for Acknowledgement (RFA)**

An institution outside of the U.S. wishing to have programs considered for accreditation or reaccreditation must submit to ABET a Request for Acknowledgement no later than January 31 of the calendar year in which the review is desired. The Request for Acknowledgement indicates the institution's recognition/accreditation agency of the home jurisdiction/country acknowledges the request for ABET visitation and evaluation of the program(s).

### **Request for Evaluation (RFE)**

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. Requests for Evaluation are submitted online.

### **Review Team**

A team that reviews against the criteria and accreditation policies and procedures one or more programs at an institution. Generally composed of a team chair and at least one program evaluator for each program area, with a minimum team size of three.

### **Self-Study Report**

Primary document that a program prepares to demonstrate compliance with ABET criteria. The Self-Study Report is prepared using the Self-Study Questionnaire: Template for the Self Study.

### **Seven-Day Response**

The opportunity for programs that have recently undergone a review visit to examine the review team's findings and to correct errors of fact only; extensive revisions are reserved for the due process response period.

### **Shortcoming**

Area of non-compliance against the criteria; any deficiency, weakness, or concern.

### **Show Cause (SC)**

This action indicates that a currently accredited program has one or more deficiencies.

### **Show Cause Extended (SE)**

This action indicates that the institution has taken satisfactory remedial action 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.

### **Show Cause Report (SCR)**

This action indicates that a currently accredited program has one or more deficiencies. The deficiencies are such that a progress report to evaluate the remedial actions that the institution has taken will be required. This action has a typical duration of two years. This action cannot follow a previous SC action for the same deficiency.

### **Show Cause Visit (SCV)**

This action indicates that a currently accredited program has one or more deficiencies. The deficiencies are such that an on-site visit to evaluate the remedial actions that the institution has taken will be required. This action has a typical duration of two years. This action cannot follow a previous SC action for the same deficiency.

### **Society Observer**

A professional staff member or volunteer from an ABET Member Society who attends an ABET meeting or event to learn more about ABET activities rather than to actively participate in the meeting or event.

### **Strength**

Exceptionally strong, effective practice or condition. A statement that describes what was observed, what makes it stand above the norm, and how it impacts the program positively.

### **Student Outcomes**

Statements that describe what students are expected to know and be able to do by the time of graduation. These relate to skills, knowledge, and behaviors that students acquire as they progress through the program.

### **Student Work Examples**

Actual student work, such as completed homework assignments, tests, quizzes, lab reports, or group projects, that have been graded. The work examples should span the grade range from excellent to poor.

### **Substantial Equivalency**

Accreditation systems have comparable standards, outcomes, and processes, though they may not be identical. Can also mean that a program is comparable in content and educational experience to others, but may differ in format or method of delivery. Substantial equivalency implies reasonable confidence that the program has prepared its graduates to begin professional practice at the entry level.

### **Supplemental Materials**

Materials necessary for the program to demonstrate compliance with the criteria and policies. These could include but are not limited to representative examples of graded student work including, when applicable, major design or capstone projects.

### **Team Chair (TC)**

A commission member, or occasionally a former commission member, appointed by the commission's executive committee to lead a review team.

### **Terminate (T)**

This action is generally taken in response to an institution's request 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.

### **Training Mentor**

An experienced program evaluator assigned by an ABET member society to a Program Evaluator Candidate (PEVC) to guide that candidate through the training process.

### **Transcript**

Official record of student coursework.

### **Visit Extended (VE)**

This action indicates that the institution has taken satisfactory remedial action 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.

### **Weakness**

Statement that a program lacks strength of compliance with a criterion, policy, or procedure to ensure that the quality of the program will not be compromised. Remedial

action is required to strengthen compliance with the criterion, policy, or procedure prior to the next review.

## **PROPOSED CHANGES TO POLICIES OR PROCEDURES**

There are no proposed changes to the Accreditation Policy and Procedure Manual (APPM) for the 2025-2026 review cycle.