ACCREDITATION
POLICY AND PROCEDURE
MANUAL

Effective for Reviews During the
2017-2018 Accreditation Cycle

Incorporates all changes
approved by the
ABET
Board of Delegates
as of
October 29, 2016

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

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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 ASAC, 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) SEGMENTS IN BOLD REFLECT REVISIONS APPROVED BY THE ABET BOARD OF DIRECTORS OR THE ABET BOARD OF DELEGATES FOR THE 2017-18 REVIEW CYCLE.

I. ACCREDITATION POLICIES AND PROCEDURES

I.A. Public Release of Information By the Institution/Program
I.A.1. When a program submits a request to ABET for initial accreditation or re-accreditation, it agrees to disclose publicly its accreditation status to assist external stakeholders, such as students, parents, and the general public, in making appropriate education decisions.
I.A.1.a. ABET publicly identifies programs whose accreditation has been denied or withdrawn by ABET.
I.A.1.b. ABET publicly identifies programs whose accreditation has been placed on Show Cause due to one or more cited deficiencies in Criteria compliance.
I.A.1.c. If ABET places a program on Show Cause or denies or withdraws a program’s accreditation, then the institution/program must provide to the public, upon request, a statement summarizing ABET’s reasons for the Show Cause accreditation action or the denial or withdrawal of accreditation; that statement can be accompanied by a response from the affected program addressing the ABET decision. This statement must be available
within 60 days of receipt of the Final Statement to the Institution.

I.A.1.c.(1) ABET will post on its public website a notice regarding the availability of this statement from the institution/program.

I.A.1.d. In the event that the program files an official request for reconsideration or immediate re-visit in accordance with APPM I.J., the 60-day period for public notification will begin when the APPM I.J. processes have provided a final accreditation action.

I.A.2. When ABET awards accreditation to a program, the accreditation action indicates only the nature of the next review and is not an indicator of the program’s quality. A program must not publish or imply the length of the period of accreditation. Public announcement of the accreditation action should only relate to the attainment of accredited status. All statements on accreditation status must refer only to those programs that are accredited.

I.A.3. Direct quotation in whole or in part from any ABET statement to the institution is unauthorized, except as required by a Show Cause action. Correspondence and reports between ABET and the institution/program are confidential documents and should only be released to authorized personnel at the institution. Any document so released by the institution/program must clearly state that it is confidential. Wherever law or institution policy requires the release of any confidential document, the entire document must be released.

I.A.4. Institutions are required to represent the accreditation status of each program accurately and without ambiguity. Programs are either accredited or not accredited. ABET does not rank programs. An institution may not use the same program name to identify both an accredited program and a non-accredited program.

I.A.5. The institution must avoid any implication that a program is accredited under a specific commission’s general or program criteria against which the program has not been evaluated. No implication should be made that accreditation by one of ABET’s commissions applies to any programs other than the accredited ones.

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

I.A.6.a. Each ABET-accredited program must publicly state the program’s educational objectives (PEOs) and student outcomes (SOs).

I.A.6.b. Each ABET-accredited program must publicly post annual student enrollment and graduation data specific to the program.

I.A.7. The institution must make a public correction if misleading or incorrect information is released regarding the items addressed in Section I.A.

I.A.8. Unauthorized use of ABET’s official logo is prohibited. Accredited programs are authorized to use special logos provided by ABET for use on websites, in course catalogs, and in other similar publications. These logos can be requested through ABET at info@abet.org.

I.A.9. Diploma Mills – ABET will inform the public about the harm of degree mills and accreditation mills by posting on the ABET website, www.abet.org, a link to a website judged a suitable source of information regarding degree mills and accreditation mills.

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. General Criteria are posted on the ABET web site: www.abet.org. 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 degree level programs. They are identical in language across all of ABET’s accreditation commissions. Currently, 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 posted on the ABET website: www.abet.org.

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

I.C. Eligibility of Programs for Accreditation Review

I.C.1. ABET defines an educational program as an integrated, organized experience that culminates in the awarding of a degree. The program will have program educational objectives (PEOs), student outcomes (SOs), a curriculum, faculty, and facilities.

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

I.C.2.a. ABET accredits individual educational programs.
I.C.2.b. ABET does not accredit departments or institutions.

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

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

I.C.4.b.(2) If there is an option or similar designation implying a specialization within the program, it must be displayed separately from and in a subordinate position to the program name.

I.C.4.c. The program name determines the commission and the criteria applicable to its 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) A program may choose to have an option, or similar designation implying specialization within the program, reviewed as a separate program.

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

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 at least one graduate before the academic year of the on-site review. This may occur one or 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.

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 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.
I.D.1.b. When submitting an RFE for either a general or an interim onsite review, the institution may suggest the onsite review start date. ABET’s first priority is to assign the most appropriate volunteer expert as the team chair regardless of the suggested onsite visit date.
I.D.1.c. Institutions outside of the U.S. are also required to secure approval from the governmental, national, or regional recognizing body or accreditor in the home jurisdiction. The institution must provide a completed ABET Request for Approval (RFA) form from each appropriate agency along with the RFE. The institution must submit all forms by January 31.
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. 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 and physical 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. Programs must submit all documentation including the Self-Study Report, transcripts, display materials, and correspondence in English.
I.D.2. The Accreditation Fee Schedule will be posted on the ABET web site by April 1 of each year. By May 1 of the calendar year in which the review is requested, the institution will receive an invoice for fees associated with the requested review. Payment is due 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 (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 a Self-Study Report or an Interim Report, as required, for each program to be reviewed.

- I.D.5.a. The Self-Study Report or Interim Report is due to ABET Headquarters no later than July 1 of the calendar year in which the review is to be conducted.
- I.D.5.b. The institution will provide the appropriate report directly to the team chair no later than July 1.
- I.D.5.c. The institution will provide the appropriate report directly to each program evaluator at the direction of the team chair.

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. This response will be evaluated and used as the basis for revising the Draft Statement to create the Final Statement.

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 visit in order to protect the health, safety, and welfare of ABET’s volunteer experts.

I.E.3. Final Preparation for On-Site Review
I.E.3.a. Submittal of Transcripts - Prior to arriving on-site, the team will request official transcripts of the most recent graduates from each program. Each program being evaluated will provide official transcripts with associated worksheets and any guidelines used by the advisors.
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 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 onsite review may be adjusted:

- A very high degree of overlap between two programs being reviewed.
- A simultaneous or joint review by two or more commissions.
- A program with multiple sites or nontraditional delivery method.
- A single associate-level program.
- An Interim Review with a very limited focus.
- 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 Sections II.A. and B.). Observers are typically:

- Newly trained program evaluators from ABET Member Societies,
- Members of State Boards of Licensure and Registration, or
- 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 sufficient to document: a) the extent of attainment of each student outcome, and b) the program’s compliance with Criterion 3 Student Outcomes and Criterion 5 Curriculum, as well as any applicable Program Criteria. These materials are provided either as a part of the Self-Study Report or as displays during the onsite visit, or accessed by evaluators within a suitable on-line storage location utilized by programs delivered fully or partially online. Materials provided during the onsite visit are typically textbooks, assignments,
exams, and examples of student work in a range of quality. Provision for access to online materials used by the program must be made available during an on-site visit.

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) Student support services to confirm adequacy of services appropriate to the institution’s mission and the PEOs and SOs.

I.E.5.b.(8) The process for certifying completion of the program and awarding of the degree, including visits with persons responsible to ascertain that the process works as reported.

I.E.5.c. Present the team's factual findings orally at the conclusion of the visit in an Exit Meeting for the institution's chief executive officer or designee and such personnel as the chief executive officer wishes to assemble.

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 statement or on the PAFs.

I.E.5.d.(1) Program evaluators, whether veteran or newly trained, may provide copies of the PEV Report Form, the PEV Worksheet (pre and post visit), and the Program Audit Form (PAF) to their member societies for the purposes of continuous improvement.

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. Transcripts 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 – When the program has submitted a due-process response within the 30-day due-process period, the team chair may, at his or her discretion, in consultation with the commission leadership, accept additional information after the 30-day due-process period. Any such information 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 and must be received in time for proper consideration prior to the July Commission Meeting.

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) ABET expects the institution to provide a statement within 60 days of receipt of the Final Statement to the Institution to the students, faculty, and the public summarizing 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) ABET expects the institution to provide a statement within 60 days of receipt of the Final Statement to the Institution to the students, faculty, and the public summarizing 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 Accredit) – This action indicates that the program has Deficiencies such that the program is not in compliance with the applicable criteria. This action is usually taken only after a SCR or SCV review, or the review of a new, unaccredited program. Accreditation is not extended as a result of this action. This action can be appealed as specified in the Appeals Section (II.D.) of this document.

I.E.12.i.(1) An Executive Summary of the findings leading to the not-to-accredit action will be provided to the institution along with the Final Statement.
I.E.12.i.(2) A “Not to Accredit” action, as a result of a “Show Cause” focused review, is effective September 30 of the year of the “not to accredit” decision, pending final action on any request from the institution for immediate revisit, reconsideration, or appeal.

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

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

I.F. Changes During the Period of Accreditation

I.F.1. The institutional administrative officer responsible for ABET accredited programs will notify the ABET Director for Accreditation Operations of changes that 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 provides ABET with detailed information about the nature of each change and its impact on the accredited program. Such changes include, but are not limited to:

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
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:

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

I.F.2.a.(1) The selected commissioners review the documentation provided and make recommendations to the Commission Executive Committee within 60 business days.
I.F.2.a.(2) These commissioners may request additional information through
ABET Headquarters.
I.F.2.a.(3) These commissioners will recommend either: 1) that accreditation be maintained for the duration of the current accreditation period, or 2) that a focused on-site review be required to determine the accreditation status of the changed program.
I.F.2.b. The Commission Executive Committee will review the recommendations and make one of the following decisions:
I.F.2.b.(1) The program must provide specific additional information.
I.F.2.b.(2) Accreditation will be maintained for the duration of the current accreditation period.
I.F.2.b.(3) A focused on-site review is required to determine the accreditation status of the changed program and the review will be scheduled in the earliest available review cycle.
I.F.2.b.(3)(a) Based on the recommendation coming from the focused on-site review, the accreditation status of the program may be changed upon vote of the Commission’s Executive Committee.
I.F.2.c. ABET will notify the institution of the commission’s decision.
I.F.2.d. 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 Section I.I.5. and 6.).
I.F.2.e. If an accredited program ceases to exist or ceases to be offered by an institution, the program accreditation will terminate as of the date the program ceases to exist or ceases to be offered.

I.G. Program Termination By An Institution
I.G.1. An institution may decide to terminate an accredited program from its offerings. 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 termination date is beyond the expiration date of the current period of accreditation, extension of accreditation up to three years may be granted to cover students remaining in the program.
I.G.1.a. If the request for termination is synchronous with a scheduled review of the program in order to continue accreditation, the institution submits a Request for Evaluation (RFE) indicating the decision to terminate the program’s accreditation. The program submits a Termination Plan, in lieu of the Self-Study Report or Interim Report, by July 1 after the RFE is submitted. The normal review process is followed per Section I.E., as appropriate.
I.G.1.b. If the request for termination is not synchronous with a scheduled review of the program, the institutional administrative officer responsible for ABET accredited programs will notify the ABET Director, Accreditation Operations in accordance with Section I.F.1. The institution provides a Termination Plan, as described below. The process described in Section I.F. above will be invoked.
I.G.1.c. The Termination Plan demonstrates the program’s ability to continue delivery of an accredited program during its phase-out. The Plan should include the following information:
I.G.1.c.(1) Name of Institution;
I.G.1.c.(2) Name of Program;
I.G.1.c.(3) The number of students remaining in the program with the expected date of graduation for the last student;
I.G.1.c.(4) Copies of all notices to students in the program regarding the discontinuation of the program;
I.G.1.c.(5) The name, official position, and contact information of the individual responsible for the continuing administration of the program;
I.G.1.c.(6) The names of the faculty members teaching all required technical courses and any other courses specific to the program. Courses being taught in connection with other programs whose accreditation is being continued need not be covered in the report;
I.G.1.c.(7) Biographical data sheets for all persons included in (5) and (6) above;
I.G.1.c.(8) Description of how the program will continue to support student attainment of the outcomes;
I.G.1.c.(9) Descriptions of any substitutions or major changes in the curriculum since the time of the last accreditation review or that are planned through to the termination of the program;
I.G.1.c.(10) Descriptions of how instructional laboratory facilities will be maintained for remaining students;
I.G.1.c.(11) Descriptions of advising processes that will be available to students remaining in the program; and
I.G.1.c.(12) Descriptions of any remedial actions taken with respect to any Weaknesses remaining at the time of the last accreditation review.

I.G.1.d. If the requested extension is more than six years from the date of the most recent general review, an on-site termination review will be required.
I.G.1.d.(1) The on-site termination review will be focused on the Termination Plan.
I.G.1.d.(2) The on-site termination review will be conducted by a team chair only and will typically be a one-day visit.

I.G.1.e. If an on-site termination review is not required, the Termination Plan will be reviewed by a commission member.

I.G.1.f. A decision on the “Termination” action will be made by the appropriate commission.

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.2.a. Events clearly beyond the control of the institution that prevent the program from preparing for the review and/or prevents the team from conducting a complete on-site review.
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.2.b. 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.2.c. 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 Accredit (NA) action and the institution may appeal.

I.J. Immediate Re-Visit and Reconsideration of a Not-to-Accredit Action

I.J.1 In lieu of an appeal (see Section II.D.), a program that received a not-to-accredit action may request an immediate revisit or a reconsideration of the not-to-accredit action.
I.J.1.a. A request for an immediate revisit or a reconsideration of the not-to-accredit 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-accredit action.
I.J.2. Immediate Revisit
I.J.2.a. A program that has received a not-to-accredit action may be a candidate for an immediate revisit if it will undergo substantive and documented improvement before the onset of the next accreditation cycle.
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 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. Program Reviews.

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 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.
II.A. Conflict of Interest

(ABET Board of Directors Rules of Procedure Section II)

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 excuse 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. Individuals representing ABET must decline an assignment and absent themselves from any portion of an ABET meeting or program review in which discussions or decisions occur for which they have a real or perceived conflict of interest. Real or perceived conflicts may occur if there is:

II.A.2.a.(1) A close, active association with a program or institution;
II.A.2.a.(1)(a) A close, active association with a program or institution that is being or has been considered for official action by ABET includes but is not limited to:
II.A.2.a.(1)(a)i. Current or past employment as faculty, staff, or consultant by the institution or program;
II.A.2.a.(1)(a)ii. Current or past discussion or negotiation of employment with the institution or program;
II.A.2.a.(1)(a)iii. Attendance as a student at the institution;
II.A.2.a.(1)(a)iv. Receipt of an honorary degree from the institution;
II.A.2.a.(1)(a)v. An institution or program where a close family relative is, or was, a student or employee within the past 10 years; or,
II.A.2.a.(1)(a)vii. A financial or personal interest;
II.A.2.a.(1)(a)viii. Past assignment as an ABET team member at the institution;
II.A.2.a.(1)(a)ix. The perception that an individual’s residence in the state, country, or jurisdiction in which a program review is to be conducted raises questions regarding the objectivity and credibility of the accreditation process; or
II.A.2.a.(1)(a)x. Any reason that the individual cannot render an unbiased decision.

II.A.2.b. 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.c. 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.d. All individuals representing ABET must sign annually 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.e. 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 III)

II.B.1. Ethical Conduct - ABET requires ethical conduct by each volunteer and staff member engaged in fulfilling the mission of ABET. The organization requires that every volunteer and staff member exhibit the highest standards of professionalism, honesty, and integrity. The services provided by ABET require impartiality, fairness, and equity. All persons involved with ABET activities must perform their duties under the highest standards of ethical behavior. Information provided by the institution is for the confidential use of ABET 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 List - ABET publicly identifies programs that have been accredited and programs for which accreditation was denied or withdrawn by ABET.

II.C. Code of Conduct

(Board of Directors Rules of Procedure Section IV)

II.C.1. ABET requires that each volunteer and staff member engaged in fulfilling the mission of ABET exhibit the highest standards of professionalism, honesty, and integrity, including compliance with the ABET Constitution, Bylaws, appropriate Rules of Procedure and APPM. 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. It is the purpose of this code to detail the ethical standards under which we agree to operate.
II.C.2. The Code - All ABET volunteers and staff members commit to the highest ethical and professional conduct and agree:

II.C.2.a. To accept responsibility in making accreditation decisions 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.2.b. To perform services only in areas of their competence;
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.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.2.e. To make or issue either public or internal statements only in an objective and truthful manner;
II.C.2.f. To conduct themselves honorably, responsibly, ethically, and lawfully so as to enhance the reputation and effectiveness of ABET;
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.h. To treat all persons involved in accreditation activities with fairness and justice;
II.C.2.i. To assist colleagues and co-workers in their professional development and to support them in following this code of conduct; and
II.C.2.j. To support a mechanism for the prompt and fair adjudication of alleged violations of this code.

II.C.3. 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 have been trained in the implementation of these Guidelines and have signed in support of the Code and its Guidelines:

II.C.3.a. To accept responsibility in making accreditation decisions 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.3.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 pool of qualified graduate professionals to continue the work of their profession.
II.C.3.a.(2) Programs shall not receive accreditation that do not meet the Criteria as set forth by the profession through ABET in the areas of applied science, computing, engineering, and engineering technology.
II.C.3.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.3.b. To perform services only in areas of their competence.

II.C.3.b.(1) All those involved in ABET activities shall undertake accreditation assignments only when qualified by education and/or experience in the specific technical field involved.

II.C.3.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.3.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.3.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.3.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 and program evaluators 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.3.c.(4) They shall not undertake any assignments or take part in any discussions that would knowingly create a potential conflict of interest between them and ABET or between them and the institutions seeking programmatic accreditation.

II.C.3.c.(5) They shall not solicit or accept gratuities, directly or indirectly, from programs under review for accreditation.

II.C.3.c.(6) They shall not solicit or accept any contribution, directly or indirectly, to influence the accreditation decision of programs.

II.C.3.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. All those involved in ABET activities shall treat information coming to them 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.3.e. To make or issue either public or internal statements only in an objective and truthful manner.

II.C.3.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.3.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.3.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.3.e.(4) They shall not use statements containing a material misrepresentation of fact or omitting a material fact.

II.C.3.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.3.f. To conduct themselves honorably, responsibly, ethically, and lawfully so as to enhance the reputation and usefulness of ABET.

II.C.3.f.(1) All those involved in accreditation activities shall refrain from any conduct that deceives the public.

II.C.3.f.(2) They shall not falsify or permit misrepresentation of their or their associates’ academic or professional qualifications.

II.C.3.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.3.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.3.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.3.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.3.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.3.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 the ABET Board of Directors Rules of Procedure Section. C.1.c. Subsequently the procedures of the ABET Board of Directors Section 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.3.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 IV. 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.3.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 disciplinary 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.3.g.(7) Disclosure of reports of concerns to individuals not involved in the investigation will also be viewed as a serious disciplinary offense and may result in a Code violation finding.

II.C.3.h. To treat all persons involved in accreditation activities with fairness and justice.

II.C.3.h.(1) All ABET volunteers and staff shall treat fairly all persons involved in
II.C.3.i. To assist colleagues and co-workers in their professional development and to support them in following this Code of Conduct.

II.C.3.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.3.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.3.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.3.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 IV 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 V)

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 XVII)

II.E.1. It is the policy of ABET to review all complaints received from any source, including students, against either an accredited program or ABET itself, that are related to compliance with ABET’s 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.2. 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.3. 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.4. 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. 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. 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 the complaint to the Board of Directors Audit Committee for adjudication according to the Board of Directors Rules of Procedure Section IV. 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 XVII.B.4. If the complaint is against ABET, the Executive Director will follow the procedure described in Board of Directors Rules of Procedures Section XVII.B.5. 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.5. Complaints To ABET Against an Institution or its Accredited Programs

II.E.5.a. 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.5.b. 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.5.c. 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.5.d. 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.5.e. 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.6. Complaints Against ABET

II.E.6.a. If the complaint is concerned with ABET’s criteria, policies, or procedures or with the implementation of these, the Executive Director will forward a copy of the complaint to the executive committee(s) of the appropriate commission(s) or to the Board of Directors within 10 business days of receipt of the complaint.
II.E.6.b. If it appears that an ABET representative or an individual working on behalf of ABET may have violated ABET's criteria, policies, or procedures, that individual will be asked to respond to the issues raised in the complaint within 20 business days of receipt of the request.

II.E.6.c. 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.6.d. 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.6.e. 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.6.f. 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.6.g. 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 Science Accreditation Commission (ASAC), the Computing Accreditation Commission (CAC), the Engineering Accreditation Commission (EAC), and the Engineering Technology Accreditation Commission (ETAC). (ABET By-laws Section Twelve)

III.C.4.a. 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.)
III.C.5. 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 II)

III.D. Recognition – ABET’s accreditation process is ISO 9001:2008 certified. ABET is recognized in the United States by the Council for Higher Education Accreditation (CHEA) as an organization responsible for the accreditation of educational programs leading to degrees in applied science, computing, engineering, and engineering technology. CHEA is a non-profit organization of colleges and universities serving as the national advocate for voluntary self-regulation through accreditation. Graduation from an ABET-accredited program is a prerequisite for many licensing and certifying bodies and agencies. In addition, ABET is signatory to a number of mutual recognition agreements worldwide that provide recognition of graduates from ABET-accredited programs under certain conditions. Information about ABET’s recognition can be found on ABET's public web site: http://www.abet.org.

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 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 DEVELOPMENT AND REVISION APPROVAL PROCESS

IV.A. General Criteria - General Criteria, both harmonized and non-harmonized (Section I.B.1.), and their revisions may be developed by a Commission and proposed for approval by the Accreditation Council or one of ABET’s Commissions. A significant addition or revision to an element of General or Program Criteria, one that modifies its prior meaning, is considered a substantive change. A revision that is considered editorial, syntactic, or typographical and does not change the meaning of the Criteria is considered to be non-substantive.

IV.A.1. Harmonized Criteria

IV.A.1.a. A Commission drafts revision(s) to currently approved Harmonized General Criteria (Section I.B.1.a.). This involves initial action by the Commission’s Criteria Committee that exists to handle such issues and requires approval by the Commission.

IV.A.1.a.(1) The Commission’s Criteria Committee determines if the revision(s) are substantive or non-substantive. For substantive revisions, the Criteria Committee may seek feedback from appropriate constituent community(ies) that would be affected by the revision(s) in order to facilitate the Committee’s work.

IV.A.1.b. The Commission’s Criteria Committee submits substantive Harmonized General Criteria revision(s) to the full Commission for discussion and vote.

IV.A.1.c. The Commission discusses the submission and takes one of four actions:

IV.A.1.c.(1) Approve the submission with no changes for forwarding to the Accreditation Council.

IV.A.1.c.(2) Approve the submission with only non-substantive changes for forwarding to the Accreditation Council.

IV.A.1.c.(3) Return the submission to the Criteria Committee with guidance for additional consideration.

IV.A.1.c.(4) Reject or table action on the submission.

IV.A.1.d. The Commission’s Criteria Committee submits non-substantive Harmonized General Criteria revision(s) to the Commission’s Executive Committee for discussion and vote. Any vote taken on Criteria revision(s) by a Commission’s Executive Committee requires a two-thirds majority.

IV.A.1.e. The Commission Executive Committee discusses the submission and takes one of four actions:

IV.A.1.e.(1) Approve the submission with no changes for forwarding to the Accreditation Council for consideration.

IV.A.1.e.(2) Approve the submission with only non-substantive changes for forwarding to the Accreditation Council.

IV.A.1.e.(3) Return the submission to the Criteria Committee, with guidance for additional consideration.

IV.A.1.e.(4) Reject or table action on the submission.

IV.A.1.f. Revisions, substantive or non-substantive, to currently approved Harmonized General Criteria must be approved by all four Commissions. This approval is facilitated through the Accreditation Council. Any Accreditation Council approval must be unanimous.

IV.A.1.g. The Accreditation Council discusses the submission and takes one of three actions:

IV.A.1.g.(1) Forward to the ABET Board of Delegates for discussion and vote.

IV.A.1.g.(1)(a) If substantive, recommending a suitable review and comment period along with an implementation plan, if appropriate.

IV.A.1.g.(1)(b) If non-substantive, recommending immediate implementation.
IV.A.1.g.(1)(c) ABET HQ informs the public, when appropriate, of revisions forwarded by the Accreditation Council to the Board of Delegates.

IV.A.1.g.(2) Return to the Commission(s) for further work with the rationale for the additional work.

IV.A.1.g.(3) Reject or table action on the proposed revision(s).

IV.A.1.h. If forwarded, the Board of Delegates will review the submission and take one of three actions:

IV.A.1.h.(1) Approve the submission with no changes.

IV.A.1.h.(2) Return the submission to the Accreditation Council with guidance for additional consideration. The Accreditation Council will facilitate action among the Commissions.

IV.A.1.h.(3) Reject or table action on the submission.

IV.A.1.i. ABET HQ distributes substantive Harmonized General Criteria revisions to affected constituents for the review and comment period, if required; collects feedback during the comment period; and provides feedback to the Accreditation Council and the Commissions. The process is iterative until the Criteria are approved for implementation in a review cycle. Non-substantive revisions are included in the upcoming cycle’s Criteria.

IV.A.2. Non-Harmonized

IV.A.2.a. A Commission drafts revision(s) to currently approved non-Harmonized General Criteria. This involves action by the Commission’s Criteria Committee that exists to handle such issues and requires approval by the Commission.

IV.A.2.a.(1) The Commission’s Criteria Committee determines if the revision(s) are substantive or non-substantive. For substantive revisions, the Criteria Committee may seek feedback from appropriate constituent community(ies) that would be affected by the revision(s) in order to facilitate the Committee’s work.

IV.A.2.b. The Commission’s Criteria Committee submits substantive non-Harmonized General Criteria revision(s) to the full Commission for discussion and vote.

IV.A.2.c. The Commission discusses the submission and takes one of four actions:

IV.A.2.c.(1) Approve the submission with no changes for forwarding to the Area Delegation.

IV.A.2.c.(1)(a) ABET HQ informs the public, when appropriate, of revisions forwarded by the Commission to the Area Delegation.

IV.A.2.c.(2) Approve the submission with only non-substantive changes for forwarding to the Area Delegation.

IV.A.2.c.(2)(a) ABET HQ informs the public, when appropriate, of revisions forwarded by the Commission to the Area Delegation.

IV.A.2.c.(3) Return the submission to the Criteria Committee, with guidance for additional consideration.

IV.A.2.c.(4) Reject or table action on the submission.

IV.A.2.d. The Commission’s Criteria Committee submits non-substantive non-Harmonized General Criteria to the Commission’s Executive Committee for discussion and vote. Any vote taken on Criteria revision(s) by a Commission’s Executive Committee requires a two-thirds majority.

IV.A.2.e. The Commission Executive Committee discusses the submission and takes one of four actions:

IV.A.2.e.(1) Approve the submission with no changes for forwarding to the Area Delegation.
IV.A.2.e.(2) Approve the submission with only non-substantive changes for forwarding to the Area Delegation.
IV.A.2.e.(3) Return the submission to the Criteria Committee, with guidance for additional consideration.
IV.A.2.e.(4) Reject or table action on the submission.

IV.A.2.f. The Area Delegation discusses the submission and takes one of three actions:
IV.A.2.f.(1) Approve the submission with no changes.
IV.A.2.f.(2) Return the submission to the Commission, with guidance for additional consideration.
IV.A.2.f.(3) Reject or table action on the submission.

IV.A.2.g. The Area Delegation will inform the Board of Delegates of action taken.

IV.A.2.h. ABET HQ distributes substantive non-Harmonized General Criteria revisions to affected constituents for the review and comment period, if required; collects feedback during the comment period; and provides feedback to the Commission. The process is iterative until the Criteria are approved for implementation in a review cycle. Non-substantive revisions are included in the upcoming cycle’s Criteria.

IV.B. **Program Criteria (Section I.B.2.)- Substantive Revision(s) or Newly Proposed Criteria**

IV.B.1. A Lead Society (or Co-Lead Societies) drafts Program Criteria or makes revision(s) to currently approved Program Criteria. This often involves action by a committee that has been created to handle such issues. It may be called a criteria committee or possibly an education or an accreditation committee.

IV.B.1.a. In the case of newly proposed Program Criteria, the Lead Society (or Co-Lead Societies) seeks feedback from the constituent community of programs that would be affected by the Program Criteria approval.

IV.B.2. The Lead Society (or Co-Lead Societies) requests input/feedback from all Cooperating Societies.

IV.B.3. The Lead Society (or Co-Lead Societies) submits the Program Criteria to the Director, Accreditation Operations with endorsement letters deemed appropriate by the proposing Lead Society (or Co-Lead Societies):

IV.B.3.a. from constituent programs, in the case of newly proposed Program Criteria, and
IV.B.3.b. from all Cooperating Societies whether new Program Criteria or proposed revisions to Program Criteria currently in effect.

IV.B.3.c. If the submission is revision(s) to currently approved Program Criteria, the Lead Society (or Co-Lead Societies) classifies the revision(s) as substantive or non-substantive with a rationale.

IV.B.4. The Director, Accreditation Operations forwards the submission to the Commission’s Criteria Committee copying the Commission’s leadership and the Society liaison(s).

IV.B.5. ABET HQ will seek confirmation from the appropriate Commission Criteria and Executive Committee(s) for classifying the revision(s) as substantive or non-substantive. The Commission Criteria or the Commission Executive Committee may reclassify, if appropriate.

IV.B.6. Based on the classification of the proposed revision(s) to the Program Criteria, one of the following two processes will be followed.

IV.B.6.a. **Non-Substantive Revision(s)**

IV.B.6.a.(1) The Commission Criteria Committee discusses the submission and takes one of four actions:

IV.B.6.a.(1)(a) Forward to the Commission Executive Committee with no changes for discussion and vote.
IV.B.6.a.(1)(b) Forward to the Commission Executive Committee with only non-substantive changes for discussion and vote.
IV.B.6.a.(1)(c) Return to the Lead Society (or Co-Lead Societies) for further work with rationale.
IV.B.6.a.(1)(d)Reject or table action on the submission.
IV.B.6.a.(2) The Commission Executive Committee discusses the submission and takes one of four actions:
   IV.B.6.a.(2)(a) Forward (requires a two-thirds majority) to the Area Delegation for discussion and vote, recommending a suitable review and comment period. 
       IV.B.6.a.(2)(a)i. The Commission Executive Committee may make additional minor wording changes to the proposed Program Criteria, if appropriate.
   IV.B.6.a.(2)(b) Schedule a discussion and vote by the full Commission.
       IV.B.6.a.(2)(b)i. If this action is taken, the process for substantive revision(s) is applied (See IV.B.6.b.).
   IV.B.6.a.(2)(c) Return to the Lead Society (or Co-Lead Societies) for further work with rationale.
   IV.B.6.a.(2)(d) Reject or table action on the submission.
IV.B.6.b. New Program Criteria or Substantive Revision(s)
   IV.B.6.b.(1) The Commission Criteria Committee discusses the submission and takes one of four actions:
       IV.B.6.b.(1)(a) Forward to the Commission via the Executive Committee with no changes for discussion and vote.
       IV.B.6.b.(1)(b) Forward to the Commission via the Executive Committee with only non-substantive changes for discussion and vote.
       IV.B.6.b.(1)(c) Return to the Lead Society (or Co-Lead Societies) for further work with rationale.
       IV.B.6.b.(1)(d) Reject or table action on the submission.
   IV.B.6.b.(2) The Commission discusses the submission and takes one of three actions:
       IV.B.6.b.(2)(a) Forward to the Area Delegation for discussion and vote, recommending a suitable review and comment period along with an implementation plan, if appropriate.
       IV.B.6.b.(2)(b) Return to the Lead Society (or Co-Lead Societies) for further work with rationale.
       IV.B.6.b.(2)(c) Reject or table action on the submission.
IV.B.7. ABET HQ notifies the Lead Society (or Co-Lead Societies) of the outcome from the Commission.
IV.B.8. ABET HQ informs the public, when appropriate, of revisions forwarded by the Commission to the Area Delegation.
IV.B.9. The Area Delegation discusses the submission and takes one of three actions:
       IV.B.9.a. Approve the submission with no changes.
       IV.B.9.b. Return the submission to the Commission, with guidance for additional consideration.
       IV.B.9.c. Reject or table action on the submission.
IV.B.10. The Area Delegation will inform the Board of Delegates of action taken.
IV.B.11. ABET HQ distributes the Program Criteria to affected constituents for the review and comment period; collects feedback during the comment period; and provides feedback to the
Commission for discussion and vote. The process is iterative until the Criteria are approved for implementation in a review cycle. *Non-substantive* revisions are included in the upcoming cycle’s Criteria.
There are no proposed changes to the Accreditation Policy and Procedure Manual for which the ABET Board of Delegates is requiring a one-year review and comment period.