



## **PRELIMINARY REPORT OF THE REAFFIRMATION COMMITTEE**

(Updated January 2024)

### **Statement Regarding the Report**

*The Board of Trustees of the Southern Association of Colleges and Schools Commission on Colleges (SACSCOC) is responsible for making the final determination on reaffirmation of accreditation based on the findings contained in this committee report, the institution's response to issues contained in the report, other assessments relevant to the review, and application of SACSCOC policies and procedures. Final interpretation of the Principles of Accreditation and final action on the accreditation status of the institution rest with SACSCOC Board of Trustees.*

**Name of the Institution:** Saint Philip's College  
San Antonio, TX

**Date of the Review:** April 22 – 23, 2025

**SACSCOC Staff Member:** Dr. J. Matthew Melton

**Chair of the Committee:** Dr. Gareth M. Euridge  
Professor, English  
Tallahassee State College  
Tallahassee, FL

## Part I. Overview and Introduction to the Institution

*The report from the Off-Site Reaffirmation Committee represents the preliminary conclusions of the Committee based on the application of the Principles of Accreditation to information provided by the institution in its completed Compliance Certification. This report is forwarded to the institution and the On-Site Reaffirmation Committee. The institution will have an opportunity to respond to the Off-Site Reaffirmation Committee's findings in a Focused Report that also will be sent to the members of the On-Site Reaffirmation Committee. The On-Site Reaffirmation Committee will conduct interviews, review on-site documents, update the preliminary report as appropriate, and approve a final Report of the Reaffirmation Committee. The Report and the institution's response are forwarded to the Commission's Board of Trustees for final action on reaffirmation of accreditation.*

## Part II. Assessment of Compliance

*Sections 1-14 to be completed by the Off-Site Reaffirmation Committee and the On-Site Reaffirmation Committee. Standards 1.1, 2.1, 3.1, 4.1, 5.1, 6.1, 7.1, 8.1, 9.1, 9.2, 9.3, 11.1, 12.1, 13.1, and 13.2 are Core Requirements; they are formatted in Bold.*

### Section 1: The Principle of Integrity

- 1.1 **The institution operates with integrity in all matters.**  
(Integrity) [CR; Off-Site/On-Site Review]  
(Note: This principle is not addressed by the institution in its Compliance Certification.)

#### Compliance

The Off-Site Reaffirmation Committee found no evidence of a lack of integrity

### Section 2: Mission

- 2.1 **The institution has a clearly defined, comprehensive, and published mission specific to the institution and appropriate for higher education. The mission addresses teaching and learning and, where applicable, research and public service.**  
(Institutional mission) [CR]

#### Compliance

The institution most recently revised its mission statement during a strategic planning event held in May of 2023. Faculty, staff, administrators, and students provided input. The resulting mission statement reads as follows: "St. Philip's College, a Historically Black College and Hispanic Serving Institution founded in 1898, is a comprehensive

public college offering degrees and certificates, whose mission is to empower our diverse student population through educational achievement and career readiness.”

The mission statement is published on the college’s website, in the student handbook, and faculty handbook. It is also being printed and will be prominently displayed on campus.

The statement is comprehensive and appropriate for higher education. A portion of the statement, “empowering our diverse student population through educational achievement and career readiness,” addresses teaching and learning.

## Section 3: Basic Eligibility Standard

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### 3.1 **An institution seeking to gain or maintain accredited status**

[Note: A member institution is not required to provide a comprehensive narrative and supporting documentation for the standards in Section 3 unless something has changed since its last comprehensive review. Institutions should, however, affirm in writing that no changes have occurred that would warrant providing a response to these standards.]

#### 3.1.a **has degree-granting authority from the appropriate government agency or agencies.** (Degree-granting authority) [CR]

##### **Compliance**

The institution enjoys degree-granting authority as established by the Texas Higher Education Coordination Board for certificate, associates and baccalaureate level programs.

#### 3.1.b **offers all course work required for at least one degree program at each level at which it awards degrees.** (For exceptions, see SACSCOC policy “Documenting an Alternative Approach.”) (Course work for degrees) [CR]

##### **Compliance**

The institution provided evidence of compliance with this standard. This documentation included the course catalog, degree plans, transcript analyses, and program accreditation letters.

#### 3.1.c **is in operation and has students enrolled in degree programs.** (Continuous operation) [CR]

##### **Compliance**

According to the materials submitted, the institution has been in continuous operation since its founding in 1898. It has a current enrollment of approximately 38,000 students.

## Section 4: Governing Board

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- 4.1 The institution has a governing board of at least five members that:
- (a) is the legal body with specific authority over the institution.
  - (b) exercises fiduciary oversight of the institution.
  - (c) ensures that both the presiding officer of the board and a majority of other voting members of the board are free of any contractual, employment, personal, or familial financial interest in the institution.
  - (d) is not controlled by a minority of board members or by organizations or institutions separate from it.
  - (e) is not presided over by the chief executive officer of the institution.
- (Governing board characteristics) [CR]

### Compliance

Governance structure for the institution is delineated in the Texas Constitution and in the Texas Education Code Title 3. The institution is governed by a nine-member Board of Trustees and a non-voting student trustee as part of the Alamo Colleges District (ACD). As delineated in board policy, the board serves as the legal authority with fiduciary oversight of the institution. The chair of the board presides over board meetings and only board members may vote. This practice was documented in board minutes. As per board policy, the presiding officer and members are free from contractual employment of the institution. Board policies also assure board independence because the CEO does not preside over the board. A president serves as CEO of the institution and is responsible for overseeing all institutional operations including ensuring compliance with board policies, aligning strategic priorities, and maintaining separation between the governance and the administration of the institution. The president also reports directly to the chancellor of the Alamo Colleges District. Links to board approved budgets were also provided.

- 4.2 The governing board

- 4.2.a ensures the regular review of the institution's mission.  
(Mission review)

### Compliance

The institution provided Board Policy A.1.3.e and Texas Education Code section 51.352 as evidence of the governance structure used to prescribe regular review of the mission statement. The college provided the district's review of both the board policy regarding the mission review and the updated mission statement for the district. In addition, the college provided evidence of the Board's approval of the College's revised mission statement in its August 15, 2023 meeting minutes.

- 4.2.b ensures a clear and appropriate distinction between the policy-making function of the board and the respective responsibilities of the administration and faculty to administer and implement policy.

*(Board/administrative distinction and shared governance)*

### **Compliance**

The institution provided policies and evidence that the policy-making function of the board and the administration of the institution and faculty were kept separate and do not overlap. This is delineated in Board Policy Organizational Plan and in Board Responsibilities.

- 4.2.c selects and regularly evaluates the institution's chief executive officer.  
*(CEO evaluation/selection)*

### **Non-Compliance**

The selection process for the CEO is delineated in Board Procedures provided in the report. Executive search firms and a screening committee are utilized for the search of college presidents. Final decisions on hiring are made by the Board in compliance with Texas Education Code and Texas Government Code. Per Board policy the CEO is evaluated annually by the chancellor who reports the outcome to the board. The evaluation process complies with the Texas Education Code requiring governing boards to appoint and evaluate CEOs of institutions.

The Off-Site Reaffirmation Committee was unable, however, to find examples of this annual evaluation and so could not confirm implementation of the policy.

- 4.2.d defines and addresses potential conflict of interest for its members.  
*(Conflict of interest)*

### **Compliance**

The Board of Trustees has policies and practices that address potential conflict of interest among its members. This is delineated in documents entitled *Board of Trustee Ethics* and *Nepotism, Conflicts of Interest*. Additionally, the Board adheres to an *Ethics Handbook* that is comprehensive. The district has also established an Ethics Hotline that allows anyone to report perceived misconduct anonymously. Board members must also attend comprehensive orientation training outlined in board policy.

- 4.2.e has appropriate and fair processes for the dismissal of a board member.  
*(Board dismissal)*

### **Compliance**

The Board of Trustees District Board Policy delineates grounds for removal of a trustee. Violations of the Texas Constitution, Local Government Code, Texas Education Code and any Prohibited Practices outlined in the Texas Association of Community Colleges could be grounds for dismissal. The Texas Local Government Code outlines specific procedures that must be followed for removal of board members.

- 4.2.f protects the institution from undue influence by external persons or bodies.  
(*External influence*)

#### **Compliance**

The Board of Trustees preserves institutional independence through policies delineated in the Texas Education Code and via Board Policies covering Conflict of Interest, Nepotism and through requirement outlined in the Texas Local Government Code. These policies and requirements ensure Trustees act independently and remain free from external influence.

- 4.2.g defines its responsibilities and regularly evaluates its effectiveness.  
(*Board self-evaluation*)

#### **Compliance**

The institution follows the structured Association of Community College Trustees administered evaluation process. This process is primarily implemented during regular board retreats that include self-assessment exercises. Self-assessment documents were provided for 2021 and 2023.

- 4.3 If an institution's governing board does not retain sole legal authority and operating control in a multiple-level governance system, then the institution clearly defines that authority and control for the following areas within its governance structure: (a) institution's mission, (b) fiscal stability of the institution, and (c) institutional policy.  
(*Multi-level governance*)

#### **Not Applicable**

The institution's governance structure does not have multiple levels so this standard is not applicable.

## **Section 5: Administration and Organization**

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- 5.1 **The institution has a chief executive officer whose primary responsibility is to the institution.**  
(*Chief executive officer*) [CR]

#### **Compliance**

The Board Policy Organizational Plan identifies the president of the college as the CEO. This document also indicates that the president directs all operational areas of the college, including its mission, vision, values, and advancement of the strategic agenda for the institution. This responsibility is also outlined in the president's job description. Organization charts show that the CEO holds no other positions in the organization as per board policy. Additionally, board minutes illustrate that the Chair of the Board presides over the governance board meetings and that only board members can cast votes on governance-related policy.

- 5.2 The chief executive officer has ultimate responsibility for, and exercises appropriate control over, the following:

- 5.2.a The institution's educational, administrative, and fiscal programs and services.  
(*CEO control*)

**Compliance**

The president of the institution serves as the Chief Executive Officer who is responsible for and has control over the institutions educational, administrative and fiscal programs, and services. This is delineated in the President's job description, linked agenda items, and operational approvals authorized by president.

- 5.2.b The institution's intercollegiate athletics program.  
(*Control of intercollegiate athletics*)

**Compliance**

The institution does not participate in intercollegiate athletics

- 5.2.c The institution's fund-raising activities.  
(*Control of fund-raising activities*)

**Compliance**

As delineated in the president's job description and board policy, all fundraising activities the responsibility of the CEO, with delegated authority given to the Director of Institutional Advancement and Grants Development. Evidence in support of this structure was provided in the report's link to cabinet meetings, golf tournament brochures, and other presidential fundraising campaign documentation.

- 5.3 For any entity organized separately from the institution and formed primarily for the purpose of supporting the institution or its programs:

- (a) The legal authority and operating control of the institution is clearly defined with respect to that entity.
- (b) The relationship of that entity to the institution and the extent of any liability arising from that relationship are clearly described in a formal, written manner.
- (c) The institution demonstrates that (1) the chief executive officer controls any fund-raising activities of that entity or (2) the fund-raising activities of that entity are defined in a formal, written manner that assures those activities further the mission of the institution.

(*Institution-related entities*)

**Compliance**

The institution provided a Memorandum of Understanding (MOU) documenting that the Alamo Colleges Foundation is a separate 501(c)(3) established to raise and manage private resources supporting the mission of the district and the colleges. The MOU

describes the relationship between the entities and states that the Foundation shall have the fiduciary duty to care for and manage the donations for the benefit of the district and colleges. The MOU further states that the college shall benefit from the relationship with the Foundation, but any financial liabilities arising out of the MOU shall be those of the district rather than the colleges.

The president's job description contains specific language regarding the responsibilities of developing and leading fundraising initiatives for the college. As an example of the president's control of fundraising, the institution provided a fundraising report which outlined a major fundraising initiative and included goals, amount raised, and projects.

- 5.4 The institution employs and regularly evaluates administrative and academic officers with appropriate experience and qualifications to lead the institution.  
(*Qualified administrative/academic officers*) **[Off-Site/On-Site Review]**

#### **Compliance**

The institution provided evidence that it employs administrative and academic officers with the appropriate credentials based on the job description. Additionally, the institution submitted a chart listing cabinet personnel, job descriptions, relevant education, relevant experience, and dated performance reviews.

- 5.5 The institution publishes and implements policies regarding the appointment, employment, and regular evaluation of non-faculty personnel.  
(*Personnel appointment and evaluation*)

#### **Compliance**

The institution provides evidence supporting compliance in the form of Alamos College District's published policies, institutional human resources policies, policies regarding appointment, employment, and regular evaluation of non-faculty personnel. Sample evaluations were provided covering a period of the most recent three years.

## **Section 6: Faculty**

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- 6.1 **The institution employs a sufficient number of full-time faculty members to support the mission and goals of the institution.**  
(*Full-time faculty*) **[CR; Off-Site/On-Site Review]**

#### **Compliance**

The Off-Site Reaffirmation Committee reviewed the mission and strategic goals of the institution, together with the list of academic programs and faculty. Additionally, the Committee was able to review the courses taught along with the student to faculty ratios and the full-time to part-time percentages with and without overloads. The Committee also reviewed the job descriptions for fulltime and part time faculty. The duties of full-time faculty are clearly defined as teaching, assessment of learning, advising, and service. The number of full-time faculty is sufficient to carry out these duties.

- 6.2 For each of its educational programs, the institution

- 6.2.a Justifies and documents the qualifications of its faculty members.  
(*Faculty qualifications*)

#### **Non-Compliance**

The Off-Site Reaffirmation Committee reviewed the credentialing requirements for courses that service academic transfer, workforce education, developmental education, and upper division bachelor programs. The minimum academic credential for each course was clearly identified.

The Committee was unable to determine whether 22 (twenty-two) faculty members satisfied the credentialing requirement for the courses they teach. The faculty worksheet appended at the end of the report identifies these faculty members.

- 6.2.b Employs a sufficient number of full-time faculty members to ensure curriculum and program quality, integrity, and review.  
(*Program faculty*) **[Off-Site/On-Site Review]**

#### **Compliance**

The institution provided evidence of compliance with Principle 6.2.b - Program faculty. The institution employs a sufficient number of full-time faculty members to ensure curriculum and program quality, integrity, and review (table 6.2.b-1). The table includes sufficient data of number of adjunct and full-time faculty.

- 6.2.c Assigns appropriate responsibility for program coordination.  
(*Program coordination*) **[Off-Site/On-Site Review]**

#### **Compliance**

The institution provided evidence of compliance by identifying the academic requirements for program coordinators as published in the Faculty Credentialing Handbook (6.2c-1\_FacultyCredHandbook). The institution then included a table (6.2c-2) which lists all program coordinators with their appropriate qualifications and academic credentials.

- 6.3 The institution publishes and implements policies regarding the appointment, employment, and regular evaluation of faculty members, regardless of contract or tenure status.  
(*Faculty employment and evaluation*)

#### **Non-Compliance**

The institution provided evidence supporting compliance in the form of Full-Time and Adjunct Faculty Job Descriptions, Employee Evaluation Policy of Alamos Colleges District and institutional Human Resources policy on Employee Evaluations, Alamos Colleges District Classroom Observation Form, Faculty Evaluation by Chair/Supervisor and a single sample faculty evaluation for a full-time tenured faculty member. In the absence of a complete evaluation portfolio and with just a the single, one-year sample,

the Off-Site Reaffirmation Committee was unable to confirm regular evaluation of non-tenured or part-time faculty members.

- 6.4 The institution publishes and implements appropriate policies and procedures for preserving and protecting academic freedom.  
*(Academic freedom)*

#### **Compliance**

The institution follows the Texas State Administrative Code on Academic Freedom and Faculty Security (6.4-1\_Rule7.4TexaAdminCode). This rule requires that, "the institution shall adopt, adhere to, and distribute to all members of the faculty a statement of academic freedom assuring freedom in teaching, research, and publication." This rule is then ratified by board policy. In addition, the institution has developed a comprehensive grievance process for faculty members who believe their academic freedom has been violated.

- 6.5 The institution provides ongoing professional development opportunities for faculty members as teachers, scholars, and practitioners, consistent with the institutional mission.  
*(Faculty development)*

#### **Compliance**

The institution provided evidence supporting compliance in the form of a recent Strategic Plan indicating promotion of leadership and a Culture of Assessment initiative. In addition, the Instructional Innovation Center provides a variety of professional development opportunities including "Lunch and Learn" events and micro-lectures offered in various formats. Samples of faculty training transcripts, and a calendar of professional development activities at the institution was also provided.

## **Section 7: Institutional Planning and Effectiveness**

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- 7.1 **The institution engages in ongoing, comprehensive, and integrated research-based planning and evaluation processes that (a) focus on institutional quality and effectiveness and (b) incorporate a systematic review of institutional goals and outcomes consistent with its mission.**  
*(Institutional planning) [CR]*

#### **Non-Compliance**

The institution adheres to the Good to Great strategic planning process as a framework. This process includes four stages. As a member of the Alamo College District, the college aligns with district goals while maintaining self-governance and developing its related but separate strategic plan. The process is guided by the college's planning, budgeting, and assessment cycle and occurs annually.

The first stage of planning includes an initial review of opportunities and challenges by reviewing operational unit assessment plans. The reports enable leadership to identify trends and align strategic goals with student success metrics.

The next stage begins with a planning retreat, which includes internal and external stakeholders to ensure a breadth of input and engagement. Proposals are developed and forwarded to the senior leadership and cabinet members who review the proposals and finalize the strategic plan. The committee was unable, however, to find a copy of the strategic plan and any related evidence of leadership or board approval in the narrative.

The third stage of this process includes implementation. This work aligns with the college's budget cycle while the final stage focuses on evaluation. The institution notes that this stage culminates in operational unit assessment plan report-outs and provided example reports from the Dean of Enrollment services for the 2023-24 academic year.

The institution provided a table of graduation and persistence rates (2021-2023) as evidence of an emphasis on improving student retention and success, but the Off-Site Reaffirmation Committee could not locate related strategic goals and/or a narrative explaining how the data provide feedback regarding institutional effectiveness.

- 7.2 The institution has a QEP that (a) has a topic identified through its ongoing, comprehensive planning and evaluation processes; (b) has broad-based support of institutional constituencies; (c) focuses on improving specific student learning outcomes and/or student success; (d) commits resources to initiate, implement, and complete the QEP; and (e) includes a plan to assess achievement.  
(*Quality Enhancement Plan*)

Comment:

The institution did not provide any documentation concerning its QEP

- 7.3 The institution identifies expected outcomes of its administrative support services and demonstrates the extent to which the outcomes are achieved.  
(*Administrative effectiveness*)

### **Non-Compliance**

The institution has developed the Operational Unit Assessment Plan (OUAP) process to identify outcomes of administrative support units and assess the extent to which the outcomes are achieved. This process aligns with the Planning, Budgeting, and Assessment (PBA) cycle and is implemented annually.

Program coordinators and departmental leaders identify goals and objectives at the start of each cycle. Each goal is aligned with an institutional strategic goal. Action plans and targets are developed, and information is stored in a proprietary software platform.

The institution provided examples of administrative units' objectives, targets, assessment measures, results, and any related action plans for the 2023-24 year. However, the Off-Site Reaffirmation Committee was unable to find evidence of additional review, such as unit meeting minutes or data analysis reports, for determining whether outcomes had been assessed and achieved.

## Section 8: Student Achievement

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- 8.1 The institution identifies, evaluates, and publishes goals and outcomes for student achievement appropriate to the institution's mission, the nature of the students it serves, and the kinds of programs offered. The institution uses multiple measures to document student success.

*(Student achievement)* [CR; Off-Site/On-Site Review]

[Note: Each member institution has chosen a specific metric with SACSCOC for measuring graduation rate and analyzing that measure of student success. As part of its response to this standard, the institution should identify its chosen metric; provide appropriate data regarding its performance as measured by that metric (including its baseline data, goals, and outcomes); and discuss any changes it has made based on its analysis of this graduation-rate data. Institutions are also required to disaggregate their graduation data in appropriate ways; they should discuss that disaggregated data and any changes made as a result of analyzing that data.]

### Compliance

The institution has identified ten student achievement goals appropriate to its mission. These achievement goals are (1) enrollment, (2) productive grade rates, (3) course completion rates, (4) fall-to-fall retention rates, (5) 4-year graduation rates, (6) 6-year student completion rates, (7) degrees and certificates awarded, (8) transfer rates, (9) employment rates, and (10) licensure exam pass rates. The institution has identified thresholds and targets for each indicator.

The institution selected the National Student Clearinghouse six-year graduation rate to fulfill the measure of graduation rates required by SACSCOC. The institution provided disaggregated data on these graduates by race and ethnicity. These demographics were chosen as appropriate graduation rate indicators as they relate to the diverse group of students that comprise the institution's student body and they focus on student achievement for both full-time and part-time students.

- 8.2 The institution identifies expected outcomes, assesses the extent to which it achieves these outcomes, and provides evidence of seeking improvement based on analysis of the results in the areas below:

- 8.2.a Student learning outcomes for each of its educational programs.

*(Student outcomes: educational programs)* [Off-Site/On-Site Review]

### Non-Compliance

The institution described an integrated process of assessment that included operation unit and assessment plan review and institutional unit review. Assessment of program learning outcomes occurs on a regular basis as part of the Operational Unit and Assessment Planning Activities.

A discussion of program learning outcomes and how they are developed in Career and Technical Education programs was provided using Cake Decorating and Automotive Technologies as examples. The institution also highlighted its curriculum mapping process that maps program learning outcomes to program

courses. Automotive Technologies was provided as an example. When reviewing the sample, the committee did not see what rationale was being used for the program sample methodology.

Operational Unit Assessment Plans are reviewed annually, and the institution provided the template used for review. A screen shot was provided of the links to the reports, but the committee was not able to access and review that information.

The institution has used two software platforms as repositories for the assessment of program student learning outcomes, and provided four sample reports of objectives and results from arts and sciences, applied science and technology, medical laboratory technician, and the aircraft program. The Off-Site Reaffirmation Committee reviewed these samples but was unable to determine how they were representative of all programs. Additionally, the Committee was unable to see that the outcomes identified were program learning outcomes.

The Off-Site Reaffirmation Committee was unable to determine whether each educational program identifies student learning outcomes, measures the extent to which outcomes are achieved, and seeks improvement based on the analysis of results with the evidence provided.

- 8.2.b Student learning outcomes for collegiate-level general education competencies of its undergraduate degree programs.  
(*Student outcomes: general education*)

### **Compliance**

The institution follows the Texas Higher Education Coordinating Board (THECB). The general education credit hour requirement for the AAS is outlined in the THECB's Guidelines for Instructional Programs in Workforce Education (GIPWE). They also provided assessment rubrics and clearly stated SLOs (8.2.b-2\_AssessmentRubrics).

- 8.2.c Academic and student services that support student success.  
(*Student outcomes: academic and student services*)

### **Non-Compliance**

The institution has identified four academic and sixteen student success units that support student success. For these academic and student support services, the college uses a consistent calendar and process of assessment. Using the institutional calendar and operational unit assessment planning (OUAP) process, the college annually identifies expected outcomes, connects these outcomes to the institution's strategic goals and identifies how it plans to measure the extent to which these outcomes have been achieved.

During the Operational Unit Assessment Planning Report Out, each of these units is responsible for reporting its objectives, the target for each objective, the assessment measure, the actual results and source of data, and a gap analysis

or action plan which serves to note how the college is using the results of the assessment for improvement.

The institution presented evidence of this work by sharing the PowerPoint that contained the OUAP reports for 2024. These reports included assessment results for the 2023-24 academic year as well as the objectives and assessment plans for the forthcoming 2024-25 year. However, the Off-Site Reaffirmation Committee was unable to locate any additional cycles of review to confirm the institution's policy of annual assessment.

## **Section 9: Educational Program Structure and Content**

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- 9.1 **Educational programs (a) embody a coherent course of study, (b) are compatible with the stated mission and goals of the institution, and (c) are based on fields of study appropriate to higher education.**  
(Program content) [CR; Off-Site/On-Site Review]

### **Compliance**

The institution provided evidence supporting compliance in the form of published policies of the Alamo Colleges District that align the institution with policies of the Texas Higher Education Coordinating Board. These policies establish the breadth of the General Education component in the Associate of Arts, Associate of Sciences, and Associate of Arts in Teaching programs. The RN to BSN program is similarly positioned. These programs embody a coherent course of study, are compatible with the stated mission and goals of the institution and are based on fields of study appropriate to higher education.

- 9.2 **The institution offers one or more degree programs based on at least 60 semester credit hours or the equivalent at the associate level; at least 120 semester credit hours or the equivalent at the baccalaureate level; or at least 30 semester credit hours or the equivalent at the post-baccalaureate, graduate, or professional level. The institution provides an explanation of equivalencies when using units other than semester credit hours. The institution provides an appropriate justification for all degree programs and combined degree programs that include fewer than the required number of semester credit hours or its equivalent unit.**  
(Program Length) [CR; Off-Site/On-Site Review]

### **Compliance**

The institution adheres to Texas Administrative Code (Title 19, Part 1, Chapter 7, Subchapter A, Rule 7.3, Section 5, A and B) which requires a minimum of 60 semester credit hours for each associate-level degree offered, including all Associate of Arts in Teaching, Associate of Arts, Associate of Science, and Associate of Applied Science degrees (9.2-1). As listed on the Texas Higher Education Coordinating Board (THECB) report titled, THECB Program Inventory by CIP (9.2-2), the institution offers two Associate of Arts in Teaching (AAT) degrees, an Associate of Arts (AA) degree, an Associate of Science (AS) degree, and 46 Associate of Applied Science (AAS) degrees.

Example degree plans for AA, AS, AAT, and AAS degrees are provided in (9.2-3, 9.2-4, 9.2-5, and 9.2-6).

**9.3 The institution requires a general education component at the undergraduate level that:**

- (a) is based on a coherent rationale.
- (b) is a substantial component of each undergraduate degree program. For degree completion in associate programs, the component constitutes a minimum of 15 semester hours or the equivalent; for baccalaureate programs, a minimum of 30 semester hours or the equivalent.
- (c) ensures breadth of knowledge. These credit hours include at least one course from each of the following areas: humanities/fine arts, social/behavioral sciences, and natural science/mathematics. These courses do not narrowly focus on those skills, techniques, and procedures specific to a particular occupation or profession.

*(General education requirements [CR; Off-Site/On-Site Review])*

**Compliance**

The institution provided evidence of compliance that the General Education component for its undergraduate programs is based on a coherent rationale, is a substantial component of each undergraduate degree program (i.e., 42 hours), and ensures a breadth of knowledge, including at least one course from the three required areas. The institution provided evidence in the form of published policies of the Texas Higher Education Coordinating Board, the College Catalog, and sample degree audit forms.

**9.4 At least 25 percent of the credit hours required for an undergraduate degree are earned through instruction offered by the institution awarding the degree.**

*(Institutional credits for an undergraduate degree)*

**Compliance**

The institution provided evidence of compliance which includes the College Catalog, sample student transcripts, and sample degree audits. The College Catalog clearly indicates that at least 25 percent of the credit hours required for an undergraduate degree must be earned through instruction offered by the institution.

**9.5 At least one-third of the credit hours required for a graduate or a post-baccalaureate professional degree are earned through instruction offered by the institution awarding the degree.**

*(Institutional credits for a graduate/professional degree)*

**Not Applicable**

**9.6 Post-baccalaureate professional degree programs and graduate degree programs are progressively more advanced in academic content than undergraduate programs, and are structured (a) to include knowledge of the literature of the discipline and (b) to ensure engagement in research and/or appropriate professional practice and training.**

*(Post-baccalaureate rigor and curriculum)*

**Not Applicable**

- 9.7 The institution publishes requirements for its undergraduate, graduate, and post-baccalaureate professional programs, as applicable. The requirements conform to commonly accepted standards and practices for degree programs.  
*(Program requirements)*

### **Compliance**

The institution uses the publicly accessible college website to publish requirements for all undergraduate programs of study in the “Degrees, Certificates, and Transfer Advising Guides” section of the college catalog (9.7-1\_DegCert, 9.7-2\_DegCertType). The institution’s catalog is also available on the website (9.7-4\_2425CollegeCat) and provides a list of all programs offered, as shown in the 2024-2025 Catalog (9.7-2).

## **Section 10: Educational Policies, Procedures, and Practices**

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- 10.1 The institution publishes, implements, and disseminates academic policies that adhere to principles of good educational practice and that accurately represent the programs and services of the institution.  
*(Academic policies)*

### **Compliance**

The institution provided evidence of compliance with this standard by documenting the College Catalog that contains sections dealing with course attendance, grading systems, GPA requirements, academic standards, and academic probation and dismissal. The institution also provided membership details, bylaws, and sample minutes of the Academic Policy Committee.

- 10.2 The institution makes available to students and the public current academic calendars, grading policies, cost of attendance, and refund policies.  
*(Public information)* **[Off-Site/On-Site Review]**

### **Compliance**

The institution submitted evidence that it publishes academic calendars, grading policies, cost of attendance, and refund policies on a wide range of media platforms through its centralized eCatalog dynamic document system.

- 10.3 The institution ensures the availability of archived official catalogs (digital or print) with relevant information for course and degree requirements sufficient to serve former and returning students.  
*(Archived information)*

### **Compliance**

The institution provided evidence that it provides access to catalogs from 1903-1904 to the current year. Catalogs from 2009-2010 forward are available from the institution’s website, as shown by a screenshot presented as evidence. Older catalogs are available

from the College Archives Office or the Records and Registration Office. The committee reviewed a screenshot of the “Records, Registration, and Transcripts” page of the institution’s website that provides clear instructions for accessing older catalogs.

- 10.4 The institution (a) publishes and implements policies on the authority of faculty in academic and governance matters, (b) demonstrates that educational programs for which academic credit is awarded are approved consistent with institutional policy, and (c) places primary responsibility for the content, quality, and effectiveness of the curriculum with its faculty.  
(*Academic governance*)

### **Compliance**

The Off-Site Reaffirmation Committee reviewed excerpts of the faculty handbook, the academic policy handbook, curriculum committee guidebook, and faculty job descriptions. Subject to ultimate approval by the Board of Trustees, the curriculum committee reviews, evaluates, and determines all curriculum changes. The Committee also noted that there is a local curriculum committee and a district curriculum team; the latter evaluates curricular changes after it is approved from the local committee. The membership list of these committees was also provided.

- 10.5 The institution: (a) publishes admissions policies consistent with its mission; (b) ensures that its recruitment materials and presentations accurately represent the institution’s practices, policies, and accreditation status; and (c) ensures that independent contractors or agents used for recruiting purposes and for admission activities are governed by the same principles and policies as institutional employees.  
(*Admissions policies and practices*) **[Off-Site/On-Site Review]**

### **Compliance**

The institution is an open-door admission institution and publishes admissions policies in its eCatalog, which is available to the public and students. The policies include 11 admission categories that reflect the college’s mission as an open-door admission institution. The institution submitted evidence to the committee supporting its claim that it publishes admissions policies consistent with its mission. The institution also provided documentation of recruitment materials representing its practices and policies, such as the All-College Viewbook and All Access Pass. Under the supervision of the Director of Enrollment, enrollment coaches and support specialists manage college recruitment efforts. The institution does not use external contractors or agents for recruiting or admission purposes.

- 10.6 An institution that offers distance or correspondence education:
- (a) ensures that the student who registers in a distance or correspondence education course or program is the same student who participates in and completes the course or program and receives the credit.
  - (b) has a written procedure for protecting the privacy of students enrolled in distance and correspondence education courses or programs.
  - (c) ensures that students are notified, in writing at the time of registration or enrollment, of any projected additional student charges associated with verification of student identity.
- (*Distance and correspondence education*) **[Off-Site/On-Site Review]**

## Compliance

The institution utilizes various verification and security measures. The Off-Site Reaffirmation Committee noted that the college uses BioSig-ID to authenticate student identity. The institution also uses Respondus lockdown browser to maintain integrity of identification in distance education courses. In addition, FERPA compliance is extended to all distance education courses.

- 10.7 The institution publishes and implements policies for determining the amount and level of credit awarded for its courses, regardless of format or mode of delivery. These policies require oversight by persons academically qualified to make the necessary judgments. In educational programs not based on credit hours (e.g., direct assessment programs), the institution has a sound means for determining credit equivalencies.  
(*Policies for awarding credit*) **[Off-Site/On-Site Review]**

## Compliance

The institution provided evidence supporting compliance in the form of the Core Curriculum Guidebook and eCatalog. The assignment of credit hours for courses and programs at the college follows state guidelines, as outlined by the Texas Higher Education Coordinating Board (THECB). These guidelines apply to all courses and programs, regardless of their format or delivery mode. All academic transfer and workforce programs offered by the college are based on credit hours.

- 10.8 The institution publishes policies for evaluating, awarding, and accepting credit not originating from the institution. The institution ensures (a) the academic quality of any credit or coursework recorded on its transcript, (b) an approval process with oversight by persons academically qualified to make the necessary judgments, and (c) the credit awarded is comparable to a designated credit experience and is consistent with the institution's mission.  
(*Evaluating and awarding external academic credit*)

## Compliance

The institution provided evidence of compliance in the form of the eCatalog, which outlines policies and procedures for evaluating, awarding, and accepting credit not originating from the institution. The institution uses the Texas Common Course Numbering System and relies on the Workforce Education Course Manual to evaluate equivalent transfer credit for career and technical education courses. The Transfer Credit Policy is articulated in the College Catalog.

- 10.9 The institution ensures the quality and integrity of the work recorded when an institution transcripts courses or credits as its own when offered through a cooperative academic arrangement. The institution maintains formal agreements between the parties involved, and the institution regularly evaluates such agreements.  
(*Cooperative academic arrangements*)

## Not Applicable

The institution does not offer courses or credits through a cooperative academic arrangement.

## **Section 11: Library and Learning/Information Resources**

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- 11.1 The institution provides adequate and appropriate library and learning/information resources, services, and support for its mission.**  
*(Library and learning/information resources) [CR]*

### **Non-Compliance**

The institution provides adequate and appropriate library facilities and services to support its mission. The institution provides generous library spaces and equipment for each of its campuses. Both locations offer study rooms for individuals and groups, a computer lab, a SMART-equipped computer lab for library instruction, a virtual reality and video/podcasting lab, a 3D printing lab, printer, and equipment such as laptops to check out for use in the library.

According to a table in the narrative, physical library collections available during library hours include 59,437 books, 2,384 media, and 473 serials. Electronic collections, available 24/7, include 100,000 electronic books, 107 databases, 41,895 streaming media, and 64,577 electronic journals. The library's Collection Development Policy was unavailable for review, but the narrative listed some of the policy's considerations for selection. A liaison program encourages librarians and faculty to collaborate for instruction and collection development. The Committee was unable to find evidence showing how the collection development policy is followed, whether faculty are participating in collection development, and how well the collections support all programs at the institution.

Library services focus on instruction and interlibrary loan. Formal classroom instruction is available by faculty request at any campus and online, as shown by the Instruction Request Form. Informal instruction options include Book-A-Librarian appointments for those with research questions; the Ask Us service, which provides assistance via phone, email, text, chat, and Zoom; online videos; and research guides. Students and faculty may borrow items from other libraries at the local, state, and national level through library partnerships.

While the library provides many resources, both print and digital, the Off-Site Reaffirmation Committee could not find evidence, such as communication samples, discipline-specific resource listings, or discipline-oriented collection strategies to show how well the collections appropriately support all programs at the institution.

- 11.2 The institution ensures an adequate number of professional and other staff with appropriate education or experiences in library and/or other learning/information resources to accomplish the mission of the institution.**  
*(Library and learning/information staff)*

### **Compliance**

The institution employs an adequate number of qualified librarians and other staff to support 14,281 students and accomplish its mission. According to the table provided in the narrative, the institution currently employs a library director, five full-time librarians, and five part-time librarians, with an additional full-time librarian currently in the hiring process; three part-time librarian positions are vacant. The institution also employs three full-time library assistants and five part-time library assistants. The Off-Site Reaffirmation Committee reviewed resumes provided as evidence; all ten of the resumes provided show the librarian holds a master's degree in library science or the equivalent.

- 11.3 The institution provides (a) student and faculty access and user privileges to its library services and (b) access to regular and timely instruction in the use of the library and other learning/information resources.  
(*Library and learning/information access*)

### **Non-Compliance**

The institution provides access to services and resources and offers user-privileges to students, faculty, and staff. Electronic resources and services can be accessed through the library's web pages and online catalog. Electronic resources are available to students and employees at any time once they sign in with their ACES logins; onsite services are available during library operating hours. The institution's students and employees may check out physical resources with a valid institution ID number. The Martin Luther King campus library is open 68 hours a week during fall and spring semesters; this includes some weekend hours. The Southwest campus library is open 53 hours a week during fall and spring semesters; no weekend hours are available at this location. Library hours are reduced during May and summer terms.

According to the Academic Services OUAP report-out slides presented as evidence for Standard 8.2.c, one of the library's objectives for 2024-2025 is to increase information literacy instruction by 40% over 2023-2024 and increase Research Guides usage.

Librarians visit the 19 locations which service the Early College and dual credit programs each semester to make students aware of library resources and services available to them. The Off-Site Reaffirmation Committee reviewed a log of contacts for all locations and signed accountability forms for visits to 10 locations during spring semester, 2024.

The Standard 11.1 narrative provided a table showing results of student feedback surveys for fall 2023. The table shows 19 information literacy presentations for fall semester 2023; however, the narrative noted that the numbers in the table do not represent the total number of sessions taught. The Off-Site Reaffirmation Committee could not find evidence showing the full number of presentations. Similarly, while the Committee reviewed screenshots of the library's web pages and pages in Canvas showing that reference services and research guides are available, the Committee could not find information about the research guides provided.

The institution's library provides formal instruction to classes and informal instruction to individuals through reference services and research guides. The Off-Site Reaffirmation Committee could not, however, find evidence of how often instruction takes place to determine whether instruction is regular and timely.

## Section 12: Academic and Student Support Services

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- 12.1 **The institution provides appropriate academic and student support programs, services, and activities consistent with its mission.**  
(*Student support services*) [CR Off-Site/On-Site Review]

### Compliance

The institution provided evidence of appropriate academic and student support programs, services, and activities per its mission. Information concerning the various educational and student support services is available on the college website, and the college catalog is also accessible on the college website. During the COVID-19 pandemic, the college transitioned academic and student support services online, proving that it has maintained remote services for all students since 2020. The institution highlighted various Divisions of Academic Success and Division of Student Success departments. These departments focus on all students and also students of particular profiles, such as veterans, active-duty military, students with disabilities, international students, distance learners, and First-Time-In-College students. Appropriate levels of academic and student support services are available to all students regardless of teaching modality, location on campus, off-site center, or high school.

- 12.2 The institution ensures an adequate number of academic and student support services staff with appropriate education or experience in student support service areas to accomplish the mission of the institution.  
(*Student support services staff*)

### Compliance

The institution provided a list of over 20 academic and student services leadership staff, highlighting their experience and educational credentials. Additionally, the institution submitted its organizational chart that underscores the breadth of its academic and student support services and reports that it ensures employees' continued development and performance through the Alamo Talent portal. The Alamo Talent portal is for voluntary and mandatory staff training. The Alamo Talent portal makes available a vast selection of training modules, including Title IX, abuse and neglect prevention, FERPA, and information technologies utilized by the college.

- 12.3 The institution publishes clear and appropriate statement(s) of student rights and responsibilities and disseminates the statement(s) to the campus community. (*Student rights*)

### Compliance

The institution publishes clear and appropriate statements about student rights and responsibilities in its Student Handbook and disseminates this information online on the college website. Student rights and responsibilities included the Academic Fresh Start (Senate Bill 1321), student grievance policies, FERPA, and firearms on campus rights.

- 12.4 The institution (a) publishes appropriate and clear procedures for addressing written student complaints, (b) demonstrates that it follows the procedures when resolving them, and (c) maintains a record of student complaints that can be accessed upon request by SACSCOC.

*(Student complaints)* **[Off-Site/On-Site Review]**

[Note: As part of its response to this standard, the institution should include information about the individual(s)/office(s) responsible for maintaining these records, elements of a complaint review that are included in the record(s), and whether the records are centralized or decentralized.]

### **Compliance**

The institution provided clear and appropriate student complaint procedures. Student complaints are divided into the following categories: academic grievances, non-academic grievances, non-academic misconduct, and Title IX. The college publishes all complaint procedures on the college webpage, with an online form available to the complainant. Academic grievances are processed through the respective academic dean's office and resolved by the dean. Non-academic grievances, misconduct, and Title IX complaints are processed through the Vice President for Student Success as the highest administrator to address non-academic grievances.

The institution provided samples of academic and non-academic grievances, misconduct complaints, demonstrating resolutions upholding college policy and procedures.

- 12.5 The institution protects the security, confidentiality, and integrity of its student records and maintains security measures to protect and back up data. The institution also ensures that independent contractors or agents that have access to or maintain student records are governed by the same principles and policies as institutional employees.

*(Student records)*

### **Non-Compliance**

The institution described its policy and practices to protect student record security, confidentiality, and integrity. The procedure manual for the Alamo Colleges District for ensuring the confidentiality of student educational records is documented. The Registrar is responsible for the official academic records of currently enrolled students and alumni. Student records are restricted for use by a select number of administrators, advisors, or counselors. The institution provided documentation that it provides FERPA training to faculty, staff, and students in compliance with Texas Government Code section 2054.519

The institution reports that it ensures that independent contractors or agents with access to or maintain student records follow institutional employees' principles and policies. The institution also reports that there is an agreement between the institution and an outsourced service to process academic transcripts and a collaborative/consortia agreement between the five Alamo Colleges in which each college authorizes the contractor to perform transcript evaluation services. However, this section of the narrative seems to include a textual placeholder that was not filled for the report, and because of this the Off-Site Reaffirmation Committee could locate no evidence or documentation that supports its assertion.

- 12.6 The institution provides information and guidance to help student borrowers understand how to manage their debt and repay their loans.  
(*Student debt and financial literacy*)

### **Non-Compliance**

The institution provides information and guidance to aid student borrowers and the general student body in understanding debt management and financial literacy. The college's financial wellness coach assists all students in gaining financial skills and knowledge to make more effective money decisions. The Financial Wellness office mails the book, "Money 101: Financial Management for College Students" to all FTIC and transfer students.

The institution incorporates a Default Aversion Plan to assist student loan borrowers in not defaulting on their student loans. The institution reports using a third-party online money management tool to assist students with developing money management skills. The institution also observes National Financial Literacy Month, providing a series of financial wellness activities.

Although the institution clearly provides a robust financial wellness program and initiatives to ensure financial wellness, the Off-Site Reaffirmation Committee was unable to find evidence of implementation, such as, workshop agendas, mailings, or screen shots of online money management tools.

## **Section 13: Financial and Physical Resources**

- 13.1 **The institution has sound financial resources and a demonstrated, stable financial base to support the mission of the institution and the scope of its programs and services.**  
(*Financial resources*) [CR]

### **Compliance**

The institution provided audited financial statements for the district for years 2022, 2023, and 2024. The net position for the district has consistently increased over the last three years, which is an indication that the college has sound financial resources and a demonstrated stable financial base to support its mission and scope of its programs and services.

- 13.2 **The member institution provides the following financial statements:**
- (a) **an institutional audit (or Standard Review Report issued in accordance with *Statements on Standards for Accounting and Review Services* issued by the AICPA for those institutions audited as part of a system-wide or statewide audit) for the most recent fiscal year prepared by an independent certified public accountant and/or an appropriate governmental auditing agency employing the appropriate audit (or Standard Review Report) guide.**

- (b) **a statement of financial position of unrestricted net assets (without donor restrictions), exclusive of plant assets and plant-related debt, which represents the change in unrestricted net assets attributable to operations for the most recent year.**
- (c) **an annual budget that is preceded by sound planning, is subject to sound fiscal procedures, and is approved by the governing board.**

*(Financial documents)* [CR]

### **Compliance**

The institution provided a systemwide audit for years 2022, 2023, and 2024 conducted by an independent audit firm. For the most recent fiscal years ending 2022, 2023, and 2024, the Independent Auditors Report included an unmodified opinion on the annual financial statements.

A systemwide Statement of Financial Position of Unrestricted Net Assets, Exclusive of Plant Assets and Plant Related Debt (UNAEP) for years 2022, 2023, and 2024 was provided. The UNAEP shows a positive unrestricted net position, which is an indication of fiscal stability and a strong financial base for the district. In addition, letters from Moody's Investors Service and S&P Global were provided. Both agencies assigned a stable outlook and a top tier rating for the district.

The FY 2023-2024 Budget Book was provided for the district. The document outlined the annual budget process. Minutes from district board minutes were provided for years 2022, 2023, and 2024 as evidence of the approval of the all-funds budget that includes the budget for the college.

- 13.3 The institution manages its financial resources and operates in a fiscally responsible manner.  
*(Financial responsibility)*

### **Compliance**

The institution provided audited financial statements for the district for years 2022, 2023, and 2024. The net position for the district has consistently increased over the last three years, which is an indication that the college has sound financial resources and a demonstrated stable financial base to support its mission and scope of its programs and services.

Letters from Moody's Investors Service and S&P Global were provided for the district that indicated a stable outlook and a top tier rating. The systemwide UNAEP shows a positive unrestricted net position for years 2022, 2023, and 2024, which is also an indication of fiscal stability and a strong financial base for the district.

- 13.4 The institution exercises appropriate control over all its financial resources.  
*(Control of finances)*

### **Compliance**

The institution provided a systemwide Independent Auditor's Report on Internal Control over Financial Reporting and on Compliance and Other Matters conducted by an external independent audit firm. The Federal Schedule of Findings and Questioned Costs was included and did not note any deficiencies in internal control over compliance considered to be material weaknesses nor any questioned costs which is an indication that the institution exercises appropriate control over all its financial resources.

- 13.5 The institution maintains financial control over externally funded or sponsored research and programs.  
(*Control of sponsored research/external funds*)

### **Compliance**

The institution provided the Grant Protocol and Guidelines document which outlines the process for managing externally funded programs. An example of an Annual Performance Report showing submission to the funding agency was provided to support the college filing appropriate reports in a timely manner as required by an external source of funds.

The institution provided a systemwide Independent Auditor's Report on Internal Control over Financial Reporting and on Compliance and Other Matters conducted by an external independent audit firm. The Federal Schedule of Findings and Questioned Costs did not note any deficiencies in internal control over compliance considered to be material weaknesses nor any questioned costs which is an indication that the institution maintains financial control over externally funded or sponsored research and programs.

- 13.6 The institution (a) is in compliance with its program responsibilities under Title IV of the most recent Higher Education Act as amended and (b) audits financial aid programs as required by federal and state regulations. In reviewing the institution's compliance with these program responsibilities under Title IV, SACSCOC relies on documentation forwarded to it by the U. S. Department of Education.  
(*Federal and state responsibilities*) **[Off-Site/On-Site Review]**

### **Compliance**

The institution provided a systemwide Independent Auditor's Report on Internal Control over Financial Reporting and on Compliance and Other Matters conducted by an external independent audit firm. The Federal Schedule of Findings and Questioned Costs was included. The auditors did not identify any deficiencies in internal control over compliance considered to be material weaknesses nor any questioned costs which supports the institution's compliance with program responsibilities under Title IV as well as the required audit of financial aid programs.

- 13.7 The institution ensures adequate physical facilities and resources, both on and off campus, that appropriately serve the needs of the institution's educational programs, support services, and other mission-related activities.  
(*Physical resources*) **[Off-Site/On-Site Review]**

### **Compliance**

The institution has two campuses in its service area and offers day, evening, and weekend classes on and off campus to serve the needs of the institution's educational programs, support services, and other mission related activities. The institution's projected short term and long-term facility plans and needs are outlined in the college's Master Plan.

The Facilities and Ground Management Policy C.2.3 was provided as evidence of the guidance used for managing the operation and maintenance of the buildings and grounds. A Work Order system (example provided) is used for managing the upkeep of the campuses. The institution also provided an example of an Instructional Unit Review document which is used to solicit input from the departments to further determine if the physical resources are a proper mixture to ensure student success.

- 13.8 The institution takes reasonable steps to provide a healthy, safe, and secure environment for all members of the campus community.

*(Institutional environment)*

[Note: An institution should also include information about the status of any open or closed investigations by the U.S. Department of Education's Office of Civil Rights related to sexual violence that were active at the time of, or have occurred since, the institution's last comprehensive review. If there have been no such investigations, the institution should indicate as much.]

### **Compliance**

The institution provided several documents as evidence to support that it has safety, health, and security measures in place. Some of those documents included the Strategies of Behavioral Intervention (SOBI) Employee and Student Guide, Annual Security Report, Building Response Guide, and the systemwide Continuity of Operations Plan.

The institution noted that since the last decennial report in 2018, there have been no open or recently closed investigations by the US Department of Education's Office of Civil Rights for possible violations alleging sexual violence.

## **Section 14: Transparency and Institutional Representation**

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- 14.1 The institution (a) accurately represents its accreditation status and publishes the name, address, telephone number, and website address of SACSCOC in accordance with SACSCOC's requirements and federal policy; and (b) ensures all its branch campuses include the name of that institution and make it clear that their accreditation depends on the continued accreditation of the parent campus.

*(Publication of accreditation status)* **[Off-Site/On-Site Review]**

### **Compliance**

The institution publishes its accreditation status both in print in the College Catalog and Student Handbook and electronically on the institution's website. The name, address, and telephone number of SACSCOC are found in all venues.

- 14.2 The institution has a policy and procedure to ensure that all substantive changes are reported in accordance with SACSCOC's policy.  
(*Substantive change*)

### **Compliance**

The institution provided evidence of two system-level board policies that require SACSCOC approval for any substantive change. The policies are accompanied by appropriate procedures. The institution also maintains a SACSCOC transparency website which lists all communications and reports with the accreditor. Finally, the institution provided evidence of SACSCOC's approval of a new Bachelor of Applied Technology program.

- 14.3 The institution applies all appropriate standards and policies to its distance learning programs, branch campuses, and off-campus instructional sites.  
(*Comprehensive institutional reviews*) **[Off-Site/On-Site Review]**

### **Compliance**

The Off-Site Reaffirmation Committee noted that the narrative is shared from other sections of the report. The Committee was able to review policy associated with online learning.

- 14.4 The institution (a) represents itself accurately to all U.S. Department of Education recognized accrediting agencies with which it holds accreditation and (b) informs those agencies of any change of accreditation status, including the imposition of public sanctions. (See SACSCOC policy "Accrediting Decisions of Other Agencies.")  
(*Representation to other agencies*) **[Off-Site/On-Site Review]**

[Note: Institutions responding to part (a) of this standard should provide evidence (e.g., appropriate portion of the most recent self-study, report from the other accreditor, etc.) that demonstrates the accurate representation to other USDE recognized agencies regarding such things as institutional purpose, governance, programs, and finances.]

### **Compliance**

The institution confirmed its accreditation status with three additional accreditation agencies and provided official documentation confirming this accreditation. Furthermore, the college utilizes an External Agency Tracking Document to monitor and retain all communications and actions with external accreditation bodies.

The narrative notes that, in 2016, the college was placed on warning status by SACSCOC. Although the institution notes that all external accrediting bodies were immediately notified of this change, the Off-Site Reaffirmation Committee was unable to find documentation supporting this claim.

- 14.5 The institution complies with SACSCOC's policy statements that pertain to new or additional institutional obligations that may arise that are not part of the standards in the current *Principles of Accreditation*.  
(*Policy compliance*)

(Note: For applicable policies, institutions should refer to the SACSCOC website [<http://www.sacscoc.org>])

[Note: Committees must make a single determination of compliance for this standard.]

#### 14.5.a “Reaffirmation of Accreditation and Subsequent Reports”

**Applicable Policy Statement.** If an institution is part of a system or corporate structure, a description of the system operation (or corporate structure) is submitted as part of the Compliance Certification for the decennial review. The description should be designed to help members of the peer review committees understand the mission, governance, and operating procedures of the system and the individual institution’s role within that system.

**Documentation:** The institution should provide a description of the system operation and structure or the corporate structure if this applies.

(Policy compliance: “Reaffirmation of Accreditation and Subsequent Reports”)

#### 14.5.b “Separate Accreditation for Units of a Member Institution”

**Applicable Policy Statement.** If the Commission on Colleges determines that an extended unit is autonomous to the extent that the control over that unit by the parent or its board is significantly impaired, the Commission may direct that the extended unit seek to become a separately accredited institution. A unit which seeks separate accreditation should bear a different name from that of the parent. If the Southern Association of Colleges and Schools Commission on Colleges determines the unit should be separately accredited or the institution requests to be separately accredited, the unit may apply for separate accreditation from any institutional accrediting association that accredits colleges in that state or country.

**Implementation:** If, during its review of the institution, SACSCOC determines that an extended unit is sufficiently autonomous to the extent that the parent campus has little or no control, SACSCOC will use this policy to recommend separate accreditation of the extended unit. No response is required by the institution.

(Policy compliance: “Separate Accreditation for Units of a Member Institution”)

### Compliance

The SACSCOC liaison at the institution is charged with maintaining records of all new policies and revisions sent to the institution. Any changes, together with compliance actions, are reported on the institution’s SACSCOC transparency and accreditation status webpages.

### Comments section (optional)

This section is reserved for committees to provide comments that are not compliance-related but would be helpful feedback for the institution. Any comments placed in this section should not be construed as directives to the institution.

### Part III. Assessment of the Quality Enhancement Plan

*To be completed by the On-Site Reaffirmation Committee.*

#### Brief description of the institution's Quality Enhancement Plan

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#### Analysis of the Quality Enhancement Plan

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- A. **Topic Identification**. *The institution has a topic identified through its ongoing, comprehensive planning and evaluation processes.*
- B. **Broad-based Support**. *The plan has the broad-based support of institutional constituencies.*
- C. **Focus of the Plan**. *The institution identifies a significant issue that focuses on improving specific student learning outcomes and/or student success.*
- D. **Institutional Capability for the Initiation, Implementation, and Completion of the Plan**. *The institution provides evidence that it has committed sufficient resources to initiate, implement, and complete the QEP.*
- E. **Assessment of the Plan**. *The institution has developed an appropriate plan to assess achievement.*

#### Analysis and Comments for Strengthening the QEP

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## Part IV. Third-Party Comments

*To be completed by the On-Site Reaffirmation Committee.*

If an institution receives Third-Party Comments, the institution has an opportunity to respond to those comments and the On-Site Reaffirmation Committee reviews the response as part of its comprehensive evaluation of the institution.

The Committee should check one of the following:

☐ No Third-Party Comments submitted.

☐ Third-Party Comments submitted. **(Address the items below.)**

*1. Describe the nature of the Comments and any allegations of non-compliance that may have been part of the formal Third-Party Comments.*

*2. Indicate whether the Committee found evidence in support of any allegations of non-compliance.*

*If found to be out of compliance, the Committee should write a recommendation and include it in Part II under the standard cited with a full narrative that describes why the institution was found to be out of compliance and the documentation that supports that determination. In this space, reference the number of the Core Requirement, Comprehensive Standard, or Federal Requirement and the recommendation number cited in Part II.*

*If determined to be in compliance, explain in this space the reasons and refer to the documentation in support of this finding.*

## APPENDIX A

Roster of the Off-Site Reaffirmation Committee	Roster of the On-Site Reaffirmation Committee
<p>Dr. Gareth M. Euridge - CHAIR Professor, English Tallahassee State College Tallahassee, FL</p> <p>Dr. Joanne Ardivini Provost, Vice President of Academic and Student Affairs Gordon State College Barnesville, GA</p> <p>Dr. Angela E. Browning Vice President, Research, Government Relations, and Institutional Effectiveness Indian River State College Fort Pierce, FL</p> <p>Dr. Paul Coreil Chancellor Louisiana State University at Alexandria Alexandria, LA</p> <p>Ms. Jan E. Daniel Associate Librarian Greenville Technical College Greenville, SC</p> <p>Dr. Wanda Ford Vice President for Finance and Administration Florida State College at Jacksonville Jacksonville, FL</p> <p>Dr. James W. McGee, III Provost and Vice President of Student Success Atlanta Metropolitan State College Atlanta, GA</p> <p>Dr. Carmine D. Palumbo Professor of English East Georgia State College Swainsboro, GA</p> <p>Dr. Kenneth Ray, Jr. Vice President of Student Services and Enrollment Management Hillsborough Community College Tampa, FL</p> <p><b><u>SACSCOC STAFF COORDINATOR</u></b> Dr. J. Matthew Melton Vice President</p>	

*(Refer to "Directions for Completion of the Report of the Reaffirmation Committee.")*

## **APPENDIX B**

### **Off-Campus Sites or Distance Learning Programs Reviewed**

*(Refer to "Directions for Completion of the Report of the Reaffirmation Committee.")*

PRELIMINARY

## **APPENDIX C**

### **List of Recommendations**

#### **Cited in the Report of the Reaffirmation Committee**

*(Refer to “Directions for Completion of the Report of the Reaffirmation Committee.”)*

PRELIMINARY

## Request for Justifying and Documenting Qualifications of Faculty

**Institution:** Saint Phillips College

For each of the faculty members listed below, the committee either found the academic qualification of the faculty member to be inadequate and/or the institution did not adequately justify and document the faculty member's other qualifications to teach the identified course(s). For each case, the committee checked the column appropriate to its findings and provided additional comments if needed to clarify the concern.

The institution is requested to submit additional justification and documentation on the qualifications of each of the faculty member listed. When responding, the institution should use SACSCOC's "Faculty Roster Form: Qualifications of Full-Time and Part-Time Faculty" and its "Instructions for Reporting the Qualifications of Full-Time and Part-Time Faculty," which can be accessed under the Institutional Resources tab of the Commission website: [www.sacscoc.org](http://www.sacscoc.org). Read the instructions carefully and pay close attention to the section "Providing Information that Establishes Qualifications." The completed form, or similar document, should be included as part of the institution's formal response to SACSCOC.

1	2	3	4	5
Name of Faculty Member	Course(s) in Question	Inadequate Academic Qualifications	Insufficient Justification of Other Qualifications	Comments (if needed)
Ramond Chacon	BMGT 1000, 2000 level	X		Didn't list the years of employment. 3 – year min in field of study
Corey McNair	HAMG 1000, 2000 level	X		Didn't list the years of employment. 3-year min in field of study
Jose Gonzolez	CNBT 1400	X		Didn't list the years of employment. 3 year min in field of study
John Hoyt	WLDG 1424	X		Didn't list the years of employment. 3-year min in field of study
Kevin Mancha	CMPT 1307	X		Didn't list the years of employment. 3-year min in field of study
Kendal Purvis	CNBT 1000, 2000 level	X		No Associate degree. Didn't list the years of employment. 3-year min in field of study
Jim Rodela	PFPB 1000, 2000 level	X		Didn't list the years of employment. 3-year min in field of study
Jesse Torres	CNBT 1000, 2000 level	X		No associate degree
Reynoldo Bazaidua	DEMR 1000, 2000 level	X		Didn't list the years of employment. 3-year min in field of study

Roy Ruiz	CETT 1000, 2000 level	X		Didn't list the years of employment. 3-year min in field of study
Stephanie Cottier	MATH 1000, 2000 level	X		No graduate degree in mathematics and no 18 hours listed
Javier Garza	MATH 1000, 2000 level	X		Math ed degree and math ed courses are not the same as a mathematics degree and courses
Terry Gasteur	MATH 1000, 2000 level	X		Math ed degree and math ed courses are not the same as a mathematics degree and courses
Alber Guerra	MATH 1000 level	X		No graduate degree in mathematics and no 18 hours listed
Terrence Jackson	MATH 1000, 2000 level	X		No graduate degree in math and no 18 hours listed
Bianca Laven	MATH 1000 level	X		Math ed degree and math ed courses are not the same as a mathematics degree and courses
Shannon Patterson	MATH 1000 level	X		Math ed degree and math ed courses are not the same as a mathematics degree and courses
Maria Rodrigez	MATH 1000 level	X		Math ed degree and math ed courses are not the same as a mathematics degree and courses
Rodrigo Benavides	ARTS 1000, 2000 level	X		Courses listed for 18 graduate hours don't have course numbers
Diane Alertas	CHEM 1000 level	X		The courses listed are 300 and 400 level which normally mean undergraduate level
Mary Kelaita	BIOL 1000, 2000 level	X		Degree is in anthropology and that is not one of the option listed under their options for biological sciences

David Altaffer	RADR 1000 level	X		Their requirement is a bachelors degree and he only has an associates listed
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*Form Adopted: January 2007*

*Updated: January 2020*

*Updated to docx format: October 2024*

PRELIMINARY