SUBSTANTIAL CHANGE IN PROGRAM POLICY
For Senior Academies during a Term of Accreditation

APPLICATION: Any Adventist senior academy that plans a substantial change in its educational program or organizational structure at any time during a term of accreditation, must seek prior approval for such change in program. In collaboration with the local conference office of education, notice is to be filed with the union conference office of education of the impending change.

RATIONALE: Students, parents and other school stakeholders expect that quality Adventist education will be ensured by appropriate accountability measures. This substantive change in program policy is intended to guard the integrity of the school evaluation process and maintain the credibility of accreditation and the accrediting agencies in assessing school quality. The North American Division Office of Education as officers of the NAD Commission on Accreditation, the representative authority of the Adventist Accrediting Association (AAA) for K-12 schools in North America will conduct a special on-site evaluative (SCP) visit to schools substantially changing their program.

CRITERIA: A school is considered to have a substantially changed educational program if any of the following apply.

1. significant changes in instructional delivery such as, but not limited to:
   a) delivering/receiving distance education instruction
   b) course offerings and credits not approved and/or not aligned with the union education code requirements
2. modification of governance/administration outside of policy
3. relocation of the school without conference approval
4. addition or transfer of programs to new or different facilities
5. significant reduction in certificated and/or endorsed faculty
6. continuing unresolved health and safety violations
7. declaration of financial exigency and/or allegations of fraud
8. any change by the school that is deemed by the union director of education to have substantially changed the school’s program
PROCESS:  

Initiation of Action:

1. A request for a special substantive change in program visit may be initiated through the Union Office of Education by any of the following entities: (a) local school board, (b) conference Board of Education, and/or (c) NAD Office of Education leaders. Ideally, the request for and completion of a special evaluation revisit would be made prior to implementation of any substantial change in program to avoid potential disruption in the accreditation status of the school.

2. The request shall be submitted in writing in a SCP report form as provided by the NAD Office of Education.

3. The NAD Office of Education in collaboration with the union Office of Education will determine whether the request meets the criteria for action.

Implementation of Action:

4. A special SCP Visiting Committee will be appointed by the NAD Office of Education with at least three official members and shall include at least one member in attendance at the last full evaluation.

5. The basis for the on-site program review by the SCP Visiting Committee will include not only the completed SCP report, but relevant information from the most recent full evaluation self-study report and visiting committee report.

6. The special SCP Visiting Committee will recommend one of the following actions to the NAD Commission on Accreditation. The recommendation must be accompanied by a justification statement and may also include additional recommendations and/or action plans. The actions that can be recommended include:
   
   a) Continuation of Accreditation  
   b) Probation  
   c) Denial of Accreditation

Disposition of Action:

7. The NAD Commission on Accreditation will review the recommendation, take official action on the school’s accreditation, and duly inform all entities, the school, local conference and union conference.
SUBSTANTIAL CHANGE IN PROGRAM

DIRECTIONS

Please provide a Substantial Change in Program report organized as follows:

1) **Cover Page:** Provide report title, school contact info and date of visit.

2) **Narrative Report** with the following sections:
   a) **DESCRIPTION:** Briefly describe the nature of the proposed change.
   b) **RATIONALE:** Explain the reasons for the change.
   c) **BACKGROUND:** Provide a history of the steps that led to the substantial change.
   d) **RESULTS:** Summarize the anticipated impact of the proposed change on the educational program—student learning and school operation.
   e) **ASSESSMENT:** Describe plans for evaluating the achieved results.

3) **School Profile:** Insert a current report (see: attachment)

4) **Appendix:** Please include (at a minimum, evidentiary items a & b below) approval documentation and any agreement/contract adopted for the substantive change in program. Other items listed below are to be provided, either with the report or at the SCP on-site visit.

**Evidentiary Documents:**

a) Approval documentation (applicable minutes/correspondence of board, conference, union)

b) Memorandum of Understanding (contract or agreement, if applicable) to facilitate change

c) Visiting Committee Report from the most recent full evaluation and mid-term visits

d) Examples of communication with school stakeholders about the proposed change

e) Statement/description of financial impact on the school, constituents and/or conference

f) Statement/description of organizational changes, if any, including a flow chart

g) Current or updated school improvement action plans
SCHOOL PROFILE SUMMARY REPORT

SCHOOL IDENTIFICATION:

School Name: __________________________________________________ School ID: _______
Address: _____________________________________________________________
Conference: ___________________________ Union Conference: ________________
Principal: ___________________________ E-Mail: _____________________________
School Type: ___________________________ No. of Constituent Churches: _____ Membership: _______

ENROLLMENT DATA: (Current School Year)

<table>
<thead>
<tr>
<th>Opening Enrollment History and Projected Enrollment Total for ALL Grades</th>
<th>Percentage of Current Students from Adventist Homes: _________%</th>
</tr>
</thead>
<tbody>
<tr>
<td>3 Years Ago</td>
<td>2 Years Ago</td>
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</table>

PERSONNEL DATA: (Current School Year)

Number of Total Staff (FTE): Administrative: _________ Certificated Instructional: _________
K-12 School Only: Number of Certificated Instructional (FTE): K-8: _________ 9-12: _________
Number of Staff (Head Count) Part-time: _________ Classified/Support Staff: _________

FINANCIAL DATA: (Last Fiscal Year)

Total Operating Expense (Last Fiscal Year): _________ Actual Increase (Decrease):___________
Total Tuition/Fees Income (as % all income): _________ Operating Expense Per Std: _________

ACCREDITATION DATA:

Date of Prior Full Evaluation Visit: _____________________ Term Granted: _____________________
Date of Any Additional Visits: _________________________ Type of Visit: _____________________

SIGNATURE:

Completed By: ___________________________ Date: ___________________________