Status Recommendations

Check the box below that most closely corresponds to the school’s performance in regard to each of the criterion.

|  |  |  |  |
| --- | --- | --- | --- |
| Name of School: |  | Date of Visit: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Criterion** | **Meets  standard for Initial Accreditation** | **Meets standard for Candidacy** | **Does not  meet standard** |
| A1. School Purpose |  |  |  |
| A2. Governance |  |  |  |
| A3. School Leadership |  |  |  |
| A4. Staff |  |  |  |
| A5. School Improvement Process |  |  |  |
| A6. Resources |  |  |  |
| A7. Resource Planning |  |  |  |
| B1. What Students Learn |  |  |  |
| B2. How Students Learn |  |  |  |
| B3. How Assessment is Used — Reporting and Accountability Processes |  |  |  |
| B4. How Assessment is Used — Classroom Assessment Strategies |  |  |  |
| C1. Student Connectedness — Personal and Academic |  |  |  |
| D1. School Environment and Child Protection |  |  |  |
| D2. Parent/Community Involvement |  |  |  |
| E. ONESQA Standards (for ACS WASC/ONESQA schools) |  |  |  |
| F. Boarding Program (if applicable) |  |  |  |
| Admission Procedures and Records |  |  |  |
| Any Other Area(s): |  |  |  |

**Status Recommendation**: The status recommendation should be based on the judgment of the team as to the school’s performance on the above.

* If the school predominately meets the ACS WASC standards for **Initial Accreditation**, that recommendation should be made.
* If the school predominately meets the ACS WASC standards for **Candidacy**, that should be the recommendation.
* If the school fails to meet ACS WASC standards in several areas or is substantially out of compliance with any important standard(s), the team should recommend **Denial** **of Affiliation**.

The Initial Visit Team recommends **Initial Accreditation** not to exceed three years.

The Initial Visit Team recommends a status of **Candidacy** not to exceed three years.

The Initial Visit Team recommends **Denial** **of Affiliation** with ACS WASC.

Signatures: Chair:       Date:        
 Member:       Date:

ACS WASC Justification and Recommendation

# Justification Statement

Provide a brief narrative that summarizes the visiting committee’s rationale for the recommended status. If there is an unresolved minority opinion, please indicate and explain.

Type here...