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 forInitial 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...