GCTEQA

GLOBAL COMMISSION FOR THEOLOGICAL EDUCATION & QUALITY ASSURANCE, INC.

FULL ACCREDITATION STANDARDS MANUAL

2026 Public Edition

Diverse Traditions. Shared Standards. Global Excellence.

Standards, criteria, evidence expectations, and reviewer guidance for institutional accreditation and quality assurance.

Purpose of This Manual

This manual establishes the public accreditation standards and evidence expectations used by the Global Commission for Theological Education & Quality Assurance, Inc. (GCTEQA) when evaluating eligible theological, religious, faith-based, values-centered, and mission-driven educational institutions.

The standards are intended to be rigorous, mission-sensitive, evidence-based, and adaptable to different institutional models. Institutions are evaluated against the standards that apply to their legal structure, educational scope, delivery model, and stated mission.

Public Disclosure
GCTEQA accreditation is an independent quality-assurance designation. It does not itself provide governmental authorization, U.S. federal student financial-aid eligibility, professional licensure eligibility, guaranteed transfer of credit, or guaranteed acceptance of a credential by another institution, employer, licensing authority, government agency, or credential evaluator.

How the Standards Are Evaluated

For each applicable criterion, evaluators may record one of the following findings:

Finding	Meaning
Met	Evidence demonstrates satisfactory compliance with the criterion.
Partially Met	Some required elements are present, but improvement or additional evidence is needed.
Not Met	Evidence does not demonstrate satisfactory compliance.
Not Applicable	The criterion does not reasonably apply to the institution's approved scope or model.

A single finding does not automatically determine the final accreditation decision. GCTEQA considers the seriousness, pattern, risk, and institutional impact of findings across the full review.

Evidence Expectations

- Evidence should be current, authentic, relevant, and sufficient to support the institution's claims.
- Written policies should be supported by evidence of implementation when implementation can reasonably be demonstrated.
- Documents should be internally consistent and consistent with public website statements and student-facing materials.
- Institutions should not submit unnecessary sensitive personal information. Redaction is encouraged when appropriate.
- GCTEQA may request clarification, additional documentation, interviews, demonstrations, or follow-up evidence.

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STANDARD 1 - MISSION, IDENTITY & INTEGRITY

The institution maintains a clearly defined mission and demonstrates consistency between its stated identity, educational purpose, public representations, and actual operations.

Intent

A mission should be more than a marketing statement. It should guide institutional priorities, educational offerings, governance, resource decisions, student experience, and continuous improvement.

Criteria

1.1 The institution maintains a formally approved mission statement that accurately describes its educational purpose and identity.

1.2 Programs, credentials, services, and public communications are consistent with the stated mission.

1.3 The institution identifies the communities and learners it intends to serve.

1.4 Institutional values and ethical expectations are documented and communicated.

1.5 The institution periodically reviews its mission and uses it in planning and decision-making.

1.6 Public claims regarding accreditation, authorization, recognition, outcomes, and institutional status are accurate and not misleading.

Required / Typical Evidence

- Mission and vision statements
- Institutional history or profile
- Strategic or operational plan
- Catalog, handbook, website, and marketing materials
- Board minutes or resolutions approving mission and major changes
- Code of ethics or institutional values statement

Indicators of Compliance

- Mission is clear, current, specific, and reflected across institutional documents.
- Educational programs reasonably advance the stated mission.
- Public claims match verifiable institutional status.
- Leaders and governing officials can explain how mission influences priorities and decisions.

Reviewer Focus

- Does the institution operate in a manner consistent with its stated mission?
- Are students and the public given an accurate picture of the institution?
- Are marketing claims supported by evidence?
- Is mission used as an operational decision-making tool?

Examples of Potential Deficiencies

- Mission statement is vague, outdated, or inconsistent across documents.
- Programs or services materially exceed the institution's stated purpose without governance approval.
- Website claims accreditation, recognition, transferability, or licensure outcomes that cannot be substantiated.
- Leadership cannot demonstrate how mission informs institutional planning.

STANDARD 2 - LEGAL ESTABLISHMENT & AUTHORIZATION

The institution demonstrates lawful establishment and maintains the registrations, authorizations, exemptions, licenses, or other approvals required for its educational activities.

Intent

Accreditation does not replace legal authority. GCTEQA expects institutions to understand and document the legal basis for their operation, credentials, locations, and delivery models.

Criteria

2.1 The institution maintains current legal formation documents appropriate to its organizational structure.

2.2 The institution maintains authority, exemption, registration, or approval required to operate in applicable jurisdictions.

2.3 Degree-granting institutions document the lawful basis for offering each degree level and type.

2.4 The institution maintains required business, charitable, school, professional, or other registrations when applicable.

2.5 Material legal, regulatory, or authorization changes are promptly addressed and disclosed to GCTEQA.

2.6 The institution does not represent GCTEQA accreditation as governmental authorization or legal degree-granting authority.

Required / Typical Evidence

- Articles/certificate of incorporation or equivalent formation record
- State, national, ministry, department, or regulatory registration records
- Religious exemption or degree-authority documentation, where applicable
- Business licenses or assumed-name records, where applicable
- Good-standing documentation when available
- Correspondence with governmental or regulatory authorities

Indicators of Compliance

- Legal name and public name are documented and used consistently.
- Operating authority matches actual programs and delivery locations.
- Degree authority is independently established where degrees are offered.
- Required registrations are current and traceable.

Reviewer Focus

- Is there a clear lawful basis for every major educational activity?
- Does the institution operate in more than one jurisdiction, and if so, has it addressed each jurisdiction?
- Are public claims about legal status accurate?
- Are any unresolved regulatory matters material to students or institutional viability?

Examples of Potential Deficiencies

- No evidence of lawful establishment.
- Expired, missing, or materially inconsistent operating authority.
- Offering degrees without documented lawful authority.
- Using accreditation language as a substitute for governmental authorization.
- Failure to disclose significant regulatory action.

STANDARD 3 - GOVERNANCE, LEADERSHIP & ETHICAL CONDUCT

The institution maintains an identifiable governance structure, ethical leadership, clear decision-making authority, appropriate oversight, and safeguards against conflicts of interest.

Intent

Strong institutions separate governance from day-to-day administration, document decision rights, and create accountability mechanisms that protect the institution and its learners.

Criteria

3.1 The institution has a governing body or equivalent authority appropriate to its legal structure.

3.2 Roles of the governing body, executive leadership, and key administrators are clearly defined.

3.3 The governing body exercises meaningful oversight of mission, finances, academic quality, risk, and institutional performance.

3.4 Conflict-of-interest, confidentiality, ethics, and related-party transaction expectations are documented.

3.5 Governance meetings and major decisions are documented through minutes, resolutions, or equivalent records.

3.6 Leadership qualifications and responsibilities are appropriate to the institution's scope.

3.7 The institution maintains procedures for leadership succession, vacancies, or continuity.

Required / Typical Evidence

- Bylaws or governance charter
- Board roster and biographies
- Organizational chart
- Board and committee minutes
- Conflict-of-interest disclosures
- Code of ethics
- Executive job descriptions and evaluations
- Delegation-of-authority policy

Indicators of Compliance

- Governing body meets regularly and documents substantive oversight.
- Financial and academic oversight are visible in minutes and reports.
- Conflicts are disclosed and managed.
- Governance is not purely ceremonial.
- Authority is clear enough to avoid operational confusion.

Reviewer Focus

- Does the board exercise independent judgment?
- Are key decisions appropriately documented?
- Do related parties dominate decisions without safeguards?
- Can leaders explain who has authority over academic, financial, and operational matters?

Examples of Potential Deficiencies

- No functioning governance body where one is expected.
- Missing bylaws or unclear authority.

- Undisclosed conflicts or related-party transactions.
- Board minutes show little or no oversight.
- Founder, owner, or executive control is unchecked by any meaningful accountability structure.

STANDARD 4 - FINANCIAL RESPONSIBILITY & SUSTAINABILITY

The institution demonstrates responsible financial management, adequate controls, and sufficient resources to sustain its mission, students, programs, and obligations.

Intent

Financial strength is evaluated in context. GCTEQA looks for truthful financial information, realistic planning, internal controls, and evidence that the institution can serve learners responsibly.

Criteria

4.1 The institution prepares and monitors an annual budget.

4.2 Financial records are accurate, current, and maintained using reasonable accounting practices.

4.3 Tuition, fees, refunds, discounts, scholarships, and other charges are clearly documented.

4.4 The institution maintains controls over receipts, disbursements, banking, purchasing, and financial authorization.

4.5 The institution evaluates financial sustainability and plans for foreseeable obligations.

4.6 Material debts, liabilities, legal judgments, or financial risks that could threaten operations are addressed.

4.7 Restricted funds, donations, and grants are handled consistent with applicable restrictions.

Required / Typical Evidence

- Current budget and prior-period actual results
- Balance sheet / statement of financial position
- Income and expense statement
- Banking and financial-control policies
- Tuition and fee schedule
- Refund policy
- Enrollment and revenue projections
- Cash-flow or sustainability plan
- Independent financial review/audit when available or required

Indicators of Compliance

- Budget assumptions are plausible and tied to enrollment/operations.
- The institution can explain major variances and financial risks.
- Funds are not controlled by one person without reasonable oversight.
- Refund obligations and student liabilities are considered in planning.

Reviewer Focus

- Can the institution sustain current students through completion?
- Are financial projections realistic?
- Are controls adequate for the institution's size?
- Are there material undisclosed liabilities or dependence on one unstable revenue source?

Examples of Potential Deficiencies

- No current budget or financial records.
- Commingling institutional and personal funds without adequate controls.
- Repeated inability to meet obligations.
- Unclear tuition/refund practices.
- Financial information is internally inconsistent or materially unreliable.

STANDARD 5 - EDUCATIONAL PROGRAMS & CURRICULUM

Educational programs are coherent, appropriately designed, sufficiently rigorous for their stated level and purpose, and supported by defined learning outcomes and assessment.

Intent

Program quality should be visible in the structure of the curriculum, the quality of instructional materials, the alignment of learning outcomes and assessments, and the integrity of credential requirements.

Criteria

5.1 Each program has a defined purpose, credential, curriculum, length, and completion requirement.

5.2 Courses and learning experiences align with program outcomes and credential level.

5.3 Learning outcomes are clear, measurable where appropriate, and communicated to learners.

5.4 Instructional materials are current, suitable, and appropriately sourced.

5.5 Assessment methods reasonably measure stated learning outcomes.

5.6 Academic credit, clock hours, continuing education units, or other measures are assigned using documented and consistently applied methods.

5.7 Program changes are reviewed and approved through an established academic process.

5.8 Credentials accurately describe the education completed and are not misleading.

Required / Typical Evidence

- Program catalog and curriculum maps
- Course syllabi or course outlines
- Learning outcomes
- Sample assignments, assessments, rubrics, and grading policies
- Textbook/resource lists
- Academic-credit or clock-hour policy
- Program approval records
- Sample certificates, diplomas, or transcripts

Indicators of Compliance

- Curriculum sequence is logical and supports program outcomes.
- Assessment rigor matches the credential level and stated objectives.
- Course descriptions, syllabi, website, and catalog are consistent.
- Credential requirements are clearly communicated.

Reviewer Focus

- Does the program deliver what it promises?
- Are there sufficient learning activities and assessments?
- Is the credential level supported by academic expectations?

- Are course and program changes controlled and documented?

Examples of Potential Deficiencies

- Programs lack defined outcomes or coherent curriculum.
- Assessments do not measure stated outcomes.
- Credits or hours are awarded without a documented basis.
- Program titles or credentials imply a level of preparation not supported by the curriculum.
- Instructional materials are outdated, incomplete, or inappropriate.

STANDARD 6 - FACULTY, INSTRUCTIONAL STAFF & DEVELOPMENT

The institution employs or engages qualified personnel in sufficient number to deliver programs, support learners, administer operations, and maintain educational quality.

Intent

Qualifications may be demonstrated through education, professional credentials, subject-matter expertise, ministry experience, professional practice, or other evidence appropriate to the role and mission.

Criteria

6.1 The institution establishes written minimum qualifications for instructional and key administrative roles.

6.2 Faculty and staff credentials are verified and documented.

6.3 Personnel responsibilities are clearly defined.

6.4 Workload and staffing are reasonable for enrollment, program scope, and delivery model.

6.5 The institution evaluates instructional and staff performance.

6.6 Professional development is encouraged and documented as appropriate.

6.7 Personnel policies address conduct, confidentiality, complaints, and corrective action.

Required / Typical Evidence

- Faculty/staff roster
- Resumes or curricula vitae
- Degrees, licenses, certifications, or experience verification
- Job descriptions
- Personnel handbook
- Evaluation forms or performance reviews
- Professional-development records
- Faculty orientation/training materials

Indicators of Compliance

- Personnel qualifications align with assigned subjects and responsibilities.
- Credentials are verified rather than merely self-reported.
- Faculty receive guidance on assessment, student support, and institutional policy.
- Staffing is adequate to support current enrollment.

Reviewer Focus

- Are qualification standards appropriate and consistently applied?
- Does the institution rely excessively on one individual?
- Are personnel files complete enough to verify qualifications?

- Are instructors trained for online delivery when applicable?

Examples of Potential Deficiencies

- Unverified or unsuitable faculty credentials.
- No defined qualifications for instructional roles.
- Inadequate staffing for current operations.
- No meaningful faculty evaluation or oversight.
- Personnel responsibilities are unclear or undocumented.

STANDARD 7 - ADMISSIONS, STUDENTS & LEARNER SUPPORT

The institution maintains fair admissions practices, accurate enrollment information, reliable student records, and support services appropriate to the needs of its learners.

Intent

Learner protection begins before enrollment. Students should receive accurate information, understand expectations and costs, have access to support, and have fair methods to raise concerns.

Criteria

7.1 Admissions criteria and enrollment procedures are published and consistently applied.

7.2 The institution confirms that admitted learners meet stated entry requirements.

7.3 Students receive clear information about tuition, fees, refunds, program requirements, accreditation status, and material limitations before enrollment.

7.4 Student records are accurate, secure, retrievable, and retained according to policy.

7.5 Academic advising, instructional support, technical support, or other learner services are appropriate to the delivery model.

7.6 The institution maintains complaint, grievance, and appeal procedures.

7.7 Policies address nondiscrimination, accessibility, conduct, privacy, and academic integrity as applicable.

7.8 Withdrawal, dismissal, leave, and completion processes are documented and fairly administered.

Required / Typical Evidence

- Admissions policy and application
- Enrollment agreement
- Student handbook
- Tuition/fee and refund schedules
- Sample student records or transcript template
- Records-retention policy
- Complaint/grievance procedure
- Advising and support materials
- Accessibility/nondiscrimination policy

Indicators of Compliance

- Student-facing documents are clear and internally consistent.
- Admissions decisions can be traced to published criteria.
- Records are recoverable and protected.
- Support systems match the institution's delivery method and learner population.

Reviewer Focus

- Can a prospective student understand costs, expectations, and limitations before enrolling?
- Are complaints resolved fairly and documented?
- Are student records accurate enough to support verification years later?
- Does the institution adequately support online and remote learners?

Examples of Potential Deficiencies

- Misleading recruitment or incomplete cost disclosures.
- Missing or unreliable student records.
- Refund rules are unclear or inconsistently applied.
- No meaningful grievance process.
- Admissions criteria are not followed or are materially different from published requirements.

STANDARD 8 - ASSESSMENT & EDUCATIONAL EFFECTIVENESS

The institution systematically evaluates student learning, program effectiveness, institutional performance, and progress toward mission-related goals, and uses results to improve.

Intent

Assessment is not merely testing students. It includes the institution's ability to determine whether programs work, learners achieve intended outcomes, and institutional priorities produce measurable improvement.

Criteria

8.1 The institution identifies expected student-learning outcomes and methods for assessing them.

8.2 Assessment occurs at appropriate course, program, and institutional levels.

8.3 Results are reviewed by responsible faculty, administrators, or governing bodies.

8.4 Assessment findings are used to improve curriculum, instruction, services, policy, or resource allocation.

8.5 The institution tracks appropriate indicators of student progress and completion.

8.6 The institution evaluates whether strategic and mission-related goals are being achieved.

8.7 Improvement actions and follow-up results are documented.

Required / Typical Evidence

- Assessment plan
- Learning-outcome reports
- Completion/retention data
- Program review reports
- Faculty meeting minutes discussing results
- Institutional effectiveness dashboard or scorecard
- Strategic-plan progress reports
- Improvement plans and follow-up evidence

Indicators of Compliance

- Assessment produces actionable information, not just raw data.
- Results lead to documented changes when weaknesses are identified.
- Institution uses multiple appropriate measures rather than relying on one metric.

- Trend data is reviewed over time when available.

Reviewer Focus

- What evidence shows that learning is occurring?
- How does the institution know its programs are effective?
- Can reviewers see examples where assessment led to improvement?
- Are outcome claims supported by reliable data?

Examples of Potential Deficiencies

- No systematic learning assessment.
- Data is collected but never reviewed or used.
- Outcome claims are unsupported or exaggerated.
- Strategic goals lack measurable indicators.
- No follow-up after identified weaknesses.

STANDARD 9 - ONLINE LEARNING, TECHNOLOGY & INFORMATION SECURITY

The institution maintains reliable technology, appropriate online-learning practices, learner access, information security, and operational safeguards consistent with its educational model.

Intent

Technology should support learning rather than create barriers. Institutions must also protect records, manage access, and plan for disruptions.

Criteria

9.1 Technology infrastructure is sufficient for instructional and administrative operations.

9.2 Online courses are organized, accessible, and supported through a reliable learning platform or documented delivery system.

9.3 Students receive technical guidance and support.

9.4 The institution uses reasonable methods to protect student and institutional data.

9.5 User access, passwords, administrative privileges, and account termination are controlled.

9.6 Backups, recovery, and continuity procedures address foreseeable technology disruptions.

9.7 The institution addresses student identity and academic integrity in online assessments as appropriate.

9.8 Technology vendors and systems are reviewed for suitability, privacy, continuity, and institutional control.

Required / Typical Evidence

- Technology plan
- LMS overview and screenshots
- Student/faculty technology requirements
- Information-security or data-privacy policy
- Access-control procedures
- Backup and recovery procedures
- Technical-support procedures
- Vendor agreements or service descriptions

- Online identity/assessment integrity procedures

Indicators of Compliance

- Students can reliably access required learning systems.
- Administrative access is limited to authorized personnel.
- Backups are performed and can be restored.
- Technology policies match actual practice.

Reviewer Focus

- Is the institution dependent on a single person or vendor without continuity planning?
- Can students obtain support when systems fail?
- Are sensitive records adequately protected?
- Does the LMS support the institution's claimed learning model?

Examples of Potential Deficiencies

- No backup or recovery plan.
- Shared administrative passwords or uncontrolled system access.
- LMS is unreliable or inadequately configured.
- No student technical-support process.
- Privacy/security practices are materially inconsistent with risk.

STANDARD 10 - STUDENT PROTECTION, WELLBEING & CONTINUITY

The institution maintains policies and operational practices designed to protect learners, address safety and wellbeing, preserve records, manage emergencies, and support educational continuity.

Intent

The exact safeguards depend on the institution. Campus institutions, online institutions, minors-serving schools, and adult continuing-education providers may require different controls, but each must identify and manage relevant learner risks.

Criteria

10.1 The institution identifies safety, safeguarding, health, conduct, and continuity risks appropriate to its learners and operations.

10.2 Emergency and crisis procedures are documented and communicated.

10.3 Institutions serving minors or vulnerable populations maintain appropriate safeguarding and reporting procedures.

10.4 Student complaints, harassment, misconduct, and serious incidents are addressed under written procedures.

10.5 The institution plans for interruption, closure, teach-out, records preservation, and student communication.

10.6 Refund and financial-obligation practices protect learners when programs are cancelled or materially changed.

10.7 The institution maintains reasonable procedures for student wellbeing referrals or support within the scope of its role.

Required / Typical Evidence

- Emergency/crisis plan

- Safeguarding/child-protection policy where applicable
- Incident-reporting procedures
- Student conduct and harassment policies
- Business continuity plan
- Teach-out/closure plan
- Records preservation plan
- Refund/cancellation procedures

Indicators of Compliance

- Risk controls match the institution's actual learners and delivery model.
- Staff know how to report serious incidents.
- Records remain protected during disruptions.
- Closure planning considers students who have not completed programs.

Reviewer Focus

- What would happen if the institution suddenly could not operate?
- How are minors or vulnerable learners protected where applicable?
- Are refund and closure responsibilities clear?
- Can the institution preserve student records long term?

Examples of Potential Deficiencies

- No crisis or continuity planning.
- No safeguarding system despite serving minors or vulnerable populations.
- Students could lose access to records if the institution closes.
- Serious complaints or incidents are handled informally without documentation.

STANDARD 11 - THEOLOGICAL IDENTITY & MISSION FORMATION

Where theological, religious, spiritual, ministry, or faith formation is part of the institution's mission, the institution clearly defines its identity, communicates expectations, and delivers formation or religious education consistent with its stated mission.

Intent

GCTEQA respects institutional religious identity and does not impose a single denomination or theology. Review under this standard focuses on clarity, integrity, alignment, and educational quality.

Criteria

11.1 The institution clearly states its religious, theological, spiritual, or mission identity when such identity is central to its purpose.

11.2 Doctrinal, faith, ethical, or formation expectations are communicated to students and personnel when applicable.

11.3 Theological or religious curricula are coherent and appropriate to the institution's stated tradition and educational goals.

11.4 Faculty assigned to theological or religious subjects possess appropriate preparation, expertise, or recognized experience.

11.5 The institution distinguishes theological formation, ministerial recognition, ordination, licensure, and academic credentials accurately.

11.6 Students are informed when denominational, ecclesiastical, licensing, ordination, or professional bodies may impose separate requirements.

11.7 The institution respects its stated policies regarding religious identity, participation, and community expectations.

Required / Typical Evidence

- Statement of faith, theological identity, or mission statement
- Religious/theological curriculum
- Faculty qualifications
- Student/community covenant where applicable
- Ministry formation requirements
- Public statements regarding ordination, ministry credentials, or ecclesiastical recognition

Indicators of Compliance

- Religious identity is clear rather than implied or inconsistently stated.
- Curriculum reflects the institution's stated mission.
- The institution does not confuse academic accreditation with ordination or denominational approval.
- Students can understand any faith-based participation requirements before enrollment.

Reviewer Focus

- Are theological claims presented accurately and transparently?
- Does the institution respect its own stated tradition while communicating clearly with diverse stakeholders?
- Are ministerial or ecclesiastical outcomes described without overstatement?
- Are faculty appropriately prepared for the subject matter they teach?

Examples of Potential Deficiencies

- Misleading claims that accreditation confers ordination or ecclesiastical recognition.
- Unclear or undisclosed faith participation requirements.
- Theological programs lack qualified instruction or coherent curriculum.
- Public materials materially misrepresent denominational or professional recognition.

STANDARD 12 - PLANNING, PUBLIC ACCOUNTABILITY & CONTINUOUS IMPROVEMENT

The institution engages in systematic planning, communicates accurately with stakeholders, monitors institutional performance, and demonstrates an ongoing commitment to improvement.

Intent

Accreditation is sustained through continuous attention to quality. Institutions should know where they are going, measure progress, address weaknesses, and communicate honestly with the public.

Criteria

12.1 The institution maintains current strategic, operational, or improvement priorities.

12.2 Planning incorporates evidence from assessment, finances, enrollment, student experience, risk, and institutional capacity.

12.3 Responsibilities, timelines, and measures of progress are identified for significant priorities.

12.4 The institution periodically evaluates progress and adjusts plans when necessary.

12.5 Public information is accurate, current, and consistent across major communication channels.

12.6 Material changes are communicated to students and GCTEQA as required.

12.7 The institution maintains a documented process for continuous improvement.

Required / Typical Evidence

- Strategic plan
- Annual operating plan
- School/institutional improvement plan
- Key performance indicators
- Enrollment and completion trends
- Stakeholder surveys
- Website/public disclosure review
- Progress reports and Board review minutes

Indicators of Compliance

- Plans contain measurable priorities and accountable owners.
- Institution can identify improvements made from evidence.
- Public materials are reviewed for accuracy.
- Planning reflects realistic resources and risks.

Reviewer Focus

- Does planning influence actual decisions?
- Are institutional weaknesses acknowledged and addressed?
- Can the institution demonstrate a cycle of plan, implement, evaluate, improve?
- Are public statements current and accurate?

Examples of Potential Deficiencies

- Strategic plan exists but is not used or reviewed.
- No evidence of improvement following identified weaknesses.
- Website or catalog contains outdated or misleading information.
- Major changes occur without structured planning or stakeholder communication.

APPENDIX A - CROSSWALK OF CORE EVIDENCE

Evidence Category	Related Standards	Examples
Corporate / Legal	1, 2, 3, 12	Formation records, authorization, good standing, governing documents, public status disclosures
Governance / Ethics	1, 3, 12	Bylaws, board roster, minutes, ethics policy, conflicts, organizational chart
Financial	3, 4, 10, 12	Budget, financial statements, controls, tuition/refund schedules, sustainability planning
Academic	1, 5, 6, 8, 11	Catalog, curricula, syllabi, outcomes, assessments, faculty credentials
Student / Learner	7, 8, 10, 12	Admissions, handbook, records, grievances, support, completion data, protection policies
Technology	7, 9, 10	LMS, data security, access controls, backups, online support, continuity
Improvement	8, 12	Assessment reports, strategic plans, surveys, improvement actions, follow-up results

APPENDIX B - REVIEWER RATING GUIDE

Met

Evidence demonstrates satisfactory compliance with the criterion.

Partially Met

Some required elements are present, but improvement or additional evidence is needed.

Not Met

Evidence does not demonstrate satisfactory compliance.

Not Applicable

The criterion does not reasonably apply to the institution's approved scope or model.

Reviewers should distinguish between isolated documentation gaps and systemic weaknesses. Findings should identify the evidence reviewed, the criterion affected, the significance of the issue, and any additional evidence or corrective action required.

Risk Considerations

- Potential harm to current or prospective students

- Legal or regulatory noncompliance
- Misrepresentation of accreditation, authorization, credentials, or outcomes
- Financial instability that threatens completion or records preservation
- Governance failures or unmanaged conflicts of interest
- Weaknesses affecting academic integrity or credential validity
- Data-security or privacy risks
- Pattern, duration, and recurrence of deficiencies

APPENDIX C - INSTITUTIONAL PREPARATION CHECKLIST

[ ] Legal formation and operating authority are current and documented.

[ ] The website, catalog, handbook, and application materials use consistent institutional information.

[ ] Board and governance records are current.

[ ] Conflict-of-interest and ethics procedures are active.

[ ] Current budget and financial reports are available.

[ ] Tuition, fees, and refund policies are published.

[ ] All programs have current curriculum, outcomes, and assessment materials.

[ ] Faculty/staff credentials are verified and organized.

[ ] Student records and records-retention systems are operational.

[ ] Admissions and enrollment practices match published requirements.

[ ] Complaint and grievance procedures are published and usable.

[ ] Technology, security, and backup procedures are documented.

[ ] Emergency, continuity, closure, and records-preservation plans are available.

[ ] Assessment data and improvement actions can be demonstrated.

[ ] The institution is prepared to explain and evidence compliance with every applicable standard.

FINAL PUBLIC DISCLOSURE

GCTEQA evaluates institutions according to published standards and documented evidence. Application, payment of fees, readiness assistance, consulting support, or completion of an evaluation does not guarantee accreditation.

ACCREDITATION CANNOT BE PURCHASED.

Institutions and students remain responsible for verifying governmental authorization, professional licensure requirements, transfer-credit policies, financial-aid eligibility, immigration requirements, credential-recognition rules, and other requirements applicable to their individual circumstances.

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