

ASSOCIATION OF
CLASSICAL CHRISTIAN

SCHOOLS

APPLICATION FOR
 POST-SECONDARY
 PROGRAMMATIC CERTIFICATION

INSTITUTION NAME			
OFFICIAL LEGAL NAME			
STREET ADDRESS/ MAILING ADDRESS			
CITY/STATE/ZIP			
INSTITUTIONAL EMAIL		WEBSITE	
YEAR FOUNDED		INSTITUTIONAL ACCREDITOR	
ENROLLMENT IN THE INSTITUTION		DEGREES/ PROGRAMS (AA, BA, etc.)	
ENROLLMENT IN THE ELIGIBLE PROGRAM(S)		DEGREE(S)/ PROGRAM NAME(S)	
CONTACT PERSON		TITLE	
PHONE		EMAIL	

REQUIRED DOCUMENTATION

The process of attaining **Correspondence Status** begins with the satisfactory completion of this application, accompanied by all appropriate documentation as listed on page 4 of the *Certified College Program Handbook*. (Screenshots, scans, and copies of original documentation are acceptable.)

Once that is reviewed and accepted, you will be invited to submit a Self-Evaluation of their compliance with the ACCS-CCP Standards of Classical Christian Education (see *Certified College Program Handbook* included with this application).

Upon receipt, the Application Review Committee will review the Self-Study and request further clarity if needed.

1 | A SIGNED LETTER FROM THE INSTITUTION'S CHIEF EXECUTIVE

What must the letter state?

1. The institution's decision to pursue C4 accreditation
2. The institution's commitment to the standards and goals of the Certified College Program certification as offered by the ACCS.
 - Standard 1) The institution has an orthodox Protestant Christian Statement of Faith which is central to its mission and permeates its operations.
 - Standard 2) The institution's curriculum for candidate Certified College Program has a scope and sequence that encompasses the breadth of a classical education and is taught by qualified faculty who use appropriate materials and methodologies; student achievement is measured and supported.
 - Standard 3) The institution has identified factors that encourage the spirit of Christian charity and discipleship amongst the entire college community.
3. The institution is not in violation of any federal or state laws, or any requirements of its institutional accreditor.
4. Each member of the institution's administration has read and is in agreement with and support of C4's goals, standards, and requirements.

3 | ABOUT THE INSTITUTION

Attach a brief (2 pages maximum) narrative that gives a description and history of the institution, states its educational philosophy, and explains how it meets the following eligibility requirements for ACCS program certification.

1. Provides post-secondary education
2. Currently is either a full member or has Candidate status with an institutional accreditor recognized by either the Council for Higher Education Accreditation (CHEA) or the United States Department of Education (USDE), or by both
3. Offers degree(s) or program(s) that meet(s) all the following conditions:
 - is committed to the philosophy and practice of classical Christian Education
 - has a minimum duration of two years
 - leads to a post-secondary degree or other recognized credential
 - has students currently enrolled in pursuit of that degree or credential
4. Desires to pursue ACCS certification for the program(s) described in above

4 | DOCUMENTATION OF INSTITUTIONAL COMMITMENTS AND PUBLICATIONS

Include all of the following:

1. The completed ACCS-CCP Application Form, Institutional Data Summary, and two-page Application Narrative (see description on the application form).

2. A copy of the institution's Statement of Faith and Code(s) of Conduct (if any), along with sample forms of any written pledges ascribing or referring to such statement(s) that the institution may require of students, faculty, staff, governing board, etc.
3. Documentation of institutional accreditation or Candidate status.
4. The most recent audited financial statements of the institution; or a letter from the institution's accountant stating that the institution is solvent and its accounts are in order.
5. The latest program catalog and/or handbook.

4 | FACULTY LISTING

List all full-time and part-time faculty in the program(s) to be considered for certification.

Suggestions for Documentation: An existing list from the institution's reporting or academic database may be used or the template below may be filled in.

NAME (INDICATE FT or PT)	COURSES TAUGHT	DEGREE(S) EARNED

Use 'tab' key to add rows

SIGNATURE and FEES

Include a check for \$500 towards processing fees. The remaining \$500 will be due following receipt of the accreditation draft report. Colleges who receive Program certification must continue as affiliates of ACCS and pay the annual fee associated with that advertising category.

By applying for certification, the institution agrees to abide by the ACCS certification process and acknowledges that ACCS liability in matters related to certification decisions shall be limited to the cost of the application fee. All communications and documents related to the certification process are confidential and will be used solely for the purpose of achieving and maintaining certification.

The signature below signifies the CEO's affirmation that the information on this application and all supporting documentation is true and complete.

Authorized Signature
(Print Name): _____

Signature: _____

Date: _____

NOTE: If you are unable to meet any of the requirements listed above, please contact Quentin Johnston to discuss the item more fully. (qjohnston@accsedu.org)