EFFECTIVE PREPARATION OF THE TRACS INTERIM FIFTH-YEAR REVIEW

clarifying objectives utilizing tools implementing strategies
• Reinforce Assessment Foundations
• Develop Action Plan
• Generate Compelling Evidence
• Finalize the Report
• Engage Resolution Cycle
REINFORCE ASSESSMENT FOUNDATIONS

• Energize the Assessment Team
• Mark Accurate Targets
“TRACS institutions that have been granted a ten-year reaffirmation status are required to undergo the Interim Fifth-Year Review (IFYR) process which includes the submission of an *Interim Fifth-Year Review Report* (IFYRR). This process occurs during the fifth year of their reaffirmation status. The following components constitute the IFYRR: (1) the completed *Interim Fifth-Year Review Form*, and (2) documentation in support of the data reported by the institution on the *Interim Fifth-Year Review Form*. The IFYRR focuses primarily on the Institutional Eligibility Requirements (IERs) and assessment processes.”

--“Instructions for Completing and Submitting the Interim Fifth-Year Review Report” (TRACS)
Purpose
Demonstrate Continuing Compliance through Documentation
Purpose
Demonstrate Continuing Compliance through Documentation

Scope
IER Standards and Assessment Processes
Standard 1: Faith Statement
IEH 1.2 Approval. The institution's Board approves and periodically reviews the institution's Faith Statement.

Standard 2: Mission and Name
IEH 2.1 Mission Statement. The institution has a Mission Statement which is current and comprehensive, an accurate guide for the institution's operation, approved and periodically reviewed.

Standard 3: Institutional Objectives
IEH 3.1 Written Institutional Objectives. The institution has a clearly defined written Institutional Objectives which are consistent with the institution's mission.

Standard 4: Institutional Integrity
IEH 4.1 Financial and/or Financial Integrity. The institution operates with integrity and is represented accurately and honestly to the public, the students, and the TRACS.

Standard 5: Operational Authority
IEH 5.1 Operational Authority. The institution has the authority to operate from appropriate governmental agencies (state, federal, territory, country) in which the institution operates.

Standard 6: Organizational Structure
IEH 6.1 The Board of Trustees. The institution has a Board of Trustees, or an equivalent body that establishes the policies and procedures that guide the institution's operation.

IEH 6.2 The Chief Executive Officer. The institution's Board approves and periodically evaluates the Chief Executive Officer (CEO) in charge of the day-to-day operation of the institution.

IEH 6.3 The Chief Academic Officer. The institution's Board approves and periodically evaluates the Chief Academic Officer (CAO) in charge of the academic affairs of the institution.

IEH 6.4 Organizational Structure. The institution's organizational structure is clearly defined and consists of the various departmental structures, including faculty and staff.

IEH 6.5 Administration. Administrative policies and procedures are consistent with the institution's mission and vision.

IEH 6.6 Administration. The institution's Board and administrative policies are consistent with the institution's mission and vision.

IEH 6.7 Board and Administration. The institution's Board and administration are consistent with the institution's mission and vision.

Standard 7: Policies and Procedures
IEH 7.1 ADO (Approved Draft Organizational Flowchart). The institution's policies and procedures are consistent with the institution's mission and vision.

IEH 7.2 Currency and Accuracy. The institution's policies and procedures are consistent with the institution's mission and vision.

IEH 7.3 Scope and Consistency. The institution's policies and procedures are consistent with the institution's mission and vision.

Standard 8: Educational Programs
IEH 8.1 Minimum Enrollment. The institution has a minimum enrollment of undergraduate and graduate students, as required by the institution's mission and vision.

IEH 8.2 Appropriateness of Curriculum. The institution's curriculum is consistent with the institution's mission and vision.

IEH 8.3 Core Curriculum. The institution's core curriculum is consistent with the institution's mission and vision.

IEH 8.4 Learning Outcomes. The institution's learning outcomes are consistent with the institution's mission and vision.

IEH 8.5 Distance Education. The institution's distance education programs are consistent with the institution's mission and vision.

IEH 8.6 Teaching Sites. The institution's teaching sites are consistent with the institution's mission and vision.

IEH 8.7 Course Development. The institution's course development is consistent with the institution's mission and vision.

IEH 8.8 Assessment. The institution's assessment programs are consistent with the institution's mission and vision.

IEH 8.9 Academic Programs. The institution's academic programs are consistent with the institution's mission and vision.

IEH 8.10 Academic Program Evaluation Process. The institution's academic program evaluation process is consistent with the institution's mission and vision.

IEH 8.11 Information Resources and Technology. The institution's information resources and technology are consistent with the institution's mission and vision.

IEH 8.12 Minimum Credit Hours. The institution's minimum credit hours are consistent with the institution's mission and vision.

IEH 8.13 Degree Level Distinctions. The institution's degree level distinctions are consistent with the institution's mission and vision.

IEH 8.14 Faculty Qualifications. The institution's faculty qualifications are consistent with the institution's mission and vision.

IEH 8.15 Departmental Faculty. The institution's departmental faculty are consistent with the institution's mission and vision.

IEH 8.16 Undergraduate Faculty. The institution's undergraduate faculty are consistent with the institution's mission and vision.

IEH 8.17 Graduate Faculty. The institution's graduate faculty are consistent with the institution's mission and vision.

IEH 8.18 Professional Faculty. The institution's professional faculty are consistent with the institution's mission and vision.

IEH 8.19 Academic Freedom. The institution's academic freedom is consistent with the institution's mission and vision.
<table>
<thead>
<tr>
<th>Standard Title</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Standard 1: Institutional Assessment</strong></td>
<td></td>
</tr>
<tr>
<td><strong>IE1</strong></td>
<td>The institution has developed and implemented a comprehensive Assessment Plan which includes all aspects of the institution. (IE1)</td>
</tr>
<tr>
<td><strong>IE2</strong></td>
<td>The institution provides systematic assessment of whether its objectives and outcomes are achieved. (IE2)</td>
</tr>
<tr>
<td><strong>IE3</strong></td>
<td>The institution utilizes multiple approaches (qualitative and quantitative methods and direct and indirect measures) for evaluation. (IE3)</td>
</tr>
<tr>
<td><strong>Standard 2: Operational Efficiency</strong></td>
<td></td>
</tr>
<tr>
<td><strong>IE4</strong></td>
<td>The institution maintains a comprehensive and up-to-date set of policies and procedures. (IE4)</td>
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<tr>
<td><strong>IE5</strong></td>
<td>The institution provides training and support to faculty and staff on the institution's policies and procedures. (IE5)</td>
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<td><strong>Standard 3: Libraries and Learning Resources</strong></td>
<td></td>
</tr>
<tr>
<td><strong>IE6</strong></td>
<td>The institution provides a comprehensive and up-to-date set of policies and procedures for the administration of its libraries. (IE6)</td>
</tr>
<tr>
<td><strong>IE7</strong></td>
<td>The institution provides training and support to faculty and staff on the institution's policies and procedures for the administration of its libraries. (IE7)</td>
</tr>
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<td><strong>Standard 4: Health and Safety Hazards</strong></td>
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<tr>
<td><strong>IE8</strong></td>
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REINFORCE ASSESSMENT FOUNDATIONS

• Energize the Assessment Team
• Mark Accurate Targets
• Improve Communication with the Board
XYX Christian University

Administrative Memo

To: Jane Doe, Chairman of the Board
From: John Doe, Director of Institutional Effectiveness
Date: Sept 1, 2012
Re: Items requiring the attention of the board in the areas of Accreditation, Academics, and Operations

- Annual Board Evaluation of the President. (resolved January 2010)
- **State Authorization for Distance Education.** The rapid pace of change in higher education is impacting the domain of distance education. New government regulations are compelling institutions to receive authorization from each state to deliver distance education to its residents. **Requested Action:** Prepare an action plan to establish and fund a system for maintaining state authorization for distance education. (October 2010)
  
  **Current Status:** The board has determined to take no action on this item at the present time, and to re-evaluate this item again in the future. (October 2011)
- Board Self Evaluation (resolved February 2010)
- Equipment Depreciation Schedule (resolved June 2010)
- Amendments to Educational Mission Statement (resolved August 2010)
TOOLS FOR REINFORCING ASSESSMENT FOUNDATIONS

INTERIM FIFTH-YEAR REVIEW FORM
(Institution Name / Year of Review)

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<tr>
<th>On a scale of 1-4, rate your institution’s level of compliance with the applicable TRACS Standard.</th>
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1. **FAITH STATEMENT**
   1.1 The institution has a Faith Statement which is readily available, and included in appropriate official publications. (IER)

2. **MISSION AND NAME**
   2.1 The institution has a Mission Statement which is current and comprehensive, an accurate guide for the institution’s operations, approved and periodically reviewed by the Institution’s Board, communicated to the institution’s constituencies, and accurately reflective of its Faith Statement. (IER)

3. **INSTITUTIONAL OBJECTIVES**
   3.1 The institution has adopted clearly defined within Institutional Objectives which are consistent with the institution’s mission, stated in measurable terms, and approved and periodically reviewed by the Institution’s Board. (IER)

(4) EXCEEDS THE STANDARD—Results and attainment goals substantially exceed what is normally expected of an institution.
(3) MEETS THE STANDARD—Results and attainment goals consistently meet what is normally expected of an institution.
(2) FALLS BELOW THE STANDARD—Results and attainment goals consistently fall below the TRACS standard.
(1) FAILS TO MEET THE STANDARD—Results do not meet expectations in key areas.
TOOLS FOR REINFORCING ASSESSMENT FOUNDATIONS

INSTRUCTIONS FOR COMPLETING AND SUBMITTING THE INTERIM FIFTH-YEAR REVIEW REPORT (IFYRR)

Requirement: TRACS institutions that have been granted a ten-year reaffirmation status are required to undergo the Interim Fifth-Year Review (IFYR) process which includes the submission of an Interim Fifth-Year Review Report (IFYRR). This process occurs during the fifth year of their reaffirmation status. The following components constitute the IFYRR: (1) the completed Interim Fifth-Year Review Form, and (2) documentation in support of the data reported by the institution on the Interim Fifth-Year Review Form. The IFYRR focuses primarily on the Institutional Eligibility Requirements (IEPs) and assessment processes. The accreditation status of the institution continues during the IFYR.

Deadline for submission of the IFYRR: July 1st (or by the first business day of the month if July 1st falls on a Saturday or Sunday)
TOOLS FOR REINFORCING ASSESSMENT FOUNDATIONS

Demonstrating Compliance: Evaluative Criteria and Typical Documentation
(April 2018 Edition)

Transnational Association of Christian Colleges and Schools
Address: 13933 Forest Road, Forest, VA 24551
Telephone: 434-525-9539
Email: info@tracs.org
Website: www.tracs.org
REINFORCE ASSESSMENT FOUNDATIONS
DEVELOP ACTION PLAN
DEVELOP ACTION PLAN

- Assess your institution’s status
(4) **EXCEEDS THE STANDARD**--Results and attained goals **consistently exceed** what is normally expected of an institution.

(3) **MEETS THE STANDARD**--Results and attained goals **consistently meet** what is normally expected of an institution of this size.

(2) **FALLS BELOW THE STANDARD**--Results and attained goals **consistently fall below** the TRACS standard.

(1) **FAILS TO MEET THE STANDARD**--Results do not meet expectations in key areas.

**DEVELOP ACTION PLAN**

- Assess your institution’s status
## DEVELOP ACTION PLAN

- **Assess your institution’s status**
- **Formulate Resolutions**
## INTERIM FIFTH-YEAR REVIEW FORM
(Institution Name / Year of Review)

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### 1. FAITH STATEMENT
1.1 The institution has a Faith Statement which is readily available and included in appropriate official publications. (IER)

- ✔

Exhibit 1.1.1
Exhibit 1.1.2

### 2. MISSION AND NAME
2.1 The institution has a Mission Statement which is current and comprehensive, an accurate guide for the institution’s operations, approved and periodically reviewed by the institution’s Board, communicated to the institution’s constituencies, and accurately reflective of its Faith Statement. (IER)

- ✔

Exhibit 2.1.1
Exhibit 2.1.2
Exhibit 2.1.3
## 6. ORGANIZATIONAL STRUCTURE

6.1 The institution’s Board, of not less than 5 voting members, is the legally constituted body that holds the institution in trust, has appropriate oversight in matters of policy, operation and evaluation, and exists without conflicts of interest. (IER)

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List the documentation submitted for demonstrating compliance with the applicable Standard. A list of typical documentation often submitted to demonstrate compliance may be found in the TRACS publication *Demonstrating Compliance: Evaluative Criteria and Typical Documentation*.

If the institution rates its level of compliance with the Standard at either a 1 or 2, the institution should submit action steps to be taken to address the deficiency.

---

<table>
<thead>
<tr>
<th>Team Member 1</th>
</tr>
</thead>
<tbody>
<tr>
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</table>

Add conflict of interest Policy to board manual.
REINFORCE ASSESSMENT FOUNDATIONS
DEVELOP ACTION PLAN
GENERATE COMPELLING EVIDENCE
# BEST EVIDENCE FOR COMPLIANCE

<table>
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<tr>
<th>Inadequate Evidence</th>
<th>Compelling Evidence</th>
</tr>
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<tbody>
<tr>
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<td>• Relevant</td>
</tr>
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</tr>
<tr>
<td>• dated</td>
<td>• Up-to-Date</td>
</tr>
<tr>
<td>• unsubstantiated</td>
<td>• Authenticated</td>
</tr>
<tr>
<td>• unidentifiable</td>
<td>• Labeled</td>
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Inadequate Evidence:
- immaterial
- general
- dated
- unsubstantiated
- unidentifiable

Compelling Evidence:
- Relevant
- Specific
- Up-to-Date
- Authenticated
- Labeled
12. Institutional Assessment

The institution has developed and implemented a comprehensive Assessment Plan as a means of evaluating its effectiveness in accomplishing its mission and objectives. The Assessment Plan describes the processes utilized in the evaluation of all foundational and operational areas of the institution and includes the identification of outcomes, assessments to determine the extent to which these outcomes are achieved, and evidence of institutional improvement based on an analysis of assessment results.

12.1 The institution has developed and implemented a comprehensive Assessment Plan which includes all aspects of the institution. (IER)

12.2 The institution provides a systematic assessment of whether or not student learning outcomes at the institution, program and course levels are appropriate to its educational mission. (IER)

12.3 The institution utilizes multiple approaches (qualitative and quantitative methods and direct and indirect measures) for assessing student learning, including information both internal and external to the institution.
**Evaluative Criteria:** The Accreditation Commission will utilize the following evaluative criteria when determining institutional compliance in this area:

- The institution has a Board-approved Assessment Plan that is written and published appropriately.
- The Assessment Plan calls for the regular review and appropriate level of approval of the following:
  - The Assessment Plan itself
  - The institution’s Faith Statement, Mission, and Objectives
  - The Board and its function
  - Institutional policies
  - Institutional publications
  - Employee (including all administrators and faculty) performance relative to published job descriptions
  - Student learning and program outcomes relative to the institution’s Mission and Objectives (see Standard 17.11)
  - Curriculum to ensure that content and requirements are consistent with anticipated norms in higher education
- Faculty
- Student Services
- Financial Operations, including financial aid as applicable
- The institution’s Strategic Plan and the related planning processes
- The library and learning resources including, the personnel and services associated with the library and learning resources
- The facilities and equipment, including technology
- The health and safety measures utilized
- Compliance with applicable Federal requirements

- Assessment results are provided to stakeholders and are made available to the public in an easy to understand format.
- Assessment results are reviewed, analyzed and utilized in the decision making processes regarding possible institutional changes.
Typical Documentation: This list of Typical Documentation is not exhaustive, and institutions may provide other documentation relevant to their specific context. The examples presented may not be applicable to all institutions. Additionally, institutions are not required to use the examples presented and may instead choose to demonstrate compliance via other means.

- A copy of the institution’s Assessment Plan containing areas to be assessed, processes, timelines, individuals responsible for specified tasks, and tools utilized in the various assessment processes
- A copy of Board minutes indicating approval of the Assessment Plan
- Completed assessment data
- Copies of assessment summary reports with information as to how such reports are distributed and to whom
- Copies of minutes of Board, administrative, faculty or committee meetings indicating that assessment data is utilized to promote institutional change
Administrative Memo

To: Jane Doe, Chairman of the Board  
From: John Doe, Director of Institutional Effectiveness  
Date: Sept 1, 2012  
Re: Items requiring the attention of the board in the areas of Accreditation, Academics, and Operations

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TOOLS FOR GENERATING COMPELLING EVIDENCE

• Communication
• Collaboration
TOOLS FOR GENERATING COMPELLING EVIDENCE

- Communication
- Collaboration
- Research

MINUTES BANK
- Board Minutes
- Faculty Minutes
- Committee Minutes
TOOLS FOR GENERATING COMPELLING EVIDENCE

- Communication
- Collaboration
- Research
- Organization (folder system)
Exhibit Folder System

- Exhibit 1.1.1 Faith Statement in Cat
- Exhibit 1.1.2 Faith Statement in Con
- Exhibit 1.1.3 Faith Statement in Facu
- Exhibit 1.1.4 Affirmation of Faith St:
- Exhibit 1.1.5 Faculty Manual–Faculty
- Exhibit 1.1.6 Board Manual–Doctrin
- Exhibit 1.1.7 Faith Statement Full Te
- Exhibit 1.2.1 Board Approval of Bib

TOOLS FOR GENERATING COMPELLING EVIDENCE

- Communication
- Collaboration
- Research
- Organization (labeling system)
# Tools for Generating Compelling Evidence

- Communication
- Collaboration
- Research
- Organization
- Tracking

## April Progress Targets

**TRANSNATIONAL ASSOCIATION OF CHRISTIAN COLLEGES AND SCHOOLS**

**Interim Fifth-Year Review Form**

<table>
<thead>
<tr>
<th>Rate your institution on a scale of 1-4 for each of the TRACS Standards</th>
<th>Suggested Evidences for Compliance with the Standards</th>
<th>Documentation/Evidence submitted to support your response</th>
</tr>
</thead>
</table>
| 4 | ✓ | ▪ Evidence of curriculum comparability evidence with other institutions (benchmarks)  
▪ Evidence of curriculum comparability between resident and branch or resident and distance learning | Exhibit 19.8.5  
Exhibit 12.5.1  
Exhibit 12.5.2 |
| 3 | ✓ | ▪ Evidence of core competency levels established and evaluated for general education (undergraduate)  
▪ Evidence of core competency levels established and evaluated for program/major (undergraduate and graduate level)  
▪ Evidence of core competency levels are appropriate for the education level | Exhibit 11.7.1  
Exhibit 11.18.1 |
| 2 | ✓ | ▪ Evidence of program/Major Review process and initiation  
▪ Evidence of a link to the strategic planning process  
▪ Evidence of evaluation of curriculum must be included in the assessment plan | Exhibit 11.3.1  
Exhibit 11.8.1  
Exhibit 12.5.1  
Exhibit 19.5.1  
Exhibit 19.5.2  
Exhibit 19.5.3  
Exhibit 19.5.4  
Exhibit 19.7.1  
Exhibit 19.8.1  
Exhibit 19.8.2  
Exhibit 19.8.3  
Exhibit 19.9.1  
Exhibit 19.9.2  
Exhibit 19.9.3 |
REINFORCE ASSESSMENT FOUNDATIONS
DEVELOP ACTION PLAN
GENERATE COMPELLING EVIDENCE
FINALIZE THE REPORT
### INTERIM FIFTH-YEAR REVIEW FORM

(Institution Name / Year of Review)

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#### 1. FAITH STATEMENT

1.1 The institution has a Faith Statement which is readily available and included in appropriate official publications. (IER)  

- ✔  

Exhibit 1.1.1 Faith Statement Catalog  
Exhibit 1.1.2 Faith Statement Website

#### 2. MISSION AND NAME

2.1 The institution has a Mission Statement which is current and comprehensive, an accurate guide for the institution’s operations, approved and periodically reviewed by the institution’s Board, communicated to the institution’s constituencies, and accurately reflective of its Faith Statement. (IER)  

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Exhibit 2.1.1 Mission Statement  
Exhibit 2.1.2 Faculty Review Minutes  
Exhibit 2.1.3 Board Approval Minutes
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<tr>
<td>Add 5th member to board</td>
</tr>
<tr>
<td>Add conflict of interest Policy to board manual</td>
</tr>
</tbody>
</table>

- enhanced labeling

Exhibit 6.1.1 Board Membership Policy

Add 5th member to board

Add conflict of interest Policy to board manual
FINALIZE THE REPORT

Suggestion 1: Provide the reviewer with bookmarks for locating documentation easily

PDF format with bookmarks
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**Suggestion:** Provide the reviewer with hyperlinks for locating documentation easily

- Exhibit 1.1.1 Faith Statement Catalog
- Exhibit 1.1.2 Faith Statement Website
- Exhibit 2.1.1 Mission Statement
- Exhibit 2.1.2 Faculty Review Minutes
- Exhibit 2.1.3 Board Approval Minutes
**FINALIZE THE REPORT**

Suggestion: Provide the reviewer with *hyperlinks* for locating documentation easily

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| ![Checkmark]                                  | **Exhibit 2.1.2 Faculty Review Minutes**  
| ![Checkmark]                                  | **Exhibit 2.1.3 Board Approval Minutes** |
FINALIZE THE REPORT

Submit the report to the TRACS office

Deadline for submission of the IFYRR: July 1st (or by the first business day of the month if July 1st falls on a Saturday or Sunday)

Process: The IFYR process involves these general steps

1. The institution submits the following to the TRACS office:
   a. A digital copy of the completed Interim Fifth-Year Review Form
   b. A digital copy of supporting documentation (including completed assessment materials which have been “sanitized” of unnecessary personal information
   c. Payment of the appropriate Interim Fifth-Year Status Review Fee (see Fee Schedule)
REINFORCE ASSESSMENT FOUNDATIONS
DEVELOP ACTION PLAN
GENERATE COMPELLING EVIDENCE
FINALIZE THE REPORT
ENGAGE THE RESOLUTION CYCLE
THE IFYRR RESOLUTION CYCLE

**July 15**
- Submit IFYRR
  - To TRACS office by July 15
  - To Peer Reviewers

**Fall**
- Staff Visit
  - Submit additional evidence
  - Provide access to documents and personnel

**Dec**
- Draft Report
  - Review Draft Report
  - Report “errors of fact”

**Feb 15**
- Final Report
  - Receive Final Report
  - Submit Response Matrix Feb 15

**Aug 15**
- 1st Update
  - Review Actions of Commission
  - Submit 1st semi-annual Matrix update Aug 15
EFFECTIVE PREPARATION OF THE TRACS INTERIM FIFTH-YEAR REVIEW

clarifying objectives
utilizing tools
implementing strategies