



Middle States Commission on Higher Education

3624 Market Street, Philadelphia, PA 19104-2680. Tel: 267-284-5000. Fax: 215-662-5501

www.msche.org

November 18, 2011

Dr. Trinidad Fernandez Miranda
Chancellor
UPR - Carolina
P. O. Box 4800
Carolina, PR 00984-4800

Dear Dr. Fernandez Miranda:

At its session on November 17, 2011, the Middle States Commission on Higher Education acted:

To reaffirm accreditation and commend the institution on the quality of the self-study process. To request a progress report due October 1, 2013, documenting evidence of (1) further alignment of planning and resource allocation processes that link planning to decision-making and budgeting processes (Standard 2); (2) development of a comprehensive facilities plan (Standard 3); (3) further development and implementation of a comprehensive, organized, and sustained process for the assessment of institutional effectiveness (Standard 7); and (4) further implementation of an organized and sustained process to assess the attainment of learning goals at the program level, including evidence that student learning assessment information is used to improve teaching and learning (Standard 14). The Periodic Review Report is due June 1, 2016.

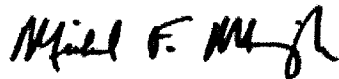
Enclosed for your information is a copy of the Statement of Accreditation Status for your institution. The Statement of Accreditation Status (SAS) provides important basic information about the institution and its affiliation with the Commission, and it is made available to the public in the Directory of Members and Candidates on the Commission's website at www.msche.org. Accreditation applies to the institution as detailed in the SAS; institutional information is derived from data provided by the institution through annual reporting and from Commission actions. If any of the institutional information is incorrect, please contact the Commission as soon as possible.

Please check to ensure that published references to your institution's accredited status (catalog, other publications, web page) include the full name, address, and telephone number of the accrediting agency. Further guidance is provided in the Commission's policy statement *Advertising, Student Recruitment, and Representation of Accredited Status*. If the action for your institution includes preparation of a progress report, monitoring report or supplemental report, please see our policy statement on *Follow-up Reports and Visits*. Both policies can be obtained from our website.

Dr. Trinidad Fernandez Miranda
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Please be assured of the continuing interest of the Commission on Higher Education in the well-being of UPR - Carolina. If any further clarification is needed regarding the SAS or other items in this letter, please feel free to contact Dr. Mary Ellen Petrisko, Vice President.

Sincerely,

A handwritten signature in black ink, appearing to read "Michael F. Middaugh". The signature is stylized and cursive.

Michael F. Middaugh, Ed.D.
Chair

c: Dr. Miguel Munoz, President, University of Puerto Rico Central Administration
Mr. Justo Reyes-Torres, Executive Director, Puerto Rico Council on Higher Education



STATEMENT OF ACCREDITATION STATUS

UPR - CAROLINA
P. O. Box 4800
Carolina, PR 00984-4800
Phone: (787) 257-0000; Fax: (787) 750-7940
www.uprc.edu

Chief Executive Officer: Dr. Trinidad Fernandez Miranda, Chancellor

System: University of Puerto Rico Central Administration
Dr. Miguel Munoz, President
G.P.O. Box 4984-G
San Juan, PR 00936
Phone: (787) 759-6061; Fax: (787) 759-6917

INSTITUTIONAL INFORMATION

Enrollment
(Headcount): 4002 Undergraduate

Control: Public

Affiliation: State

Carnegie Classification: Baccalaureate - Diverse Fields

Degrees Offered: Associate's, Bachelor's

Distance Education
Programs: No

Accreditors Approved by U.S. Secretary of Education: n/a

Instructional Locations

Branch Campuses: None

Additional Locations: None

Other Instructional Sites: None

ACCREDITATION INFORMATION

Status: Member since 1978

Last Reaffirmed: November 17, 2011

Most Recent Commission Action:

November 17, 2011: To reaffirm accreditation and commend the institution on the quality of the self-study process. To request a progress report due October 1, 2013, documenting evidence of (1) further alignment of planning and resource allocation processes that link planning to decision-making and budgeting processes (Standard 2); (2) development of a comprehensive facilities plan (Standard 3); (3) further development and implementation of a comprehensive, organized, and sustained process for the assessment of institutional effectiveness (Standard 7); and (4) further implementation of an organized and sustained process to assess the attainment of learning goals at the program level, including evidence that student learning assessment information is used to improve teaching and learning (Standard 14). The Periodic Review Report is due June 1, 2016.

Brief History Since Last Comprehensive Evaluation:

- November 16, 2006: To accept the Periodic Review Report and to reaffirm accreditation. To request a monitoring report by April 1, 2008, documenting (1) progress in the implementation of effective institutional planning and assessment processes, and (2) status of institutional finances and enrollment. The next evaluation visit is scheduled for 2010-2011.
- June 26, 2008: To accept the monitoring report submitted by the institution. To request a monitoring report, due by April 1, 2009, (1) further documenting progress in the implementation of effective institutional planning and assessment processes (Standard 7) and (2) the status of institutional finances and enrollment (Standard 3). The next evaluation visit is scheduled for 2010-2011.
- June 25, 2009: To accept the monitoring report. The next evaluation visit is scheduled for 2010-2011.
- June 24, 2010: To note receipt of the voluntary information report. To place the institution on probation because of a lack of evidence that the institution is in compliance with Standard 4 (Leadership and Governance) and Standard 11 (Educational Offerings). To request a monitoring report due by September 1, 2010, documenting evidence that the institution has achieved and can sustain ongoing compliance with (1) Standard 4 (Leadership and Governance), including but not limited to the development and implementation of clear institutional policies specifying the respective authority of the different governance bodies and their respective roles and responsibilities in shared governance; and (2) Standard 11 (Educational Offerings), including but not limited to a plan for assuring the rigor, continuity, and length of courses affected by the institution's closure. In addition, the report should document evidence of the development and/or implementation of a long-term financial

plan, including steps taken to improve the institution's finances and the development of alternative funding sources (Standard 3). An on-site evaluation will follow submission of the report. The purpose of the on-site evaluation is to verify the information provided in the monitoring report and the institution's ongoing and sustainable compliance with the Commission's accreditation standards. To further direct a prompt Commission liaison guidance visit to discuss the Commission's expectations for reporting. To note that the institution remains accredited while on probation. To note that the next evaluation visit is still scheduled for 2010-2011.

November 18, 2010: To note that the Commission liaison guidance visit took place. To accept the monitoring report and to note the visit by the Commission's representatives. To continue the institution's probation due to a lack of evidence that the institution is in compliance with Standard 3 (Institutional Resources) and Standard 4 (Leadership and Governance). To request a monitoring report due March 1, 2011, documenting evidence that the institution has achieved and can sustain ongoing compliance with Standards 3 and 4, including but not limited to (1) five-year financial projections for the UPR System including information from audited financial statements for fiscal year 2010; (2) institutional pro-forma budgets that demonstrate the institution's ability to generate a balanced budget for fiscal years 2012 through 2015, including the personnel, compensation, and other assumptions on which these budgets are based (Standard 3); (3) evidence of implementation of clear institutional policies specifying the respective authority of the different governance bodies and their respective roles and responsibilities in shared governance; (4) evidence that the Board of Trustees assists in generating resources needed to sustain and improve the institution; (5) evidence of a procedure in place for the periodic objective assessment of the Board of Trustees in meeting stated governing body objectives and responsibilities; (6) evidence that steps have been taken to assure continuity and stability of institutional leadership, particularly in times of governmental transition; (7) evidence that the UPR Action Plan is implemented, that it is assessed, and the data are used for continuous improvement of the institution's processes; (8) evidence that steps have been taken to improve shared governance, especially in documenting how campus input is solicited and considered in decision making at the System level; and (9) evidence that communication between the Central Administration and the institution and within the institution, is clear, timely, and accurate, and that the sources of such communications are clearly defined and made available to all constituents (Standard 4). An on-site evaluation will follow submission of the report. To note that the 2010-2011 evaluation visit has been postponed to the summer or fall of 2011, and that this visit will include consideration of this report. To note that the institution remains accredited while on probation.

June 23, 2011: To accept the monitoring report, to note that a small team visit took place, to remove probation, and reaffirm accreditation. To direct the evaluation team scheduled to visit in the fall of 2011 to consider and report on (1) steps taken to ensure timely production of audited financial statements for FY 2011 and subsequent years (Standard 3); (2) evidence of further implementation of the UPR Action Plan, including evidence that the action plan is being assessed and

data is used for improvements; and (3) evidence of further progress in implementing a procedure for the periodic objective assessment of the Board of Trustees (Standard 4).

Next Self-Study Evaluation: 2020 - 2021

Next Periodic Review Report: 2016

Date Printed: November 18, 2011

DEFINITIONS

Branch Campus - A location of an institution that is geographically apart and independent of the main campus of the institution. The location is independent if the location: offers courses in educational programs leading to a degree, certificate, or other recognized educational credential; has its own faculty and administrative or supervisory organization; and has its own budgetary and hiring authority.

Additional Location - A location, other than a branch campus, that is geographically apart from the main campus and at which the institution offers at least 50 percent of an educational program. **ANYA** ("Approved but Not Yet Active") indicates that the location is included within the scope of accreditation but has not yet begun to offer courses. This designation is removed after the Commission receives notification that courses have begun at this location.

Other Instructional Sites - A location, other than a branch campus or additional location, at which the institution offers one or more courses for credit.

Distance Education Programs - Yes or No indicates whether or not the institution has been approved to offer one or more degree or certificate/diploma programs for which students could meet 50% or more of their requirements by taking distance education courses.

EXPLANATION OF COMMISSION ACTIONS

An institution's accreditation continues unless it is explicitly suspended or removed. In addition to reviewing the institution's accreditation status at least every 5 years, actions are taken for substantive changes (such as a new degree or geographic site, or a change of ownership) or when other events occur that require review for continued compliance. Any type of report or visit required by the Commission is reviewed and voted on by the Commission after it is completed.

In increasing order of seriousness, a report by an institution to the Commission may be accepted, acknowledged, or rejected.

Levels of Actions:

Grant or Re-Affirm Accreditation without follow-up

Defer a decision on initial accreditation: The institution shows promise but the evaluation team has identified issues of concern and recommends that the institution be given a specified time period to address those concerns.

Postpone a decision on (reaffirmation of) accreditation: The Commission has determined that there is insufficient information to substantiate institutional compliance with one or more standards.

Continue accreditation: A delay of up to one year may be granted to ensure a current and accurate representation of the institution or in the event of circumstances beyond the institution's control (natural disaster, U.S. State Department travel warnings, etc.)

Recommendations to be addressed in the next Periodic Review Report: Suggestions for improvement are given, but no follow-up is needed for compliance.

Supplemental Information Report: This is required when a decision is postponed and are intended only to allow the institution to provide further information, not to give the institution time to formulate plans or initiate remedial action.

Progress report: The Commission needs assurance that the institution is carrying out activities that were planned or were being implemented at the time of a report or on-site visit.

Monitoring report: There is a potential for the institution to become non-compliant with MSCHE standards; issues are more complex or more numerous; or issues require a substantive, detailed report. A visit may or may not be required.

Warning: The Commission acts to Warn an institution that its accreditation may be in jeopardy when the institution is not in compliance with one or more Commission standards and a follow-up report, called a monitoring report, is required to demonstrate that the institution has made appropriate improvements to bring itself into compliance. Warning indicates that the Commission believes that, although the institution is out of compliance, the institution has the capacity to make appropriate improvements within a reasonable period of time and the institution has the capacity to sustain itself in the long term.

Probation: The Commission places an institution on Probation when, in the Commission's judgment, the institution is not in compliance with one or more Commission standards and that the non-compliance is sufficiently serious, extensive, or acute that it raises concern about one or more of the following:

1. the adequacy of the education provided by the institution;
2. the institution's capacity to make appropriate improvements in a timely fashion; or
3. the institution's capacity to sustain itself in the long term.

Probation is often, but need not always be, preceded by an action of Warning or Postponement. If the Commission had previously postponed a decision or placed the institution on Warning, the Commission may place the institution on Probation if it determines that the institution has failed to address satisfactorily the Commission's concerns in the prior action of postponement or warning regarding compliance with Commission standards. This action is accompanied by a request for a monitoring report, and a special visit follows. Probation may, but need not always, precede an action of Show Cause.

Suspend accreditation: Accreditation has been Continued for one year and an appropriate evaluation is not possible. This is a procedural action that would result in Removal of Accreditation if accreditation cannot be reaffirmed within the period of suspension.

Show cause why the institution's accreditation should not be removed: The institution is required to present its case for accreditation by means of a substantive report and/or an on-site evaluation. A "Public Disclosure Statement" is issued by the Commission.

Remove accreditation. If the institution appeals this action, its accreditation remains in effect until the appeal is completed.

Other actions are described in the Commission policy, "Range of Commission Actions on Accreditation."