



ACCREDITING COUNCIL FOR CONTINUING EDUCATION & TRAINING
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VIA EMAIL & FEDERAL EXPRESS
(amin@floridauniversitygate.com)

Mr. Mohamed Abdalla
School Director
Florida University Gate
10730 N. 56th Street
Suites 202, 203, 204, and 205
Temple Terrace, Florida 33617

***Re: Initial Accreditation Denied
(Appealable; Not a Final Action)***

ACCET ID #1564

Dear Mr. Abdalla,

This letter is to inform you that, at its April 2019 meeting, the Accrediting Commission of the Accrediting Council for Continuing Education & Training (ACCET) voted to deny initial accreditation to Florida University Gate, located in Temple Terrace, Florida.

The decision was based upon a careful review and evaluation of the record, including the institution's Analytic Self-Evaluation Report (ASER), the on-site visit team report (visit conducted February 20-21, 2019), and the institution's response to that report, dated March 30, 2019. It is noted that some weaknesses cited in the team report were partially addressed in the institution's response and accepted by the Commission. However, the Commission determined that the institution has not adequately demonstrated compliance with respect to ACCET standards, policies, and procedures, relative to the following findings:

1. Standard I-A: Mission

The institution failed to demonstrate that its mission provides a definitive basis upon which to deliver and assess its education and training programs or that it establishes and utilizes specific criteria to measure whether it is achieving its mission.

The team report indicated that the institution's mission statement published in the "Welcome Letter" provided to new enrollees differed from that posted at the school and on its website. In addition, the institution did not demonstrate that it had established and utilized specific criteria to measure whether it is achieving its mission.

While the institution indicated in its ASER that it used academic assessment and progress, as well as standardized test scores and levels of student satisfaction, to determine its success in meeting its mission, the team observed that low response rates for test score reporting, the institution's failure to effectively track student progress, and its failure to demonstrate or implement a systematic approach to compiling, analyzing, and evaluating student satisfaction data rendered the claimed measurement criteria ineffective. The team report also cited extensive discrepancies between the number of enrollments and program offerings stated in the institution's ASER and those recorded on records provided to the team.

In its response, the institution indicated that it had revised its "Welcome Letter" and Instructor Manual to ensure that its mission, as expressed in these documents, aligned with the version stated in the ASER and posted on its website. However, the institution did not address concerns regarding the establishment and utilization of specific criteria to measure whether it is achieving its mission, the cited deficiencies in response rates for test score reporting, student progress, and a systematic approach to compiling, analyzing, and evaluating student satisfaction data, or the discrepancies between professed and documented enrollments and program offerings.

Therefore, the institution failed to demonstrate compliance with this standard.

2. Standard I-C: Planning

The institution failed to demonstrate that it utilizes a planning process to establish plans that support its mission and goals, that such plans are regularly reviewed, updated, and implemented to improve the effectiveness of the institution, or that there are sound one-year and longer-term plans, which include specific and measurable objectives, as well as operational strategies, projected time frames, required resources, and methods of subsequent evaluation, that encompass both the educational and operational objectives of the institution.

The team report indicated that two planning documents submitted by the institution in its ASER comprised a short-term plan but one that did not contain objectives to address the educational and operational objectives of the institution. In addition, the institution had not developed or implemented a longer-term plan, as required by the standard.

In its response, the institution submitted a chart of longer-term objectives. The institution identifies only five objectives, all of which are aspirational in nature and lack operational strategies to identify and manage the steps, time frames, and resources required to obtain these objectives.

Therefore, the institution failed to demonstrate compliance with this standard.

3. Standard II-A: Governance

The institution failed to demonstrate that it had developed a clearly identified and accountable governance structure that was sufficiently knowledgeable to approve institutional policies and assume responsibility for the overall direction of the institution to ensure its integrity and capability or its compliance with statutory, regulatory, and accreditation requirements.

The team report indicated that the institution was advertising two programs, a General Tutoring program, which offered a broad range of tutoring classes to primary school and young adult students, and a Summer Program, which were not included in the institution's application for accreditation. The institution was also operating temporary avocational classrooms, including a location at an Islamic Center in Gainesville in operation at the time of the on-site visit, which had not been included in its application for accreditation.

In its response, the institution indicated that "FUG started offering Summer program for kids in 2017 and 2018 just during the summer and it was actually combined with Tutoring [sic]," and that it had now added both programs "into ACCET dashboard as new programs." However, the institution did not demonstrate that either program had been submitted in accordance with ACCET Document 25 – Policy for New, Revised, and Existing Programs/Courses. Regarding the institution's use of the additional locations not included in its application for accreditation, the institution indicated that this "was part of our reaching out and expansion program to get our name into neighboring cities" and that it "will discuss this in future with ACCET to find out the proper way to handle these scenarios until we open our permanent location into those cities, and add it as a branch to our main campus [sic]." The institution has not submitted any documentation to ACCET regarding these additional locations in accordance with ACCET Document 26 – Policy on Additional Locations and Changes of Location.

Therefore, the institution failed to demonstrate compliance with this standard.

4. Standard II-B: Institutional Management

The institution failed to demonstrate that, to maintain operational effectiveness, periodic meetings with employees are conducted and that appropriate documentation is maintained on significant issues, consistent with the size and purpose of the institution.

The team report indicated that the institution had not systematically or effectively disseminated or ensured evaluation and, if applicable, revision of policies and procedures across all areas of operation. The institution had developed a single copy of an Administrative Policy and Procedures Manual, maintained in the office of the School Director, which was still being updated during the on-site visit. No

copy of this document or other policies and procedures relevant to administrative or faculty responsibilities had been made available or effectively communicated to staff and faculty. Neither staff nor faculty could articulate policy or procedures pertinent to their roles at the institution and, the School Director excepted, employees indicated that they did not have access to written policy and procedures.

In its response, the institution indicated that “[t]here was one manual for the school its [sic] not divided into (student Handbook Faculty Handbook) [sic],” and that “[h]andbook are [sic] shared in google drive and the link was shared with all staff.” In addition, “[h]andbook were [sic] discussed with details with all staff,” and “[i]nstructor handbook is part of the first day packet that will be distributed and given to new instructors and employees who join FUG during orientation.” While the institution submitted evidence that the Faculty Handbook had been updated to a Google Drive, there was no evidence to indicate that the institution had systematically and effectively disseminated essential policies and procedures to all members of staff or that any training had been conducted to address the team report’s concerns regarding the lack of familiarity of the institution’s faculty and staff with its policies and procedures.

Therefore, the institution failed to demonstrate compliance with this standard.

5. Standard II:C – Human Resource Management

The institution failed to demonstrate that it had developed and implemented written human resources policies and procedures to ensure the effective recruitment, selection, hiring, orientation, supervision, evaluation, retention, training, and professional development of personnel.

The team report indicated that USCIS Forms I-9, Employment Eligibility Verification, had not been completed for any employee at the time of hire. In addition, the institution had not developed a professional development policy for faculty of staff. While Document 21 – ACCET On-Site Visit Personnel File/Qualifications Checklist stated that professional development activities had been conducted, there was no supporting documentation to verify or validate this training. The institution’s failure to ensure that faculty are hired in accordance with the institution’s policy on minimum qualifications is further discussed under Standard VI:A – Qualifications of Instructional Personnel.

In its response, the institution provided Forms I-9 for five employees, one sample document to evidence in-service training, and a certificate of attendance at the March 27-30, 2019 TESOL conference for one employee. However, the institution did not provide a rationale to indicate how the submission of a single employee in-service training document and single sample of external training evidenced the systematic and effective implementation of written human resource policies to ensure that all employees are effectively evaluated and trained at the institution. In addition, the

single in-service training document was, in fact, an employee evaluation, with the following comments representing the evaluation in its entirety: “To be very close to students;” “Professional development and strength;” and “Understand cultural differences for international students, such as Saudi Arabia one [sic].”

Therefore, the institution failed to demonstrate compliance with this standard.

6. Standard II-D: Records

The institution failed to demonstrate that it has an organized record-keeping system that ensures all records are maintained in an accurate, orderly, and up-to-date manner and which facilitates ready access and review by appropriate third parties.

The team report indicated that the institution’s Student Records Policy did not include guidance on timeframes for record retention, storage, or disposal, and did not identify the individuals responsible for organizing, auditing, or securing student records. The team report cited the following examples as illustrative of the institution’s overall failure to maintain accurate, orderly, and up-to-date records to facilitate the accurate tracking of student compliance and progress: (a) inconsistent, missing, or incomplete attendance records (as further discussed under Standard VIII:B – Attendance); (b) the absence of any grades, student reports, or transcripts in any of the files reviewed (as further discussed under Standard VIII:C – Student Progress); and (c) incomplete enrollment forms, which are also used to track financial payments (as further discussed in Standards III:B – Financial Procedures and VII:B – Admissions/Enrollment). In addition, the team report indicated that class lists, provided in lieu of individual student files, also contained substantial inconsistencies. Of four class lists reviewed, only one (the March 2018 IELTS course) contained attendance sheets and practice tests, only one contained copies of student IDs (the September 2018 GRE course), and one included enrollment forms for 12 students when 13 were enrolled in the class (the September 2018 GRE course).

In its response, the institution indicated that the discrepancy in enrollment for the September 2018 GRE course was owing to a student choosing to repeat that class. The institution further indicated that “[t]he course type in FUG (GRE/IELTS) don’t require to keep transcripts of students [sic].” In addition, the institution stated that “[u]sually attendance sheets are saved separately in an attendance sheet folder for record keeping.” However, the institution did not indicate why these attendance records were not made available to the team during the on-site visit. Also, the institution did not address the team report’s concerns with the institution’s Student Records Policy and its lack of guidance on timeframes for record retention, storage, record disposal, or assigned personnel to oversee and audit student records. While the institution’s failure to demonstrate compliance with financial procedures, enrollment, attendance, and student progress are further discussed under Standards III:B – Financial Procedures, VII:B – Admissions/Enrollment, VIII:B – Attendance, and VIII:C – Student Progress, it is also noted that the institution’s response was silent

on these serious issues as they were raised in the team report in relation to this standard.

Therefore, the institution failed to demonstrate compliance with this standard.

7. Standard III-B: Financial Procedures

The institution failed to demonstrate that written policies and procedures exist for proper financial controls and the supervision of financial management staff, that tuition charges are applied fairly and consistently, that tuition payments are properly recorded and tracked, or that its cancellation and refund policy is fair, equitable, consistently administered, and compliant with statutory, regulatory, and accreditation requirements.

The team report indicated that the institution's Policy and Procedures Manual did not provide effective guidelines for accepting cash, checks, or credit card payments, for counting, documenting, and depositing payments, for crediting payments to student accounts, or for processing refunds in a verifiable manner with refund calculation worksheets and relevant supporting documentation. There were no checks and balances to ensure that cash payments were accurately received, assigned to student accounts, and deposited, with only one administrator responsible for receiving, assigning, and depositing cash.

The team report also indicated that the institution did not demonstrate that tuition charges were fairly and consistently applied, with differing tuition rates applied to students enrolling in the same course at the same time in at least three program cohorts reviewed (e.g., four students were charged \$800 for the March 2018 IELTS course, while three students were charged \$1,000; students in the February 2018 IELTS course were charged either \$1,550 or \$1,000; and, while one student was charged \$1,000 for the June 2018 GRE course, the remaining eight students were charged \$1,150). The institution applied tuition discounts for certain students, including students who no longer had access to Saudi Arabian Cultural Commission (SACM) sponsorship, with no support or rationale for such discounts in the institution's policies or procedures, nor adequate documentation to evidence their fair and equitable application. The institution also advertised a "50% discount" to students who were "without mission support," i.e., SACM-sponsored students who had lost their scholarships, resulting in the institution charging scholarship students twice as much as students who were no longer eligible for sponsorship support.

The team report further indicated that the institution did not maintain student ledgers or equivalent documentation to evidence the receipt, application, and documentation of charges to students or the total amount paid or outstanding. As noted under Standard II:D – Records, the institution does not maintain individual student financial records or files; rather, partial tuition payments are documented on an enrollment agreement and filed as a group by class cohort, most of which contain incomplete

documentation to evidence payment and none of which contain complete tuition receipt records. In the case of partial or installment payments, no documentation contained a schedule for remaining payments. The team report indicated that, for the February 2018 ESOL “class list,” there was no payment documented on enrollment forms for six students.

In addition, the team report indicated that the institution’s cancellation and refund policy was not consistent with ACCET Document 31.ESOL – Cancellation and Refund Policy in that: it is not clearly stated to students prior to enrollment in the institution’s enrollment/application documents; it does not provide for automatic, administrative withdrawal of students; it does not articulate a refund policy for self-paying students; and refund calculations are not completed for all students, including students to whom no refund is due.

In its response to the team report, the institution failed to address the team report’s concerns with the lack of effective guidelines for accepting cash, checks, or credit card payments, for counting, documenting, and depositing payments, for crediting payments to student accounts, or for processing refunds in a verifiable manner with refund calculation worksheets and relevant supporting documentation. The institution’s response was also silent on the team report’s concerns regarding the lack of checks and balances for cash payments.

Regarding the team report’s findings with respect to the institution’s failure to demonstrate that tuition charges were fairly and consistently applied, the institution indicated in its response that “FUG classes are usually \$1,150 per class including text book and registration, FUG provide IELTS classes for 30% discounts for students who are paying cash that’s the reason some of the students have payment of 1000 [sic].” Further, “FUG also provide classes thru the Saudi Student Association at ASF (SSA) at a discount as 800 cash promotion for one class and late classes it was 700 as a support of the SSA in their academic program for students [sic].” In addition, the institution indicates that “[a]ll cash promotion were meant to get student to join [sic],” and notes that discounts for self-paying students were to ensure that SACM students and self-paying students were paying the same tuition for this course. Finally, “[t]he 50% promotion was an OLD promotion, before the ACCET workshop, Going forward FUG is not planning to have such promotion to make sure its compliant with ACCET Document 30 ... [sic].” However, the institution did not provide any rationale to demonstrate that its continued use of varying discounts resulted in tuition charges being fairly and consistently applied or that any action had been taken to address the inconsistencies in tuition charges raised in the team report.

Regarding the team report’s findings that the institution did not maintain student ledgers or equivalent documentation to evidence the receipt, application or charges to the student, or the total amount paid or outstanding, the institution indicated that “[m]ost of FUG transaction are based on financial guarantees from SACM/CIBE and FUG don’t submit the payment unless the student complete the coursework [sic].”

However, the institution did not address the team report's concerns regarding the absence of any payment documentation for a large number of students, of verifiable tuition receipts, and of schedules for installment payments.

Regarding the team reports finding's on non-compliance with ACCET cancellation and refund policy, the institution indicated that "[r]efund policy was clearly added to the Enrolment agreement for new student, student can now sign and view refund policy for both cases cash student and Financial Guarantee [sic]." However, no documentation to evidence this was submitted in its response and the enrollment agreements submitted in response to the weakness cited under Standard VII:B – Admissions/Enrollment, as further discussed under that standard, do not state all costs in clear and explicit language and do not include a cancellation and refund policy consistent with the requirements of ACCET Document 31.ESOL – Cancellation and Refund Policy. In addition, the institution did not respond to the team report's findings that its cancellation and refund policy did not provide for automatic, administrative withdrawal, did not articulate a refund policy for self-paying students, and did not complete refund calculations for all students, including those for whom no refund is due.

Therefore, the institution failed to demonstrate compliance with this standard.

8. Standard IV-A: Educational Goals and Objectives

The institution failed to demonstrate that its programs and courses have appropriate educational goals and objectives, that curriculum content and learning experiences are preplanned and present a sound, systematic, and sequential educational methodology, or that sufficient and appropriate knowledge and skill elements are included to meet the specific and measurable performance outcomes expected for the courses and programs.

The team report indicated that the institution's "GRE Program" focused almost exclusively on the math component of the GRE and was, therefore, misleadingly promoted under that program name. In addition, the team report indicated that the ESOL program did not have a curriculum but was based exclusively on the use of lesson plans, unit quizzes, identified student learning outcomes, and sequencing in the Cambridge University Press Touchstone and Viewpoint series. The institution had not developed syllabi, a curriculum that identified definitive lengths per level of study, or policies and procedures establishing performance measurements with accompanying grade weighting guidelines. As further noted in Standard VIII:C – Student Progress, the institution had not devised a satisfactory academic progress policy and procedure to govern how progress was measured in this program.

In its response, the institution indicated that "GRE Program has been changed to GRE Math, and all future advertisement [sic] will clearly mention this." In support, the institution provided a letter from ACCET approving the name change. However,

the institution did not demonstrate that this had been clearly communicated to current students, that it had modified its promotional materials, or that the change in name had resulted in revised, published objectives (which, during the on-site visit, misleadingly referred to “critical thinking, analytical writing, verbal reasoning, and quantitative reasoning skills” as well as “math test-taking strategies ... to help [students] reach the desired score to be admitted into the graduate program of their choice.” In its response to the team report’s finding that the ESOL program lacked a curriculum, the institution submitted curricula for the six levels of its ESOL program. The curricula contained “course description/objectives” copied from the Touchstone series “CEFR Guide,” as well as general descriptions of school policies applicable to student behavior and progress (including its attendance policy, late/make-up work, extra credit, academic honesty, provisions for students with special needs, withdrawal deadlines, guidance for international students, the institution’s satisfactory academic progress policy, academic probation, reapplication, and student surveys). In addition, the curricula contained a revised grading scale and course schedule. In all cases, the course schedules indicated utilization of curricula beginning August 5, 2019. Therefore, the institution did not demonstrate the systematic implementation of curriculum content and learning experiences that are preplanned and present a sound, systematic, and sequential methodology, or that sufficient and appropriate knowledge and skill elements are included to meet specific and measurable performance outcomes. Further, the institution’s curricula are, as yet, incomplete. For example, the course description/objectives for Level 1 include:

Speaking:

- *Use simple phrases and sentences to describe where he/she lives and people he/she knows.*
- *Interact in a simple way, provided the other person is prepared to repeat or rephrase things at a lower rate of speech and help him/her formulate what he/she is trying to say.*
- *Ask and answer simple questions in areas of immediate need or on very familiar topics.*

The course description/objectives for Level 6 includes identical language (“[u]se simple phrases and sentences to describe where he/she lives and people he/she knows,” etc.). Despite being based on different texts (Cambridge Touchstone Second Edition 1, and Cambridge Viewpoint Second Edition 2), and being applicable to the institution’s widest divergence in its students’ linguistic ability (beginner and advanced), this is also true of general objectives for writing, reading, and listening. Correspondingly, the institution did not demonstrate that its programs and courses have appropriate educational goals and objectives or that pre-planned curriculum content contains sufficient knowledge and skill elements to meet specific and measurable performance outcomes for its programs and courses.

Therefore, the institution failed to demonstrate compliance with this standard.

9. Standard IV-B: Program/Instructional Materials

The institution failed to demonstrate that it had implemented a copyright policy to protect against copyright and software license infringements.

The team report indicated that, while the institution has a copyright policy, all students in the ESOL class observed were using photocopies of full units from the commercially-produced textbook.

In its response, the institution indicated that, “[i]n general FUG provide a book for every student, but since that class was a free session, students were provide a copy of the book [sic]” and “FUG will be using the text book as a shared between students and the books will be used in class only for this type of classes [sic], otherwise every student will have his own copy of the book.” The institution provided no rationale to justify the continued reproduction of copyrighted materials for free classes or to demonstrate any provision in U.S. copyright law that would permit such a practice.

Therefore, the institution failed to demonstrate compliance with this standard.

10. Standard IV-D: Curriculum Review/Revision

The institution failed to demonstrate that it had implemented effective written policies to continuously monitor and improve its curricula, or that its policies include both soliciting and utilizing feedback from all relevant constituencies (including students and sponsors, as well as instructors).

The team report indicated that, while curriculum revision was observed to be “an ongoing informal process that vaguely follows the [institution’s] procedures,” there was no formal, scheduled, or systematic cycle of curriculum review and revision.

In its response, the institution indicated that, to date, “[t]here were many meetings to go over curriculum revision ... but there wasn’t a set date for annual curriculum revision,” and that, following the on-site visit, the institution had decided to hold an annual curriculum review/revision process at the end of each year and to include this meeting in its written policy and procedure. However, the institution did not demonstrate the systematic and effective implementation of its revised policy for formal curricula review and revision and did not indicate that its policy would include, as required by the standard, the solicitation and utilization of feedback from all relevant constituencies, including feedback from students and sponsors, as well as instructors.

Therefore, the institution failed to demonstrate compliance with this standard

11. Standard VI-A: Qualifications of Instructional Personnel

The institution failed to demonstrate that instructional personnel possess the appropriate combination of relevant educational training and experience which qualifies them for their educational assignments.

The team report indicated that, while all instructors met or exceeded the the minimum requirements of the ACCET standard for qualifications of instructors teaching in intensive English programs, three instructors did not meet the institution's policy of requiring three years of applicable teaching experience at the time of hire. In addition, the team report indicated that, for eight of nine instructors, there were no transcripts or copies of qualifications on file for verification.

In its response, the institution indicated that instructors "with no experience were mostly working on tutoring and they were all Master holders [sic]." In addition, the institution indicated that it had changed its hiring requirements to require a master's degree in lieu of any instructional experience. Specifically, the institution's Hiring Process policy states that, "[f]or ESOL program a work experience is a key in the hiring process for FUG, preferably for teachers who were able to either teach non-English speakers in US or outside US [sic]. A Master degree [sic] will substitute any experience needed." However, the institution's revised policy does not meet ACCET's Specific Field Criteria for English for Speakers of Other Languages, which specifically requires three months of full-time ESOL or foreign language classroom teaching experience or a bachelor's degree, along with a certificate in teaching ESL or a foreign language that includes a practice teaching component, as well as demonstrable near-native proficiency in English.

Therefore, the institution failed to demonstrate compliance with this standard

12. Standard VI-C: Instructor Orientation and Training

The institution failed to demonstrate that regular and relevant in-service training is conducted and documented to ensure and validate the effective training of instructional personnel to provide for a consistent, high level of instruction at the institution.

The team report indicated that, while interviews with faculty evidenced some degree of the institution's provision of relevant training activities, no documentation was available to evidence the claimed provision of in-house training, external workshops, peer-to-peer observations, or the completion of online webinars. In addition, the institution had not developed a policy to clearly state professional development or expectations for its instructors.

In its response, the institution indicated that it has always “encouraged” professional development activities for its instructors and that, “now after the visit” it had added the mandatory completion of “at least four hours of professional development per year,” based on workshop, conference, webinar, in-house training, or training based on “taking classes,” and that it would provided \$100 towards any relevant fees to all instructors who had taught at the institution for at least one year. However, the institution failed to demonstrate that its revised training policy had been systematically and effectively implemented over time.

Therefore, the institution failed to demonstrate compliance with this standard.

13. Standard VII-B: Admissions/Enrollment

The institution failed to demonstrate that written policies for admissions and enrollment are clearly stated, defined, and in compliance with statutory, regulatory, and accreditation requirements, as its enrollment agreement does not state all costs in clear and explicit language and does not include a cancellation and refund policy that complies with ACCET Document 31.ESOL – Cancellation and Refund Policy.

The team report indicated that the institution’s enrollment agreements failed to clearly outline the terms and conditions for cancellations, drops, or withdrawals in a refund policy that is compliant with ACCET Document 31.ESOL.

In its response, the institution indicated that it had revised its enrollment agreement to differentiate between self-paying students and scholarship recipients. However, the sample updated enrollment agreements submitted in its response do not: (a) clearly itemize and define costs for each applicable program of study with any non-refundable items explicitly indicated; (b) describe how or when all program costs are charged to students paying in installments; and (c) include a cancellation and refund policy that contains provisions for cancellations due to rejection of an applicant by the institution, program cancellation, cancellation by a student during any established cancellation period, and no shows where students never start training.

Therefore, the institution failed to demonstrate compliance with this standard.

14. Standard VIII-A: Performance Measurements

The institution failed to demonstrate that adequate performance measurements are written, periodically evaluated, and updated to ensure instructional effectiveness in its program offerings. The institution also failed to demonstrate that it had developed a sound, written assessment system that contains a set of defined elements, such as grading scale, weighting factors, tests, quizzes, reports, projects, attendance, and participation, that are appropriately related to the performance objectives of the programs or courses, and that these are clearly and effectively communicated to students.

The team report indicated that, for the institution's test preparation programs, the two performance measurements used for a pass/fail grading, attendance and in-class practice exercises, were not systematically or reliably tracked and documented or consistently assessed. For the ESOL program, students are graded solely on the basis of textbook-generated quizzes, that performance measurements lacked guidelines for the assessment of all language competencies, and that there was no indication on how grade components were weighted. For example, one grading guideline indicated that "[s]tudents need to average a pass in both the writing and oral quizzes in order to pass" but did not indicate the expectations of an "average pass" benchmark. Further, while the institution's ASER indicated that a passing grade of 70% was required, no member of staff or faculty was able to articulate this on site.

In its response, the institution indicated that "[t]esting course are intended to help student and provide them with the maximum benefit of the classes, FUG has implemented a new policy to provide students with midterms exams, but again all of the exams are keep up with student performance during the class, and since training courses are just a Pass and Fail grade, students can only pass if they stopped showing up to class, even when a student ..." The institution's narrative explanation ceases here, and it is entirely unclear how this response was intended to address the team report's concerns. The institution also provides a new grading scale and weighting factors, including attendance/participation, homework, tests, quizzes, and comprehensive final exam, for its ESOL program, but did not demonstrate that this had been appropriately communicated or implemented.

Therefore, the institution failed to demonstrate compliance with this standard

15. Standard VIII-B: Attendance

The institution failed to demonstrate that it has established and implemented written policies and procedures for monitoring and documenting attendance, which ensure that student attendance and participation are consistent with the expected performance outcomes of the course and the ACCET standard, and that it publishes a clear description of its attendance requirements and informs students of their attendance on a regular and timely basis.

The team report indicated that the institution's policy failed to comply with ACCET Document 35 – Policy on Attendance Requirements in the following areas: (a) the policy did not indicate minimum standards for completion; (b) attendance records are not readily available for third party inspection and validation; (c) the consequence of tardiness and early departures is not clearly defined; (d) excused absences are not described and students are not advised that excused absences will count as absences in the calculation of attendance rates and will not increase the maximum number of allowable absences; (e) the institution does not clearly indicate that make-up classes must be comparable to the content, time, and delivery of classes missed; and (f) the institution's policy and procedures do not stipulate

how students will be informed, on a regular and timely basis, of their progress in meeting the standards of attendance. The team report further noted that neither students nor faculty could articulate a consistently understood attendance policy, with various interpretations of minimum attendance policy and the effective of tardiness or early departure expressed. In addition, faculty could not specify where the institution's attendance policy was published or available for reference. The team report also indicated the lax implementation of attendance policy during the visit and cited the substantially late arrival of three students on the first day of class who were reported as having full attendance for the day.

In its response, the institution indicated that, "[t]he nature of the ESOL free class sometimes don't allow the institution to enforce attendance, while in Semester long classes it will be much more enforce especially with immigration rules that need to be followed [sic]." The institution further indicated that it "made it clear to all instructors" that attendance records need to be accurate, and that "attendance accuracy" had been added to attendance policy in both the Instructor Manual and Student Manual. An Instructor Manual was not provided with the institution's response, but the attendance policy in the Student Manual which was submitted stated the institution's attendance policy as follows: "Students who are absent 10% of the classes will be given warnings and more than 20% of the classes will be asked to withdraw the subject unless absences were approved by the class instructor and FUG management. Arriving late interferes with other students' learning and is not acceptable." This differs substantially from the attendance policy included in the syllabi provided with the institution's response to the weakness cited under Standard IV:A – Educational Goals and Objectives, which stated the following: "[s]tudents have a total of 3 sick days or excused absences during the span of the semester or 12 weeks. If students do not show up to class more than 3 times during the semester, they will be withdrawn from the course automatically in order to not to limit their potential for learning." A third variation of the institution's attendance policy is stated in the revised enrollment agreements, submitted in response to the weakness cited under Standard VII: B – Admissions/Enrollment: "[s]tudents who skip more than 2 classes will be subject to termination." In addition to the continuing inconsistencies in its written attendance policy, the institution provided no evidence of the systematic and effective implementation of a compliant attendance policy. The institution did not address the team report's concerns regarding the relationship between attendance and completion, the availability of attendance records for third party review, the effect of excused absences on attendance, the content, time, and delivery of make-up classes, or the regularity and timeliness of notifications to students on their attendance.

Therefore, the institution failed to demonstrate compliance with this standard

16. Standard VIII-C: Student Progress

The institution failed to demonstrate that: it effectively monitors, assesses, and records the progress of students utilizing a sound and clearly defined assessment system; student progress is documented consistently in accordance with institutionally-established performance outcomes and communicated to all students; students are informed of progress on a regular and timely basis; and that the institution has published a clear description of its requirements for satisfactory academic progress and utilizes sound written policies and procedures to determine student compliance with these requirements and documents the results.

The team report indicated that the institution's satisfactory academic progress policy, the "FUG Assessment, Recording, and Reporting Policy," lacked the detail required to ensure compliance with this standard. The ESOL program did not have defined clock hours for level completion, and the institution's policy did not indicate how many times a student can repeat each level, if or when academic probation would be implemented, or if and when individualized learning plans are developed for failing students. The institution's satisfactory progress policy also did not provide any guidance on how often a student is allowed to repeat a test preparation course, whether or not individualized learning plans are implemented for failing students, or whether a cumulative interim assessment of progress is undertaken and communicated at the mid-point of the course.

In its response, the institution indicated that it had "decided to have written exams/tests added to the GRE/IELTS courses," and submitted a sample GRE mid-term exam from February 2019. However, the institution indicated that only "going forward" will such tests be "recorded as part of the student progress." For the ESOL program, the institution indicated that "progress is already measured by the unit quizzes and the tests given after [Units 6 and 12] but did not demonstrate that scores are actually tracked, communicated to students, and used to take corrective action for students who are not making satisfactory progress. The institution did not address the team report's concerns regarding course or program repetition, academic probation, or the lack of individualized learning plans.

Therefore, the institution failed to demonstrate compliance with this standard.

17. Standard IX-A: Student Satisfaction

The institution failed to demonstrate that it implements written policies and procedures that provide an effective means to regularly assess, document, and validate student satisfaction relative to the quality of education, training, and student services provided, that interim evaluations are conducted at the institution, or that student feedback is utilized to improve the education, training, and student services provided.

The team report indicated that, while the institution has an end of course survey, the institution does not evaluate student satisfaction at the mid-point of its programs or at any time during student training. The team report also indicated that the end of course survey does not solicit any evaluation of student services beyond academic training, that student feedback is not systematically and effectively shared with faculty, and that the surveys are not systematically and effectively implemented. For example, of four surveys reviewed, all were incomplete and did not clearly identify the course or program being evaluated, summaries of the data collected had been prepared for only two of the programs, and one (for the September 2018 GRE course) had more completed surveys than students enrolled in the class.

In its response, the institution indicated that “FUG solicit/survey student midpoint but only verbally due to the short courses nature, as FUG management don’t see it as a valid to get it documented for 5/6 week course [sic].” Correspondingly, the institution still does not evaluate student satisfaction at the mid-point of its programs or at any time during student training. The response further indicated that the institution’s management saw no value in analyzing “the GRE classes ... when students give [a] 5 to everything and have no comments,” but that it will analyze all surveys “going forward.” The institution did not address the team report’s concerns that the end of course survey does not solicit any evaluation of student services other than academic training, that student feedback is not systematically and effectively shared with faculty, or that surveys are not systematically and effectively implemented.

Therefore, the institution failed to demonstrate compliance with this standard

18. Standard IX-D: Completion and Job Placement

The institution failed to demonstrate that written policies and procedures are followed to regularly assess, document, and validate the quality of the education and training services provided relative to completion rates.

The team report indicated that the institution did not have a written policy or procedure that defines how completion rates are calculated or the criteria used to define a completer and could not provide reliable completion data as completion rates had not been tracked.

In its response, the institution indicated that, for the ESOL program, it defines completers as “those who passes the level [sic]” but had not tracked rates since a complete ESOL program had not yet been offered. For the GRE program, “[a]s long as the student complete all the tests and exams along with the attendance, he/she consider completed the course [sic].” In addition, the institution indicated that it will “record all exams scores and provide studetns with their final score but regardless of the grades that will not affect their completion of the course.” Correspondingly, the institution did not demonstrate that it developed and implemented a policy to calculate and track completion rates that includes both grades and attendance and to consistently assess those rates as required by ACCET Document 28 – Completion and Job Placement Policy.

Therefore, the institution failed to demonstrate compliance with this standard

Since denial of initial accreditation is an adverse action by the Accrediting Commission, the institution may appeal the decision. The full procedures and guidelines for appealing the decision are outlined in Document 11, Policies and Practices of the Accrediting Commission, which is available on our website at www.accet.org.

If the institution wishes to appeal the decision, the Commission must receive written notification no later than fifteen (15) calendar days from receipt of this letter, in addition to a certified or cashier’s check in the amount of \$8,500.00, payable to ACCET, for an appeals hearing.

In the case of an appeal, a written statement, plus six (6) additional copies regarding the grounds for the appeal, saved as **PDF documents and copied to individual flash drives**, must be submitted to the ACCET office within sixty (60) calendar days from receipt of this letter. The appeal process allows for the institution to provide clarification of and/or new information regarding the conditions at the institution at the time the Accrediting Commission made its decision to deny or withdraw accreditation. The appeal process does not allow for consideration of changes that have been made by or at the institution or new information created or obtained after the Commission’s action to deny or withdraw accreditation, except under such circumstances when the Commission’s adverse action included a finding of non-compliance with Standard III-A, Financial Stability, whereupon the Appeals Panel may consider, on a one-time basis only, such financial information provided all of the following conditions are met:

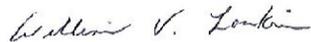
- The only remaining deficiency cited by the Commission in support of a final adverse action decision is the institution’s failure to meet ACCET Standard III-A, Financial Stability, with the institution’s non-compliance with Standard III-A the sole deficiency warranting a final adverse action.
- The financial information was unavailable to the institution until after the Commission’s decision was made and is included in the written statement of the grounds for appeal submitted in accordance with the ACCET appeals process; and

- The financial information provided is significant and bears materially on the specified financial deficiencies identified by the Commission.

The Appeals Panel shall apply such criteria of significance and materiality as established by the Commission. Further, any determination made by the Appeals Panel relative to this new financial information shall not constitute a basis for further appeal.

Initial applicants are advised that, in the instance of an appeal following a denial of accreditation being initialized in accordance with ACCET policy, the institution may not make substantive changes to its operations, such as additional programs or sites, until a notice of final action is forwarded by the Commission.

Sincerely,



William V. Larkin, Ed.D.
Executive Director

WVL/jbd

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