



July 10, 2017

Dr. Cheryl Davenport Dozier
President
Savannah State University
3219 College Street
Savannah, GA 31404-5310

Dear Dr. Dozier:

The Committee on Fifth-Year Interim Reports reviewed the institution's compliance with the 17 select standards of the *Principles of Accreditation* outlined in the Commission's Fifth-Year Interim Report. Based only on those reviewed standards, the institution is requested to submit a Referral Report due April 3, 2018, addressing the following referenced standards of the *Principles*:

CS 3.10.2 (Financial aid audits)

This standard expects an institution to audit financial aid programs as required by federal and state regulations.

The institution has not identified audit requirements for its financial aid programs nor has it presented evidence that these requirements have been met. The institution should describe audit responsibilities for its financial aid programs and provide evidence that it has met these responsibilities.

CS 3.11.3 (Physical facilities)

This standard expects an institution to operate and maintain physical facilities, both on and off campus, that appropriately serve the needs of the institution's educational programs, support services, and other mission-related activities.

The institution provided evidence that it operates physical facilities both on and off campus. However, the institution did not provide evidence that its facilities appropriately serve the needs of its constituents, faculty, staff, and students. The institution did not address the condition of its facilities and its related deferred maintenance. The institution should provide evidence that it adequately maintains its facilities, and appropriately serves the needs of its educational programs.

CS 3.13.1 (Policy compliance - "Accrediting Decisions of Other Agencies")

This standard expects an institution to comply with the policies of the Commission on Colleges.

The institution provided a list of eight accreditors including its current status with those accreditors. The institution also provided letters from its accreditors. However, the institution did not provide documentation showing that it identifies itself in identical terms to all accrediting bodies.

FR 4.5 (Student complaints)

This standard expects an institution to have adequate procedures for addressing written student complaints and to be responsible for demonstrating that it follows those procedures when resolving student complaints.



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The institution did not provide an example demonstrating that it follows its procedures when resolving student complaints. In its report, the institution should provide a redacted example of a student complaint demonstrating adherence to its student complaint policy and procedure. If a complaint has not been received, in lieu of providing an example, the institution should indicate no complaints have been filed.

FR 4.7 (Title IV program responsibilities)

This standard expects an institution to be in compliance with its program responsibilities under Title IV of the most recent Higher Education Act as amended.

The U.S. Department of Education initiated a program review upon receipt of this report and the Final Program Review Determination was issued on September 23, 2016. Five findings were presented in this report with one reported as closed and the other four requiring further action. A significant liability resulting from these findings is established and accepted by the institution. The institution should provide evidence that its obligations resulting from this review and the repayment agreement have been satisfactorily met. The institution should provide external audits of its federal financial aid programs indicating compliance with Title IV program responsibilities and, in particular, resolution of findings identified in the program review report.

FR 4.9 (Definition of credit hours)

This standard expects an institution to have policies and procedures for determining the credit hours awarded for courses and programs and that conform to commonly accepted practices in higher education and to Commission policy.

The institution provided its definition of a credit hour; however, no official documentation was provided of the institution's policy to support the definition and to describe the process for determining credit hours awarded. Documentation included links to the IPEDS' definition, State policy, Federal definition, and SACSCOC policy but not to the institution's own policy.

Evaluation of the QEP Impact Report

The Committee also reviewed the institution's QEP Impact Report. The report was accepted with the following comments:

The institution has adequately described the initial goals and intended outcomes of its QEP, discussed the limited changes made in the QEP, discussed the impact on student learning and/or the environment supporting student learning, and described what the institution has learned as a result of the QEP experience.

Guidelines for the Referral Report are enclosed. Because it is essential that institutions follow these guidelines, please make certain that those responsible for preparing the report receive the document. Please send five copies to the Commission staff member assigned to your institution.

Reports requested by the Committee on Fifth-Year Interim Reports will be forwarded to the Committees on Compliance and Reports (C & R), standing committees of SACSCOC Board of Trustees, for action at the meeting immediately following the due date of the Referral Report. The



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review by C & R will begin a two-year monitoring period within which your institution must document compliance with all the identified standards above.

We appreciate your continued support of SACSCOC's activities. If you have questions, please contact the SACSCOC staff member assigned to your institution.

Sincerely,

A handwritten signature in cursive script that reads "Belle S. Wheelan".

Belle S. Wheelan, Ph.D.
President

BSW:cp

Enclosures