

Commission on Colleges Southern Association of Colleges and Schools

INSTITUTIONAL SUMMARY FORM PREPARED FOR COMMISSION REVIEWS

GENERAL INFORMATION

Name of Institution Florida Agricultural and Mechanical University

Name, Title, Phone number, and email address of Accreditation Liaison

Shawnta S. Friday-Stroud, Ph.D.

Accredition Liaison & Reaffirmation Chair

Professor of Management

Florida A&M University

500 Gamble Street

Tallahassee, FL 32307

850-599-8316 - office

shawnta.fridaystroud@famu.edu

Name, Title, Phone number, and email address of Technical Support person for the Compliance Certification

Ayinde Johnson

FAMU-SACS, Coordinator, Computer Support Services

Florida A&M University

500 Gamble Street

Tallahassee, FL 32307

850-599-8317 - office

ayinde.johnson@famu.edu

Submission date of this completed document: October 1, 2008

EDUCATIONAL PROGRAMS

2.

1.	Level of offerings (Check all that apply)			
		ficate program(s) requiring less than one year beyond Grade 12 ficate program(s) of at least two but fewer than four years of work beyon	nd	
	Associate degre	e program(s) requiring a minimum of 60 semester hours or the equivalensfer to a baccalaureate institution	ent	
		e program(s) requiring a minimum of 60 semester hours or the equivale	ent	
		r baccalaureate degree program(s) requiring a minimum of 120 semest	er	
	 ☑ Professional de ☑ Master's degree 	gree program(s)		
		e master's level but not at the doctoral level (such as Specialist in		
	☑ Doctoral degree☐ Other (Specify)			
2.	Types of Undergraduate Programs (Check all that apply)			
		rtificate or diploma program(s) gree program(s)		
		ims designed for transfer to a baccalaureate institution		
	☐ Teacher Prepar☐ Professional			
	Other (Specify)			

GOVERNANCE CONTROL

direction.

Check	the appr	opriate governance control for the institution:
	Private	(check one)
		Independent, not-for-profit
		Name of corporation OR Name of religious affiliation and control:
		Independent, for-profit *
		Name of corporation:
\boxtimes	Public '	(check one)
		Not part of a state system, institution has own independent board
		Part of a state system, system board serves as governing board
	\boxtimes	Part of a state system, system board is super governing board, local governing board has delegated authority
		Part of a state system, institution has own independent board
opera	tion must	n is part of a state system or a corporate structure, a description of the system be submitted as part of the Compliance Certification for the decennial review. See licy "Reaffirmation of Accreditation and Subsequent Reports" for additional

INSTITUTIONAL INFORMATION FOR REVIEWERS

Directions: Please address the following and attach the information to this form.

1. History and Characteristics

Provide a <u>brief</u> history of the institution, a description of its current mission, an indication of its geographic service area, and a description of the composition of the student population. Include a description of any unusual or distinctive features of the institution and a description of the admissions policies (open, selective, etc.). If appropriate, indicate those institutions that are considered peers. Please limit this section to one-half page.

2. List of Degrees

List all degrees currently offered (A. S., B.A., B.S., M.A., Ph.D., for examples) and the majors or concentrations within those degrees, as well as all certificates and diplomas.

3. Locations and Distance Education

List locations (country, state, and city) where course work toward a degree, diploma, or certificate can be obtained primarily through traditional classroom instruction. For each site, indicate the partial or complete degree offered and, for each degree, certificate, or diploma, whether a student can obtain 50 percent of credits toward any of the educational programs.

Provide a brief description of distance education credit offerings that can be obtained primarily through electronic means and indicate where the students are located. Indicate any degree or certificate programs that can be completed primarily through electronic means. Please limit this brief description to one-half page, if possible.

4. Accreditation

List all agencies that currently accredit the institution or any of its programs and the date of the last review for each. Identify the accrediting agency that is the gatekeeper for federal funds if it is not the Commission on Colleges. Describe any sanctions applied or negative actions taken by any of these accrediting bodies (including the Commission) during the two years previous to the submission of this report in regard to your institution.

5. Relationship to the U.S. Department of Education

Indicate any limitations, suspensions, or termination by the U.S. Department of Education in regard to student financial aid or other financial aid programs during the previous three years. Report if on reimbursement or any other exceptional status in regard to federal or state financial aid.

Updated: February 2008