The BOARD OF EXAMINERS UPDATE is designed to share the actions of the Unit Accreditation Board and refinements of NCATE’s review process. It is disseminated at the start of onsite visits in the fall and spring. Issues and changes reported here should be reviewed by team members during their first team meeting.
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Dear BOE Colleagues,

As we develop our practices and change our procedures to become CAEP and as we attempt to meet the call for greater transparency and efficiencies in the accreditation process, the relationship between the offsite and onsite BOE reports continues to be a challenging issue. NCATE staff has issued a number of BOE Updates, special reports, informational items to BOE members, and emails from questioning BOE chairs about this topic. Thus, staff decided to put all the issues on the table and attempt to clarify, once and for all, what the offsite report and the onsite report have to do with each other ... before it comes to a parting of the ways!

First... the offsite report, as you know, has been well received by institutions. Instead of racing around during the onsite visit to provide the constant stream of documents requested by a BOE team, the offsite report provides the unit with a heads-up on your insights and feedback. It is also an opportunity to provide a thoughtful response to the unit, including missed, new, or revised exhibits before the onsite visit. So, what should the offsite report contain?

- A narrative analyzing what the BOE team agrees they see in the IR and the exhibits about meeting each standard. This is NOT presented element by element. It is written holistically but is organized in a way that unit heads, faculty and/or coordinators (reading the standards) could follow along and get a clear sense of what the BOE team was looking for and found.
- A statement about progress toward meeting the target level for the selected standard for moving to target. This is the team’s critique of the unit’s claims on movement toward target.
- A statement about any remaining area(s) for improvement (AFIs) from the prior visit. The team should clearly state if it feels that an AFI is resolved or continued based on the IR and exhibits.
- A statement about any area(s) of concern (AOCs) in each standard that might, if not resolved in the IR addendum and during the onsite visit, lead to area(s) for improvement (AFIs) in the final report. This statement should contain a statement about the concern and a rationale for the concern that is based on the IR and exhibits (or lack thereof). For example, It is unclear how all advanced programs are included in the unit assessment system. Rationale: The IR and exhibits clearly focus on initial programs. There are limited references to and exhibits for the knowledge, skills, and dispositions of advanced candidates or other school professional. The assessment system chart in Exhibit 2.3.X contains initial programs only. There is no corresponding chart for advanced programs.
- A statement requesting evidence for the onsite team to validate. This is a list that is related to and can be easily mapped onto the statement about the evidence at the beginning of each standard (which is reflected in the remaining AFIs and AOC as necessary). Each item should be framed in the form of question(s) to address. For example, How are dispositions assessed for candidates in secondary programs? Sample assessments and data on dispositions for candidates in all secondary education programs (STEM, English, Social Studies) should be provided. Interviews with secondary education candidates should be scheduled. This list of questions along with the requested evidence or interviews provides a clear roadmap to the unit for what
might be included in the IR addendum, added to the exhibits, or included in the onsite visit schedule.

Now, on to the onsite report. Does it just include the information from the offsite report? Does it appear as a holistic summary of everything? How does it reference the offsite report? These are the kinds of questions that we get nearly every day... so we have obviously not been as clear as we thought we had about what a BOE team should do.

The audience for the onsite report is more than the “heads-up” to the unit about its progress toward meeting the standard or moving toward target. The onsite report needs to be a clear report to the unit and, as importantly, a clear document by which the UAB can make an accreditation decision.

Thus, the onsite report should accomplish a number of things:

1) Summarize, briefly, the team’s findings that have not changed since the offsite report. A few paragraphs could provide the unit and the UAB with a clear picture of how the unit is meeting the standard without repeating everything that was in the offsite report.

2) Identify what the team found onsite that was different from what was in the IR and exhibits. While this will not be common, the team is obligated to revise its findings if conditions on campus are significantly different from what was stated in the documents. A new AFI, if warranted, may be added.

3) Be clear that the BOE team was actually on the campus and what the team was able to validate while there and how. For example, *interviews with faculty confirmed that the unit assesses candidates’ impact on student learning in all program through use of the ed TPA as well as observational protocols completed by cooperating teacher and clinical supervisors during the culminating clinical practice. Approximately 90 percent of initial candidates are rated as meeting or exceeding the standard for content knowledge as confirmed in onsite candidate interviews and the review of student work samples and evaluations onsite.*

4) If an area of concern was raised in the offsite report, the AOC and validation of the related evidence, MUST be addressed in the onsite report. They should be addressed explicitly. For example, if we use our example from the AOC of the offsite report above, the onsite report might state that: *The offsite report raised an area of concern about how all advanced programs are included in the unit assessment system. The unit provided an explanation and additional exhibits for the knowledge, skills, and dispositions of advanced candidates or other school professional in the IR addendum. The new exhibit 2.3.XY provided an assessment system chart with data for advanced programs. Onsite interviews with program coordinators of advanced programs confirmed that the advanced programs are an integral part of the assessment system and that data is routinely reviewed and used for program improvements.* Remaining AFIs are handled in the same way.

5) Other evidence to be validated that was listed in the offsite report should also be referenced. For example, *As requested in the offsite report, the unit’s IR addendum described how dispositions are assessed for candidates in secondary programs. Sample assessments and data on dispositions for candidates in all secondary education programs (STEM, English, Social Studies) were provided onsite indicating that 92.5 percent of all secondary education candidates demonstrate the unit’s disposition of caring for all students’ learning. The dispositions of nurturing the technology skills of all students through modeling and coaching was demonstrated*
by only 65 percent of all secondary candidates and the program coordinators indicated that they are conducting focus groups to determine how they might further develop call candidates’ dispositions in this area. In addition, interviews with secondary education candidates confirmed that they were familiar with the assessments of their dispositions and often discussed the results of those assessments with clinical supervisors and faculty members.

The point of explicitly referencing the offsite report allows the unit and the UAB to clearly see how areas of concern and evidence to be validated were addressed by the team. In the absence of clear references, the unit does not get closure on its progress. Or the UAB is left to guess that something was resolved, hunt for it among all the documents it reviews (the report should be clear enough so UAB would not have to retrace the team’s work), or cite a new AFI since it did not seem to be resolved by the team onsite.

In summary, the offsite and onsite reports are intended to complement each other. The first is formative for the institution to supply additional information in the IR addendum or onsite. The onsite report wraps it all up in a neat package by referencing the offsite, resolving the concerns raised, and giving the unit and the UAB a clear picture of where the unit stands in relation to meeting the standards and making progress toward target level performance.

Best regards and thanks again for all you do for the accreditation process and the profession,

Deb Eldridge, Senior Vice President

UAB UPDATE

New and Revised Policies

Patty Garvin, Director of Accreditation, CI and TI Pathways

The Unit Accreditation Board made a few policy revisions at its October 2012 meeting that will affect your BOE work.

Policy on Offsite Reviews for Units with Visits Within Two Years provides for an offsite review for education units that were granted accreditation for a shorter period than allowed by their states.

Policy on Data Aggregation / Disaggregation redefines how data should be disaggregated in light new technology that allows for multiple forms of course delivery.

Policy on Required Evidence for all Units/Educator Preparation supplements the list of evidence required.
Please see the full policy statements in the Summary of Board Actions for the fall 2012 Unit Accreditation Board Meeting (October 2012) which posted on the NCATE website - http://www.ncate.org/SummaryofBoardActions/tabid/522/Default.aspx. Also note the timelines for when these policies come into effect. Units wishing to use these policies earlier than required may do so.

**UAB Quality Control Instrument as BOE report feedback**

*Deb Eldridge, Senior Vice President, Accreditation and Administration*

A Committee on Quality Control in Accreditation Decisions was appointed by President James Cibulka in spring 2011 and was charged to raise the bar for accreditation by bringing greater rigor and consistency to the Unit Accreditation Board’s (UAB) work. Beginning in spring 2012, the committee continued its work on strengthening UAB’s review and decision granting process. The committee adopted the additional charge of strengthening the BOE’s review processes and reporting expectations. The goals of the committee’s work were to simultaneously improve the work of BOE and UAB and increase the accountability and transparency of accreditation.

Since the appointment of the committee, the quality control instrument was developed, piloted and revised over a period of four semesters. During its fall 2012 meeting, the UAB used the long-awaited quality control instrument to evaluate the BOE reports on all cases under consideration.

Members of the committee that worked on the instrument were:

- Randy Hitz, Chair of the BOE committee for the UAB and chair of the Quality Control committee
- Angela Sewall, then UAB chair
- Ava Evbouma, then UAB vice-chair, now current UAB chair
- Charlotte Harris, UAB member
- Pam Salazar, UAB member
- Jane Meyer, UAB member and chair of the Policy and Evaluation Committee
- Eileen Aviss-spelling, UAB member and chair of the Standards Committee
- Ann Nutter Coffman, NEA representative

The content of the Quality Control Instrument asks the UAB to provide the following information for each standard:

1. Was clear, convincing and sufficient evidence presented to support the recommendation made by the BOE team on this standard and its elements (at both initial and advanced levels)?
2. Did the UAB change the BOE recommendation for the standard? If so, why?
3. Were the ARIs (if any) clear and appropriately cited? Were any of the AFIs revised, removed or were AFIs added? If revised, how? If revised, removed, or added, why?
4. For continuous improvement, the standard selected for target is noted and the following questions are posed:
a. Was clear, convincing and sufficient evidence presented to support the recommendation that target was reached?
b. If not, what aspects were not adequately addressed?
c. Were all standards met?

5. For an overall evaluation, the following questions are posed:
   a. The UAB states whether or not the report was adequately written as a professional document. And if not, an explanation is given.
   b. The UAB notes if the BOE chair’s response to the rejoinder was submitted and taken into consideration. If not, an explanation is given.
   c. Lastly the UAB is asked what additional information in the BOE report would have facilitated the work of the UAB.

After a final period of refinements in scoring, the results from the UAB use of the Quality Control Instrument for the evaluation on each accreditation case under consideration will be shared with its respective BOE chair following the spring 2013 UAB meeting. BOE chairs are authorized to share the finding from the report with their teams as appropriate. NCATE/CAEP staff will be aggregating the data from all spring 2013 cases to provide a substantive consolidated report to the UAB about the overall quality and consistency of BOE reports.

Please contact Patty Garvin directly at patty@ncate.org if you have comments, concerns, or suggestions.

STANDARDS UPDATE

Guidelines for Determining the Status of Standard 4 (Diversity)

Patty Garvin, Director of Accreditation, CI and TI Pathways

The purpose of Standard 4 is to ensure that programs for educators are preparing candidates to effectively work with or support P–12 students from different racial, ethnic, socioeconomic, language, religious, gender, sexual orientation, and exceptionality groups. The standard is based on the premise that all students can learn, although the way they learn may differ because of their prior experiences and cultural background.

The first element of the standard focuses on the courses and experiences required of candidates to ensure they develop proficiencies to help students from these different groups learn. To assist teams in understanding how the unit prepares candidates to work with diverse students, the unit should be able to identify clearly articulated proficiencies related to diversity, have developed curriculum and experiences that teach to those proficiencies, have assessments that evaluate candidates based on those proficiencies, and have assessment data to prove that candidates have indeed learned the proficiencies. The evidence (i.e., proficiencies, assessments, and candidate performance results) should indicate that the element on design, implementation, and evaluation is being met at the acceptable level of the rubric. If some parts of the rubric level are not being adequately addressed, they should be
cited as areas for improvement. This element must be met at the acceptable level for the standard to be met.

The last three elements of the rubric focus on candidates experiences with adults (i.e., higher education and school faculty), peers, and with P–12 students from diverse populations as they prepare for their future work in schools. A description of the diversity of each of these three groups—faculty, candidates, and P–12 students—provides the context for understanding the opportunities for working with persons from diverse groups. Teams are expected to provide data on the racial, ethnic, and gender diversity that exists among unit faculty and candidates, as well as demographic information on the settings where field experiences take place. Institutions report the numbers and percentages in their IRs.

The numbers provide the context, but alone are not enough to determine the interactions in which candidates are engaged. The BOE team looks beyond demographics to discover if there are opportunities to interact with faculty, peers, and students from diverse groups. The BOE team should describe the nature of the experiences candidates have with faculty, other candidates, and P–12 students.

These experiences do not have to be limited to faculty and other candidates within the unit. A unit with limited diversity should provide opportunities for their candidates to work with faculty and candidates in other units or other institutions. If the unit is not providing candidates with these opportunities, an area for improvement citing a lack of opportunity rather than the limited diversity may be appropriate. Units may have plans for increasing diversity among their faculty and candidates, although these plans are not required. Units are expected to make “good faith efforts...to increase or maintain” faculty and candidate diversity. Good faith efforts should be described in the BOE report; however, an area for improvement is warranted if no results have been achieved.

The Unit Accreditation Board has said that the first element of the diversity standard is critical to meeting Standard 4. Institutions with limited faculty, candidate, and student diversity should have developed other mechanisms for ensuring that their candidates have these experiences and should be able to provide candidate performance data to make the case that they are prepared to work with students from diverse populations. If the unit is not providing candidates with experiences in any of the last three areas, meeting the standard would be difficult.

**REVIEW UPDATE**

**Data Expectations: What is Meant by Three Years of Data?**

*Patty Garvin, Director of Accreditation, CI and TI Pathways*

The NCATE standards require units to present one year of data at the time of the Institutional Report and two years of data onsite for first accreditation and three years of data for continuing accreditation. But what does that mean in terms of continuous improvement and meeting the standards?
Along with the IR, the unit submits one year of the most recent, complete data available at the time they prepared the IR. During the offsite review, the team not only checks to see that data has been provided, but makes a preliminary judgment on how well the unit is meeting standards based on the data. For example, what does the candidate assessment data say about knowledge, skills, and dispositions?

Onsite, the unit provides two or three years of the most recent complete data available at the time of the visit. When the team looks at data across three (or two) years, consider the unit’s assessment system and the need for continuous improvement. Are key assessments administer on the stated schedule--every semester, every year, every other year? Are the data from these assessments collected and analyzed as planned? Does the data support the unit’s claim of continuous improvement? If a unit is using data to improve programs and unit operations, assessments will change. If a unit revised an assessment within the last three years, it should show why the change was needed such as a validity study, and present data from the old assessment as well as the new assessment. Units may discontinue or add assessments when they find it necessary. Again, the unit should explain why the change was made. In these cases there may not be three years of data available to present. The same is true for new programs and programs that are closing. The BOE team should accept data available within the most recent three years, even if it is not available for each of those years for every assessment.

Teams should expect to see evidence that the unit has continued to use its assessment system between NCATE visits to improve programs and unit operations based on their data. In general, teams should not always expect to see one, two, or three years of data on all assessments, and should accept reasonable explanations for gaps. Units should not feel that they cannot make changes during the three years prior to the BOE visit, because "NCATE is coming."

New Templates and Procedures for Self-Study Reports

*Stephanie Kowal, Site Visit Coordinator*

For unit’s submitting their Institutional Reports (self-study reports) in summer 2013 or later (for spring 2014 onsite visits) teams will notice some changes to the style and method of submission. First, NCATE has released new templates for the self-study reports, which can be found on NCATE’s website ([http://www.ncate.org/Accreditation/ContinuousImprovementPathway/tabid/648/Default.aspx](http://www.ncate.org/Accreditation/ContinuousImprovementPathway/tabid/648/Default.aspx)). All self-study submissions from this point forward will be required to use these templates, which are available to units only as a template in AIMS. You will also notice that all exhibits will be attached to the template itself, and you will not need to navigate to outside exhibit rooms or websites to view a unit’s exhibits. In most PDF readers, such as Adobe, the exhibits can be accessed by locating the “attachments panel” most often indicated with a paperclip icon on the left side of the screen (see picture below). Clicking the paperclip icon will open a window that contains all of the exhibits for the unit’s self-study report.
Placement of Areas for Improvement

Patty Garvin, Director of Accreditation, CI and TI Pathways

Teams can sometimes struggle when deciding where to place an area for improvement when it impacts more than one standard. This is particularly true with standards 1 and 2 and standards 3 and 4. The concern should be in the narrative for all standards where it applies, but the AFI is only cited once. Guidelines for deciding the appropriate standard for the AFI are:

Standards 1 and 2: An area for improvement related to data, including assessment outcomes, is placed under Standard 1. An area for improvement concerning the process for collecting, sharing, analyzing, and using data is placed under Standard 2.

Standards 3 and 4: Both call for opportunities for candidates to work with P-12 students from diversity groups. In instances in which the BOE finds that candidates do not have opportunities, cite the area for improvement under Standard 4, in connection to the element on Experiences Working with Diverse Students. In Standard 3, the narrative should reflect the lack of opportunities, but the AFI should be cited under Standard 4.
BOE REPORT UPDATE

Editing and Submitting the BOE Report

Nate Thomas, Accreditation Associate

We have noticed that there have been some technical difficulties with importing staff-edited reports for editing by the chair and submitting the Second Draft of reports. To assist, provided below are directions on how to edit and submit the Second Draft report. The steps are similar for making factual corrections to the Second Draft and submitting the Final Report. Please remember to always SAVE your edits to the report prior to closing the screen in AIMS.

Click on this icon to copy the draft submitted by the team or staff editor.

Click on this icon to make comments to the team chair and team members.

To edit the BOE Report-Second Draft, the BOE chair should follow the instructions below:

1. Log onto AIMS and click on Visit Reports.

2. Copy the NCATE staff edited report by clicking on the two page icon next to BOE Report-Second Draft. You will get a message stating that you are importing the BOE Report-Second Draft from the specified editor. You will also see a warning message “This function will overwrite any text already written.” This is to warn you that if you import the NCATE staff edited report again later it will overwrite any edits you have already entered.

3. Click Go and the BOE Report-Staff edited becomes the BOE Report-Second Draft, and you will be back on the AIMS Visit Reports screen. As noted in the above, do NOT repeat this step after you have begun editing the second draft or the NCATE staff version will overwrite your edited version.

4. Click on BOE Report-Second Draft to open the report for editing.

5. Click on the Comments icon to the right of BOE Report-Staff-edited (NOT second draft) to open the NCATE staff comments (comments will not be imported to the second draft from staff-edited). The comments will open in a separate window so you can switch back and forth between the NCATE staff comments and the BOE Report-Second Draft.

6. Edit the document as needed based on the staff comments. See the following article on how to use the editor's comments.

7. To get feedback from team members, click on the Comments icon (or NEW) to the right of BOE Report-Second Draft and type your questions or comments. You cannot save your comments and return to them later. Therefore, you should type them in Word (or other word processor) and copy/paste them into the Comments screen. If comments apply to a specific
team member, be sure to address that person because your questions/comments will be read by all team members.

8. Click on **Submit** at the bottom of the Comments box to post your comments. **Team members** are NOT notified when comments are posted. It is highly recommended that an email be sent to team members when comments are posted.

9. Click **Cancel** to close the comments box. Be sure to submit before you click cancel.

10. After all edits are complete, click **Save and Quit** at the bottom of any page.

11. If a dialogue box appears, click **Yes**. This will take you back to the AIMS Visit Reports screen.

12. When you are ready to submit the report, go to the last page by using the drop down menu in the toolbar in the upper left hand corner to select **IV. Sources of Evidence**. Click **Next** at the bottom of the page. This will take you to the “Are you ready to submit your report?” page.

13. If you are ready to submit the report for correction of factual errors, click **Submit Report**. If a dialogue box appears, click **Yes**. This will take you back to the AIMS Visit Reports screen. If you click **Close**, the report will close but NOT be submitted.

14. Close the AIMS program.

After the BOE Report-Second Draft has been submitted, there will be a PDF version of the file in the column to the right that can be opened and saved or printed. The unit, NCATE, BOE chair, and team members will receive an email notification that the report has been submitted and is available to review for factual corrections by the unit.

If you have questions about submitting BOE reports, please contact Nate Thomas, Accreditation Associate by email at nate@ncate.org or call 202-466-7496.

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**How to use NCATE Editors' Notes**

*Patty Garvin, Director of Accreditation, CI and TI Pathways*

Each BOE onsite report is reviewed by a staff editor, either an NCATE staff member or an affiliated editor. Not only do the editors check spelling and grammar, they also provide more substantive feedback on the report in their notes. Because the editors were not on the onsite visits or have reviewed all the documentation, they do not have the same insight as the chairs and members, and can only suggest changes. Suggestions are often phased as “the team might want to consider” or “did the team consider.” And it means just that. If a team chair thinks that a suggestion has some merit he or she should go back to the team, or at least the members who did the most work on the standard in question, and (re)consider the issue raised. Take another look to see if the report expresses what the team intended. Ask if the evidence supports a change and, if it does, where the change should be made. An editor may note that the findings were negative in one area but there was no corresponding AFI.
That does not mean the team should automatically cite an AFI. Instead the team may decide to expand the findings to explain why the unit is not strong in the area, but are still at the acceptable level of the rubric. In that case an AFI would not be necessary. The editors are outside observers who can provide a fresh look at the report, but it is up to the team to make the final decisions on what changes are needed.

**BOE Report Timeline**

*Nate Thomas, Accreditation Associate*

There have recently been questions about the timeline for submitting reports. It is NCATE’s goal to have BOE reports completed within fifty-two (52) days of the site visit. In order to complete the necessary editing and review in a timely fashion, we request that BOE teams attempt to follow this timeline for submitting each report.

<table>
<thead>
<tr>
<th>Days after the visit</th>
<th>Activities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Day 1 to Day 7</td>
<td>The team chair reviews the entire report and submits the First Draft in AIMS for NCATE to review.</td>
</tr>
<tr>
<td>Day 8 to Day 14</td>
<td>The report is assigned to an NCATE staff editor or affiliated editor. The editor reviews, edits the report, and submits comments as the BOE – Staff version in AIMS.</td>
</tr>
<tr>
<td>Day 15 to Day 21</td>
<td>The chair integrates the comments into the report as appropriate and asks the entire team, including state representatives to review.</td>
</tr>
<tr>
<td>Day 22 to Day 28</td>
<td>The chair integrates the team comments into the report and asks all team members for final approval.</td>
</tr>
<tr>
<td>Day 29 to Day 35</td>
<td>The chair makes any additional changes and submits the Second Draft in AIMS for factual corrections by the unit.</td>
</tr>
<tr>
<td>Day 36 to Day 42</td>
<td>The unit reviews the report and submits, in AIMS, a list of Factual Corrections to the chair or waives corrections.</td>
</tr>
<tr>
<td>Day 43 to Day 52</td>
<td>The chair makes the factual corrections and submits the Final BOE Report in AIMS.</td>
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STAFF UPDATE

Two new staff members have joined the Accreditation and Program Review Team:

Nate Thomas, Accreditation Associate. Nate previously worked with the Woodrow Wilson National Fellowship Foundation in Princeton, New Jersey where he provided technical assistance for 17 universities in Ohio, Michigan and Indiana to launch the Science, Technology, Engineering and Mathematics (STEM) educator preparation program. He has experience as a program manager at the National MultiCultural Institute in Washington, DC and director of planning and program development with the Community Teachers Institute, Inc. in Landover, Maryland. Nate started his career in education as a Social Studies Teacher in the Prince George’s County Public Schools, Upper Marlboro, Maryland. He holds a BA in Political Science from Hampton University (VA) and an MS in Education Administration from Trinity University (DC). One of Nate’s responsibilities at NCATE is quality assurance of the review process. Nate works with Patty Garvin. His email address is nate@ncate.org

Caryn Wasbotten, Accreditation Assistant. Caryn comes to NCATE from Schwartz & Ballen LLP in Washington, DC where she was a Legal Assistant. Prior to moving to Washington she was a teacher and interim assistant director at KinderCare Learning Center in Brooklyn Park, Minnesota. She has had internships with Perspectives, Inc. in St. Louis Park, Minnesota where she worked with volunteer relations and St. Hilda’s East Community Center in London, England where she oversaw the daytime Pensioner’s Project program. Caryn has BS in Family Social Science with a minor in Violence Prevention from University of Minnesota – Twin Cities. Her responsibilities will include creating, updating, and managing report templates, forms, and other documents in the database for use in the accreditation and program review processes. When she starts on February 13, Caryn will work with Monique Lynch.

Other staff who have recently joined NCATE/CAEP are:

Emmanuel Guerrier, Executive Assistant to the President
Kaaryn Keller, Director of Communications and Public Relations
Thahn Tran, Director, Accounting, Budgets, and Banking
Stacey Trey, Manager, Meetings and Events
Keisha Walker, Lead Administrative Assistant