AAQEP Previsit Review Report for [Provider]

Initial Quality Review Team Members
(NAME, TITLE, INSTITUTION/ORGANIZATION, LOCATION)
(NAME, TITLE, INSTITUTION/ORGANIZATION, LOCATION)
(NAME, TITLE, INSTITUTION/ORGANIZATION, LOCATION)

Review Schedule
Previsit Team Meeting: [DATE/TIME]
Previsit Provider Meeting: [DATE/TIME]
Virtual Site Visit: [DATE]

Purpose and Scope of Review
The AAQEP Initial Quality Review Team listed above met on MM/DD/YYYY to conduct a previsit review of the Programs put forward by Provider. The purpose of the meeting was to review individual team members’ responses to the case presented in the Initial Accreditation Report (IAR).

During the previsit team meeting, the team shared comments, compiled clarification questions to be posed to the provider, and developed specific plans to verify evidence and gather additional evidence. The team also authored the draft summary of the case presented below.

For IQRT members: Instructions for completing this report accompany each of its four sections. The team lead will send a copy of this report to the provider prior to the previsit provider meeting.

For providers: Please review this report and send your response(s) to the team lead no later than the beginning of your virtual site visit. The first two sections, the case specification and the draft summary of the case, will become part of your case record once finalized; please send the team lead any necessary factual corrections or clarifications regarding interpretation. You will need to agree to a final version of the summary by the conclusion of the initial accreditation review.

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1. Case Specification

The Program Specification Table identifies the specific programs seeking accreditation in the AAQEP review.

- If this table is available in the Initial Accreditation Report (IAR), insert a copy below.
- If the IAR does not include this table, complete as much of the template below as possible (adding rows as needed) based on the information available in the IAR.
- If any information is missing, copy the incomplete table into the Clarification Questions (Section 3 below) and ask the provider to correct and complete the table.

<table>
<thead>
<tr>
<th>Degree or Certificate granted by the institution or organization</th>
<th>State Certificate, License, Endorsement, or Other Credential</th>
<th>Number of Candidates enrolled in current academic year (as of mm/yy)¹</th>
<th>Number of Completers in most recently completed academic year (12 months ending mm/yy)</th>
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</thead>
<tbody>
<tr>
<td>Programs that lead to initial teaching credentials</td>
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<td>Total for programs that lead to initial credentials</td>
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<td>Programs that lead to additional or advanced credentials for already-licensed educators</td>
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<td>Total for programs that lead to additional/advanced credentials</td>
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<tr>
<td>Programs that lead to credentials for other school professionals or to no specific credential²</td>
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<tr>
<td>Total for additional programs</td>
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<tr>
<td>TOTAL enrollment and productivity for all programs</td>
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<tr>
<td>Unduplicated³ total of all program candidates and completers</td>
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</tbody>
</table>

Program Location and Modality

*If any of the above programs are offered at more than one location or via different or multiple modalities, please describe below.*

¹ Count all candidates enrolled in the listed programs to date for the current academic year (12-month period).

² These programs include noncertificate masters of education, doctoral programs, etc., OR those that lead to a license for noninstructional education staff with no teaching license as a prerequisite (e.g., school nurse, school social worker, school counselor, school business manager)

³ Unduplicated refers to a total number of unique candidates or completers. Individuals who are working toward or earned more than one credential may appear in multiple rows above but should be counted only once here.
2. Draft Summary of the Case

The summary of the case is a concise statement of the review team’s understanding of the case being made by the provider. Draft a summary (no longer than five to seven paragraphs) that includes the following:

- A brief description of the provider and its context
- A brief summary of the scope of the set of programs seeking accreditation
- A brief description of the planned evidence that will be used to make the case for Standards 1 and 2
- A brief summary of the provider’s mutually beneficial P-12 partnerships
- A summary of the programmatic capacity for quality and institutional commitment to ensuring program quality
- A summary of how the data quality (reliability, validity, trustworthiness, and fairness) of the planned evidence set is assured
- Improvement or innovation goals that are outlined in the IAR and the associated evidence
3. Clarification Questions

Record questions in the box below to be answered in writing or documentation by the provider. These questions will be reviewed in the previsit provider meeting.

*Note to provider: The questions below were prepared by the review team in its initial meeting. Please respond directly in the document below with either (a) a brief answer such as you would provide in an informal interview, or if appropriate (b) links to relevant documents or evidence sources, or (c) a note indicating when and how the answer will be provided during the virtual site visit. Please provide the responses at your earliest convenience, but no later than at the beginning of the virtual site visit. When your responses are complete, please return an electronic version to the review team lead via email attachment.