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**Commission on Accreditation (COA)**

**Department of Social Work Accreditation (DOSWA)**

*Baccalaureate and Master’s Social Work Program Accreditation*

**Substantive Change Proposal**

# Directions

**Purpose**

* Complete this proposal to offer a new program option (i.e., physical location or online delivery method).
* Refer to policy [*1.2.4. Program Changes*](https://www.cswe.org/accreditation/standards/epas-handbook/) in the EPAS Handbook for program option definitions and substantive change policies and procedures.

**Formatting & Submission**

* Submit this proposal as a Microsoft Word document, per policy [*1.2.11. Document Submission Policy*](https://www.cswe.org/accreditation/accreditation-process/epas-handbook/1-overview/1-2-coa-policies-and-procedures/1-2-11-document-submission-policy/) in the EPAS Handbook.
  + The proposal must be a single Microsoft Word document and may not include separate attachments nor appendices.
  + PDFs and scanned documents will not be accepted.
* Email completed proposals to the [Associate Director of Accreditation Services](https://www.cswe.org/accreditation/info/contact-accreditation-staff/) a minimum of 6-months in advance of the new program option implementation date.
* Proposals are accepted on a rolling basis.

**Timeframe for Review & Response**

Proposals are reviewed and processed on a rolling basis. Plan for the review to span a minimum of 3-6 months. CSWE accreditation staff may request clarifying information. Upon approval, programs will receive a formal letter. The substantive change approval will be reported to the Commission on Accreditation at their next regularly scheduled meeting.

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# Section 1: General Information

|  |  |
| --- | --- |
| **Institution Name:** |  |
| **Social Work Program Level[[1]](#footnote-2):**  *(check one only)* | Baccalaureate  Master’s |
| **Primary Contact Name / Credentials:**  *(must match* [*CSWE records*](https://www.cswe.org/accreditation/directory/?)*)* |  |
| **Primary Contact Title:** |  |
| **Primary Contact Email:** |  |
| **EPAS[[2]](#footnote-3):**  *(check the EPAS the program is currently operating under)* | 2008  2015  2022 |
| **Date Proposal Submitted to CSWE:** | MM/DD/YYYY |

## Social Work Program Accreditation Status & Approval

|  |  |
| --- | --- |
| **Programmatic Accrediting Body:** | CSWE-COA |
| **Last Review Date:** |  |
| **Outcome:** |  |
| **Next Review Date[[3]](#footnote-4):** | MM/YYYY |
| We affirm that our proposed new program option implementation date does not conflict with an accreditation review process. |
| Is the program’s listing in the [Directory of Accredited Programs](https://www.cswe.org/accreditation/directory/?) accurate? | Yes  No[[4]](#footnote-5) |
| Does the **social work program** require faculty approval before establishing this new program option? | Yes  No |
| If YES, what type of approval is required? | Social Work Faculty Governance Approval  Social Work Curriculum Committee Approval |
| Other, please specify |
| Did the **social work program** complete an environmental scan, needs assessment, or other research prior to proposing this new program option? | Environmental Scan  Needs Assessment  No Research Conducted |
| Other research, please specify |
| * A copy of the social work program’s environmental scan, needs assessment, or other research conducted (if applicable) is provided in **Section 3** of this proposal | Yes  No  N/A (No Research Conducted) |

## Institutional Accreditation Status & Approval

|  |  |
| --- | --- |
| **Regional Accrediting Body:** |  |
| **Regional Accrediting Body’s Website:** |  |
| **Last Review Date:** |  |
| **Outcome:** |  |
| **Next Review Date:** |  |
| Does the **regional accreditor** require approval before establishing this new program option? | Yes  No |
| If YES, what type of approval is required? | Notification  Substantive/Major Change Report  Visit |
| Other, please specify |
| Does the **institution** require the social work program secure institutional-level approval before establishing this new program option? | Yes  No |
| If YES, what type of approval is required? | Institutional Faculty Governance Approval  Board of Governors Approval  Institutional Curriculum Committee Approval |
| Other, please specify |
| Did the **institution** complete an environmental scan, needs assessment, or other research prior to proposing this new program option? | Environmental Scan  Needs Assessment  No Research Conducted |
| Other research, please specify |
| * A copy of the institution’s environmental scan, needs assessment, or other research conducted (if applicable) is provided in **Section 3** of this proposal | Yes  No  N/A (No Research Conducted) |

## State Higher Education Authority Approval Status

|  |  |
| --- | --- |
| **Authority[[5]](#footnote-6):** |  |
| **Authority’s Website:** |  |
| **Last Review Date:** |  |
| **Outcome:** |  |
| **Next Review Date:** |  |
| Does the authority require approval before establishing this new program option? | Yes  No |
| If YES, what type of approval is required? | Notification  Substantive/Major Change Report  Visit |
| Other, please specify |

## Current CSWE-COA Approved[[6]](#footnote-7) Program Options

|  |  |
| --- | --- |
| **Program Option #1 Name:** |  |
| **Current** [**Program Option Type**](https://www.cswe.org/accreditation/standards/epas-handbook/1-overview/1-2-coa-policies-and-procedures/1-2-4-program-changes/)**:**  *(check one only)* | **In-person/Face-to-Face/Traditional:**  Main/Primary Campus  Branch/Satellite Campus  **Distance Education:**  Online  Broadcast Site  Correspondence |
| **Program Option Location:** | City, State, Country or Online |
| **Percentage of the Curriculum Delivered Online for Current Program Option:** | 0-50%  51-100% |
| **Number of Students Currently Enrolled in this Program Option:** | # |

|  |  |
| --- | --- |
| **Program Option #2 Name:** |  |
| **Current** [**Program Option Type**](https://www.cswe.org/accreditation/standards/epas-handbook/1-overview/1-2-coa-policies-and-procedures/1-2-4-program-changes/)**:**  *(check one only)* | **In-person/Face-to-Face/Traditional:**  Main/Primary Campus  Branch/Satellite Campus  **Distance Education:**  Online  Broadcast Site  Correspondence |
| **Program Option Location:** | City, State, Country or Online |
| **Percentage of the Curriculum Delivered Online for Current Program Option:** | 0-50%  51-100% |
| **Number of Students Currently Enrolled in this Program Option:** | # |

|  |  |
| --- | --- |
| **Program Option #3 Name:** |  |
| **Current** [**Program Option Type**](https://www.cswe.org/accreditation/standards/epas-handbook/1-overview/1-2-coa-policies-and-procedures/1-2-4-program-changes/)**:**  *(check one only)* | **In-person/Face-to-Face/Traditional:**  Main/Primary Campus  Branch/Satellite Campus  **Distance Education:**  Online  Broadcast Site  Correspondence |
| **Program Option Location:** | City, State, Country or Online |
| **Percentage of the Curriculum Delivered Online for Current Program Option:** | 0-50%  51-100% |
| **Number of Students Currently Enrolled in this Program Option:** | # |

## Current Total Student Enrollment

|  |  |
| --- | --- |
| **Total Number of Students Currently Enrolled:**  *(inclusive of all program options combined)* | # |

## Current Total Faculty

|  |  |
| --- | --- |
| **Total Number of Full-time Faculty:**  *(inclusive of all program options combined)* | # |
| **Total Number of Part-time Faculty:**  *(inclusive of all program options combined)* | # |
| **Total Full-time & Part-time Faculty Combined:** | # |

# Section 2: Substantive Change Information

## New Program Option Overview

|  |  |
| --- | --- |
| **New Program Option Name:** |  |
| **Proposed New** [**Program Option Type**](https://www.cswe.org/accreditation/standards/epas-handbook/1-overview/1-2-coa-policies-and-procedures/1-2-4-program-changes/)**:**  *(check one only)* | **In-person/Face-to-Face/Traditional:**  Main/Primary Campus  Branch/Satellite Campus  **Distance Education:**  Online  Broadcast Site  Correspondence |
| **Program Option Location:** | City, State, Country or Online |
| **Percentage of the Curriculum Delivered Online for Proposed New Program Option:** | 0-50%  51-100% |
| **Scope[[7]](#footnote-8):** | Local  Regional  National  International |
| **Plans of Study to be Offered:**  *(check all that apply)* | Full-time  Part-time  Advanced Standing  Weekend  Evening / Night  Adult Learning  Other(s):  List other options here, if applicable |
| **Planned Implementation Date[[8]](#footnote-9):** | MM/DD/YYYY |
| **Projected Student Enrollment Numbers at Implementation Date:**  *(for the proposed new program option only)* | # |
| **Projected Full-time & Part-time Faculty Numbers at Implementation Date:**  *(for the proposed new program option only)* | # |
| Is the new program option a short-term pilot or planned for long-term strategic implementation? | Short-term Pilot  Long-term Strategic Implementation |

## Rationale for the Change

Provide a brief statement of the rationale for establishing the new program option.

## Impact Statements

* Based upon the EPAS
* Ensure the planned expansion does not adversely impact the program’s current compliance with the EPAS
* Ensure compliance plans for the new program option align with EPAS requirements

**Directions:**

* Provide a brief narrative response to each impact statement.
* Each narrative response must reflect plans for the new program option only unless otherwise specified.
* Do not describe existing program options and current operations unless explicitly requested.
* Programs may be asked to revise and resubmit the proposal to provide clarifying information.
* This narrative section must not exceed fifty (50) pages.

**Resources:**

* 2008 EPAS (provided by CSWE accreditation staff upon request)
* [2015 EPAS](https://www.cswe.org/accreditation/standards/) | [Interpretation Guide](https://www.cswe.org/CSWE/media/AccreditationPDFs/2015-EPAS-Interpretation-Guide.pdf)
* [2022 EPAS](https://www.cswe.org/accreditation/standards/) | [Interpretation Guide](http://www.cswe.org/2022EPAS)

1. **Describe the planning process involved in developing the new program option. Identify all stakeholders and constituent groups involved.**

**Planning Process**

Insert text here

**List of Stakeholders Involved**

* Insert text here

1. **Describe the new program option’s context.   
   *(AS 1.0.2, 2015 EPAS; AS 1.0.2, 2022 EPAS)***

*Context is defined in Educational Policy (EP) 1.0 in the 2015 EPAS and 2022 EPAS.*

Insert text here

1. **Respond to one of the following based on the new program option:**
2. ***For new location-based program options:* Provide a description of the additional location, including the address, ownership of the property, classroom space, and office space.   
   *(AS 3.4.5, 2015 EPAS; AS 4.4.4, 2022 EPAS)***

**Address:** Insert text here

**Ownership of the Property**

Insert text here

**Classroom Space**

Insert text here

**Office Space**

Insert text here

1. ***For new online-based program options:* Provide a description of the additional delivery method, including technology access and any partnerships with technological platforms or educational services.   
   *(AS 3.4.5, 2015 EPAS; AS 4.4.4, 2022 EPAS)***

**Technology Access**

Insert text here

**Partnerships with Technological Platforms or Educational Services**

Insert text here

1. **Summarize the explicit curriculum. Describe how the explicit curriculum is the same and/or different for the new program option.   
   *(AS 2.0 and AS 2.1, 2015 EPAS; AS 3.1 and AS 3.2, 2022 EPAS)***

**Baccalaureate Programs**

**Summary of the Generalist Practice Explicit Curriculum**

Insert text here

**The generalist practice explicit curriculum is:**

The same for the new program option.

Different for the new program option.

If applicable, explain the differences here

**Master’s Programs**

**Summary of the Generalist Practice Explicit Curriculum**

Insert text here

**The generalist practice explicit curriculum is:**

The same for the new program option.

Different for the new program option.

If applicable, explain the differences here

**Summary of the Specialized Practice Explicit Curriculum**

Insert text here

**The specialized practice explicit curriculum is:**

The same for the new program option.

Different for the new program option.

If applicable, explain the differences here

1. **Describe the process for identifying, approving, and engaging with field education settings; orienting students; placing students; monitoring and supporting student learning; implementing student safety protocols; evaluating student learning congruent with the social work competencies; and evaluating field instructor and field education setting effectiveness for the new program option.**  ***(AS 2.2.7, 2015 EPAS; AS 3.3.4 and AS 3.3.5, 2022 EPAS)***

**Identifying Field Education Settings**

Insert text here

**Approving Field Education Settings**

Insert text here

**Engaging with Field Education Settings**

Insert text here

**Engaging with field education settings will be accomplished:**

In-person

Virtually

**Orienting Students**

Insert text here

**Orienting students will be accomplished:**

In-person

Virtually

**Placing Students**

Insert text here

**Monitoring and Supporting Student Learning**

Insert text here

**Monitoring and supporting student learning will be accomplished:**

In-person

Virtually

**Implementing Student Safety Protocols**

Insert text here

**Evaluating Student Learning Congruent with the Social Work Competencies**

Insert text here

**Evaluating Field Instructor and Field Education Setting Effectiveness**

Insert text here

1. **Describe the process for orienting and engaging with field instructors for the new program option.   
   *(AS 2.2.10, 2015 EPAS; AS 3.3.4, 2022 EPAS)***

**Orienting Field Instructors**

Insert text here

**Orienting field instructors will be accomplished:**

In-person

Virtually

**Engaging with Field Instructors**

Insert text here

**Engaging with field instructors will be accomplished:**

In-person

Virtually

1. **Describe plans for specific and continuous efforts within the implicit curriculum related to anti-racism, diversity, equity, and inclusion (ADEI) for the new program option.   
   *(AS 3.0.1, AS 3.0.2, and AS 3.0.3, 2015 EPAS; AS 2.0.2, 2022 EPAS)***

*Efforts must be specific to the program-level (baccalaureate or master’s), rather than the school / department-level or institutional-level. If collaborations with the institution and / or other departments are discussed, then identify the social work program’s active role in those efforts.*

**Specific ADEI-related implicit curriculum effort #1:**

Insert text here

**This effort will be accessed by program stakeholders:**

In-person

Virtually

**Specific ADEI-related implicit curriculum effort #2:**

Insert text here

**This effort will be accessed by program stakeholders:**

In-person

Virtually

1. **Describe plans for equitable and inclusive opportunities for student input and participation in the implicit and explicit curriculum for the new program option.   
   *(AS 3.1.9 and AS 3.1.10, 2015 EPAS; AS 4.1.8, 2022 EPAS)***

**Student Participation in the Implicit Curriculum**

Insert text here

**Student input and participation in the implicit curriculum will be accomplished:**

In-person

Virtually

**Student Participation in the Explicit Curriculum**

Insert text here

**Student input and participation in the explicit curriculum will be accomplished:**

In-person

Virtually

1. **Describe the administrative and governance structure. Describe how the structure allows the social work program, inclusive of all program options, autonomy to operate effectively under a single accredited status that extends to all program options.   
   *(AS 3.3.1, 2015 EPAS; AS 4.3.1, 2022 EPAS)***

**Administrative and Governance Structure**

Insert text here

**Description of Autonomy**

Insert text here

**Statement of Autonomy**

State whether the program has the necessary autonomy to operate effectively under a single accredited status that extends to all program options

* **Submit required documentation in Section 3: *Copy of the*** [***institutional-level organizational chart***](#_Required_Documentation)***inclusive of the social work program and the proposed new program option***
* **Submit required documentation in Section 3: *Copy of the*** [***program-level organizational chart***](#_Required_Documentation) ***inclusive of the proposed new program option***

1. **Describe the sufficiency of the program director’s assigned time for administrative leadership, inclusive of all program options.   
   *(AS B/M3.3.4(c), 2015 EPAS; AS B/M4.3.4(c), 2022 EPAS)***

**Description of Sufficiency**

Insert text here

**Statement of Sufficiency**

State whether the program director’s assigned time is sufficient for administrative leadership, inclusive of all program options

1. **Describe the sufficiency of the field director’s assigned time for administrative leadership, inclusive of all program options.   
   *(AS B/M3.3.5(c), 2015 EPAS; AS B/M 4.3.5(c), 2022 EPAS)***

**Description of Sufficiency**

Insert text here

**Statement of Sufficiency**

State whether the field director’s assigned time is sufficient for administrative leadership, inclusive of all program options

1. **Describe the new program option’s enrollment projections for the first three (3) years and the enrollment management plan to maintain compliance with the EPAS.   
   *(AS 3.2.3, 2015 EPAS; AS B/M4.2.3, 2022 EPAS)***

**Student Enrollment Projections | Years 1-3**

|  |  |  |
| --- | --- | --- |
| **YEAR 1 | YYYY** | **YEAR 2 | YYYY** | **YEAR 3 | YYYY** |
| # | # | # |

**Enrollment Management Plan to Maintain Compliance with the EPAS**

Insert text here

1. **Provide the current and projected numerical full-time equivalent (FTE) faculty-to-student ratios. Provide the formulas and calculations for the projected FTE ratio, inclusive of the new program option.   
   *(AS 3.2.3, 2015 EPAS; AS B/M4.2.3, 2022 EPAS)***

|  |  |
| --- | --- |
| **Current FTE Ratio**  *(inclusive of all current/existing program options; exclude the new program option)* | **Projected FTE Ratio**  *(inclusive of all current/existing program options; include the new program option)* |
| #:# | #:# |

**Formulas and calculations for the projected FTE ratio, inclusive of the new program option**

**Faculty**

|  |  |
| --- | --- |
| **Formula used to calculate FTE of full-time faculty** |  |
| **Total numerical FTE of full-time faculty** | # |
| **Formula used to calculate FTE of part-time faculty** |  |
| **Total numerical FTE of part-time faculty** | # |
| **Total numerical FTE of all full- and part-time faculty** | # |

**Students**

|  |  |
| --- | --- |
| **Formula used to calculate FTE of full-time students** |  |
| **Total numerical FTE of full-time students** | # |
| **Formula used to calculate FTE of part-time students** |  |
| **Total numerical FTE of part-time students** | # |
| **Total numerical FTE of all full- and part-time students** | # |

**Mathematical calculation of projected FTE ratio:** Show the mathematical calculation using the totals input into the table above

* **Submit required documentation in Section 3:** [***Faculty Summary Form***](#_Required_Documentation) ***inclusive of faculty across all program options***

1. **Describe the academic and professional advising services available to students for the new program option.   
   *(AS 3.1.6, 2015 EPAS; AS 4.1.6, 2022 EPAS)***

**Academic Advising Services**

Insert text here

**Academic advising will be accomplished:**

In-person

Virtually

**Professional Advising Services**

Insert text here

**Professional advising services are provided by social work program:**

Faculty

Staff

**Professional advising will be accomplished:**

In-person

Virtually

1. **Describe the technological support available to the students, faculty, and staff for the new program option.   
   *(AS 3.3.6 and AS 3.4.3, 2015 EPAS; AS 4.3.6, 2022 EPAS)***

**Student Technological Support**

Insert text here

**Student technological support will be accessed:**

In-person

Virtually

**Faculty & Staff Technological Support**

Insert text here

**Faculty & staff technological support will be accessed:**

In-person

Virtually

1. **Describe the supportive technology and student services that reduce barriers while optimizing accessibility for students, faculty, and staff for the new program option.   
   *(AS 3.4.6, 2015 EPAS; AS 4.4.5, 2022 EPAS)***

**Supportive Technology & Student Services**

Insert text here

**Student supportive technology and services will be accessed:**

In-person

Virtually

**Faculty & Staff Supportive Technology**

Insert text here

**Faculty & staff supportive technology will be accessed:**

In-person

Virtually

1. **Describe the fiscal resources for the new program option. Discuss how fiscal resources are sufficient and stable.   
   *(AS 3.4.1, 2015 EPAS; AS 4.4.1, 2022 EPAS)***

**Fiscal Resources**

Insert text here

**Description of Sufficiency**

Insert text here

**Statement of Sufficiency**

State whether the fiscal resources are sufficient

**Description of Stability**

Insert text here

**Statement of Stability**

State whether the fiscal resources are stable

* **Submit required documentation in Section 3:** [***Budget Form***](#_Required_Documentation) **inclusive of monies for all program options**

1. **Respond to one of the following based on the new program option:**
2. ***For new location-based program options:* Describe how support staff, classroom and office space, and technological access are sufficient to meet the needs of the faculty and students engaged at the new location.   
   *(AS 3.4.1, AS 3.4.3, and AS 3.4.5, 2015 EPAS; AS 4.4.2 and AS 4.4.4, 2022 EPAS)***

**Support Staff**

Insert text here

**Description of Sufficiency**

Insert text here

**Statement of Sufficiency**

State whether support staff are sufficient to meet the needs of the faculty and students

**Classroom Space**

Insert text here

**Description of Sufficiency**

Insert text here

**Statement of Sufficiency**

State whether classroom space is sufficient to meet the needs of the faculty and students

**Office Space**

Insert text here

**Description of Sufficiency**

Insert text here

**Statement of Sufficiency**

State whether office space is sufficient to meet the needs of the faculty and students

**Technological Access**

Insert text here

**Description of Sufficiency**

Insert text here

**Statement of Sufficiency**

State whether technological access is sufficient to meet the needs of the faculty and students

1. ***For new online-based program options:* Describe how support staff and technological access are sufficient to meet the needs of the faculty and students engaged in the online delivery method.   
   *(AS 3.4.1, AS 3.4.3, and AS 3.4.5, 2015 EPAS; AS 4.4.2 and AS 4.4.4, 2022 EPAS)***

**Support Staff**

Insert text here

**Description of Sufficiency**

Insert text here

**Statement of Sufficiency**

State whether support staff are sufficient to meet the needs of the faculty and students

**Technological Access**

Insert text here

**Description of Sufficiency**

Insert text here

**Statement of Sufficiency**

State whether technological access is sufficient to meet the needs of the faculty and students

1. **Summarize the assessment plan for competency-based student learning outcomes. Describe how the assessment plan is the same and/or different for the new program option.   
   *(AS 4.0, 2015 EPAS; AS 5.0, 2022 EPAS)***

**2008 EPAS**

**Baccalaureate Programs**

**Summary of Assessment of Competency-based Student Learning Outcomes | Foundation**

Insert text here

**The foundation assessment plan is:**

The same for the new program option.

Different for the new program option.

If applicable, explain the differences here

**Check the box (required):**

We, the program, affirm that we will begin assessing competency-based student learning outcomes and publicly posting data on our social work program’s website, as required by the EPAS, upon approval of this proposal and implementation of the new program option.Program assessment outcome reports are available in CSWE’s [Directory of Accredited Programs](https://www.cswe.org/accreditation/directory/?).

**Master’s Programs**

**Summary of Assessment of Competency-based Student Learning Outcomes | Foundation**

Insert text here

**The foundation assessment plan is:**

The same for the new program option.

Different for the new program option.

If applicable, explain the differences here

**Summary of Assessment of Competency-based Student Learning Outcomes | Advanced**

Insert text here

**The advanced assessment plan is:**

The same for the new program option.

Different for the new program option.

If applicable, explain the differences here

**Check the box (required):**

We, the program, affirm that we will begin assessing competency-based student learning outcomes and publicly posting data on our social work program’s website, as required by the EPAS, upon approval of this proposal and implementation of the new program option.Program assessment outcome reports are available in CSWE’s [Directory of Accredited Programs](https://www.cswe.org/accreditation/directory/?).

**2015 EPAS**

**Baccalaureate Programs**

**Summary of Assessment of Competency-based Student Learning Outcomes | Generalist Practice**

Insert text here

**The generalist practice assessment plan is:**

The same for the new program option.

Different for the new program option.

If applicable, explain the differences here

**Check the box (required):**

We, the program, affirm that we will begin assessing competency-based student learning outcomes and publicly posting data on our social work program’s website, as required by the EPAS, upon approval of this proposal and implementation of the new program option.Program assessment outcome reports are available in CSWE’s [Directory of Accredited Programs](https://www.cswe.org/accreditation/directory/?).

**Master’s Programs**

**Summary of Assessment of Competency-based Student Learning Outcomes | Generalist Practice**

Insert text here

**The generalist practice assessment plan is:**

The same for the new program option.

Different for the new program option.

If applicable, explain the differences here

**Summary of Assessment of Competency-based Student Learning Outcomes | Specialized Practice**

Insert text here

**The specialized practice assessment plan is:**

The same for the new program option.

Different for the new program option.

If applicable, explain the differences here

**Check the box (required):**

We, the program, affirm that we will begin assessing competency-based student learning outcomes and publicly posting data on our social work program’s website, as required by the EPAS, upon approval of this proposal and implementation of the new program option.Program assessment outcome reports are available in CSWE’s [Directory of Accredited Programs](https://www.cswe.org/accreditation/directory/?).

**Implicit Curriculum Assessment**

Insert text here

**2022 EPAS**

**Baccalaureate Programs**

**Summary of Assessment of Competency-based Student Learning Outcomes | Generalist Practice**

Insert text here

**The generalist practice assessment plan is:**

The same for the new program option.

Different for the new program option.

If applicable, explain the differences here

**Check the box (required):**

We, the program, affirm that we will begin assessing competency-based student learning outcomes and publicly posting data on our social work program’s website, as required by the EPAS, upon approval of this proposal and implementation of the new program option.Program assessment outcome reports are available in CSWE’s [Directory of Accredited Programs](https://www.cswe.org/accreditation/directory/?).

**Master’s Programs**

**Summary of Assessment of Competency-based Student Learning Outcomes | Generalist Practice**

Insert text here

**The generalist practice assessment plan is:**

The same for the new program option.

Different for the new program option.

If applicable, explain the differences here

**Summary of Assessment of Competency-based Student Learning Outcomes | Specialized Practice**

Insert text here

**The specialized practice assessment plan is:**

The same for the new program option.

Different for the new program option.

If applicable, explain the differences here

**Check the box (required):**

We, the program, affirm that we will begin assessing competency-based student learning outcomes and publicly posting data on our social work program’s website, as required by the EPAS, upon approval of this proposal and implementation of the new program option.Program assessment outcome reports are available in CSWE’s [Directory of Accredited Programs](https://www.cswe.org/accreditation/directory/?).

**ADEI Assessment**

Insert text here

**Program Outcomes**

Insert text here

1. **If applicable, provide any additional commentary of how the change in the social work program may affect the whole program’s compliance with all accreditation standards under which the program is currently operating. Respond per the set of EPAS the program is currently operating under.**

**2008 EPAS**

**AS 1.0 | Mission and Goals**

Insert text here

**AS 2.0 | Explicit Curriculum**

Insert text here

**AS 3.0 | Implicit Curriculum**

Insert text here

**AS 4.0 | Assessment**

Insert text here

**2015 EPAS**

**AS 1.0 | Mission and Goals**

Insert text here

**AS 2.0 | Explicit Curriculum**

Insert text here

**AS 3.0 | Implicit Curriculum**

Insert text here

**AS 4.0 | Assessment**

Insert text here

**2022 EPAS**

**AS 1.0 | Program Mission**

Insert text here

**AS 2.0 | Anti-racism, Diversity, Equity, and Inclusion (ADEI)**

Insert text here

**AS 3.0 | Explicit Curriculum**

Insert text here

**AS 4.0 | Implicit Curriculum**

Insert text here

**AS 5.0 | Assessment**

Insert text here

# Section 3: Documentation

**Directions:**

* Insert all documentation within this section of the proposal
* No additional documentation may be included beyond these requirements
* The required *Faculty Summary Form* and *Budget Form* are embedded in this proposal template

## Required Documentation

**Check all boxes and insert the following required documentation:**

Copy of the institutional-level organizational chart inclusive of the social work program and the proposed new program option

Copy of the program-level organizational chart inclusive of the proposed new program option

*Faculty Summary Form* inclusive of faculty across all program options

*Budget Form* inclusive of monies for all program options

Embed copy of the institutional-level organizational chart inclusive of the social work program and the proposed new program option

Embed copy of the program-level organizational chart inclusive of the proposed new program option

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Description automatically generated

**Commission on Accreditation (COA)**

**Department of Social Work Accreditation (DOSWA)**

*Baccalaureate and Master’s Social Work Program Accreditation*

**Faculty Summary Form**

**Program Level:**

*(check one only)*

Baccalaureate

Master’s

| **#** | **Name of Each**  **Full- and Part-time Faculty Member (in alphabetical order)** | **Title** | **Full-time Faculty Member?** | **Full-time Appointment to Social Work?** | **Principal Assignment (for**  **full-time faculty only)** | **Percentage of Assigned Time to Program Level Under Review** | **Degree from CSWE-Accredited Master’s Program?** | **Doctoral Degree?** | **Number of Years of Post-BSW Practice Experience** | **Number of Years of Post-MSW Practice Experience** | **Teaching Practice Courses?** | **Teaching, Administrative, or Other Responsibilities in the New program Option?** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 1 |  |  | Yes  No | Yes  No | Baccalaureate  Master’s  Other, specify or remove if N/A | % | Yes  No | Yes  No |  | # | Yes  No | Yes  No |
| 2 |  |  | Yes  No | Yes  No | Baccalaureate  Master’s  Other, specify or remove if N/A | % | Yes  No | Yes  No |  | # | Yes  No | Yes  No |
| 3 |  |  | Yes  No | Yes  No | Baccalaureate  Master’s  Other, specify or remove if N/A | % | Yes  No | Yes  No |  | # | Yes  No | Yes  No |
| 4 |  |  | Yes  No | Yes  No | Baccalaureate  Master’s  Other, specify or remove if N/A | % | Yes  No | Yes  No |  | # | Yes  No | Yes  No |
| 5 |  |  | Yes  No | Yes  No | Baccalaureate  Master’s  Other, specify or remove if N/A | % | Yes  No | Yes  No |  | # | Yes  No | Yes  No |
| 6 |  |  | Yes  No | Yes  No | Baccalaureate  Master’s  Other, specify or remove if N/A | % | Yes  No | Yes  No |  | # | Yes  No | Yes  No |
| 7 | Add or delete rows as needed |  | Yes  No | Yes  No | Baccalaureate  Master’s  Other, specify or remove if N/A | % | Yes  No | Yes  No |  | # | Yes  No | Yes  No |

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Description automatically generated

**Commission on Accreditation (COA)**

**Department of Social Work Accreditation (DOSWA)**

*Baccalaureate and Master’s Social Work Program Accreditation*

**Budget Form**

**Program Level:**

*(check one only)*

Baccalaureate

Master’s

**Program Budget:**

| **Program Budget Expenses** | **Previous Year:**  20YY-20YY | **Current Year:**  20YY-20YY | **Next Year:**  20YY-20YY | **Check One for Each Expense:** |
| --- | --- | --- | --- | --- |
| **Full-time Faculty Salaries** | $ | $ | $ | New monies are allocated to support the new program option  Current resources will extend to the new program option  This is an institution-level expense |
| **Administrator Salaries** | $ | $ | $ | New monies are allocated to support the new program option  Current resources will extend to the new program option  This is an institution-level expense |
| **Part-time Faculty Salaries** | $ | $ | $ | New monies are allocated to support the new program option  Current resources will extend to the new program option  This is an institution-level expense |
| **Staff Salaries** | $ | $ | $ | New monies are allocated to support the new program option  Current resources will extend to the new program option  This is an institution-level expense |
| **Fringe Benefits**  *(for all faculty, administrators, & staff)* | $ | $ | $ | New monies are allocated to support the new program option  Current resources will extend to the new program option  This is an institution-level expense |
| **Student Financial Aid** | $ | $ | $ | New monies are allocated to support the new program option  Current resources will extend to the new program option  This is an institution-level expense |
| **Technological Resources** | $ | $ | $ | New monies are allocated to support the new program option  Current resources will extend to the new program option  This is an institution-level expense |
| **Supplies & Ancillary Services** | $ | $ | $ | New monies are allocated to support the new program option  Current resources will extend to the new program option  This is an institution-level expense |
| **Travel**  *(for all faculty, administrators, staff, & students)* | $ | $ | $ | New monies are allocated to support the new program option  Current resources will extend to the new program option  This is an institution-level expense |
| **Other, please specify** | $ | $ | $ | New monies are allocated to support the new program option  Current resources will extend to the new program option  This is an institution-level expense |
| **Total:** | **$** | **$** | **$** |

## Optional Documentation

**Directions:**

* Check all that apply and insert any optional documentation the program elects to include in the proposal.

Copy of the institution’s environmental scan, needs assessment, or other research conducted (if applicable)

Copy of the social work program’s environmental scan, needs assessment, or other research conducted (if applicable)

# Section 4: Proposal Authorization

## Social Work Program’s Primary Contact[[9]](#footnote-10)

**Check this box:**

As the social work program’s primary contact, I hereby support and authorize this substantive change to the social work program.

|  |  |
| --- | --- |
| **Primary Contact  Signature:** | Insert e-signature or image of signature |
| **Primary Contact**  **Name, Credentials:** |  |
| **Title:** |  |
| **Date Signed:** | MM/DD/YYYY |
| **Phone #:** | (###) ###-#### |
| **Email Address:** |  |

## Institution’s President / Chancellor

**Check this box:**

As the institution’s president / chancellor, I hereby support and authorize this substantive change to the social work program.

|  |  |
| --- | --- |
| **President/Chancellor Signature:** | Insert e-signature or image of signature |
| **President/Chancellor**  **Name, Credentials:** |  |
| **Title:** |  |
| **Date Signed:** | MM/DD/YYYY |
| **Phone #:** | (###) ###-#### |
| **Email Address:** |  |

1. Separate proposals must be submitted for each program level, baccalaureate or master’s, for which a change is proposed. [↑](#footnote-ref-2)
2. Programs are not permitted to have different program options complying with different sets of standards. [↑](#footnote-ref-3)
3. The program should not implement any changes that require a *Substantive Change Proposal* during the candidacy or reaffirmation process. The candidacy process begins with the submission of the benchmark 1 document and ends with an initial accreditation decision. The reaffirmation process begins with the submission of the self-study and ends with a reaffirmation decision. [↑](#footnote-ref-4)
4. It is the program’s responsibility to notify the accrediting body of changes to the program record. Refer to section *1.2.4 Program Changes* in the [EPAS Handbook](https://www.cswe.org/accreditation/standards/epas-handbook/) for detailed policies and procedures regarding updating the program’s record, including general contact information, key personnel, and the primary contact. The program must update their CSWE record prior to submitting this proposal if their [Directory](https://www.cswe.org/accreditation/directory/?) listing is inaccurate. [↑](#footnote-ref-5)
5. A state higher education authority (e.g., higher education board, department of education) is not a social work licensing board. [↑](#footnote-ref-6)
6. List all existing program options approved by CSWE-COA. This list must match [CSWE records](https://www.cswe.org/accreditation/directory/?). Add or delete program option tables as needed. [↑](#footnote-ref-7)
7. It is the program’s responsibility to secure all necessary approvals to operate within the identified scope. [↑](#footnote-ref-8)
8. The implementation date is when classes are offered for the first time in the new program option. [↑](#footnote-ref-9)
9. The primary contact’s role is described in *1.2.7 Information Sharing and Release of COA Decision Letter* in the [EPAS Handbook](https://www.cswe.org/accreditation/accreditation-process/epas-handbook/1-overview/1-2-coa-policies-and-procedures/1-2-7-information-sharing-and-release-of-coa-decision-letter/). The primary contact manages all accreditation-related communications between the program and CSWE. [↑](#footnote-ref-10)