

# ABHES EVALUATOR APPLICATION PACKET



ABHES would like to sincerely thank you for your interest in becoming an evaluator. In order to serve as an evaluator, ABHES must confirm that each applicant meets the required qualifications. It is paramount that all information provided is legible, accurate, and complete.

Remember...

- The ABHES Evaluator Application will be considered incomplete and will not be processed if it is not dated and signed, and/or if it is submitted without an attached resume. (note: hand-written and electronic signatures are acceptable).
- The resume submitted with the application must clearly reflect your education, current and past work experience, and all certification(s) and/or licensure(s).
- The experience and education requirements for each specialty area are indicated on the application. If your resume does not reflect at least these minimum requirements, you will not be considered for that specialty area.
- Core Evaluator Training is required for all ABHES evaluators prior to serving on an accreditation visit. (note: additional specialty area training may also be required) Please visit our website periodically for upcoming training dates ([www.abhes.org](http://www.abhes.org)).
- Evaluators must complete a refresher Core or Enrichment training, and applicable specialty area training every three years.
- It is imperative to inform ABHES ([evaluator@abhes.org](mailto:evaluator@abhes.org)) of any and all changes that deviate from your original application (employment, physical address, phone number, education, certification(s), etc.), so that we have the most accurate and up-to-date information on file. At minimum, an updated application and resume must be submitted every three years.



## Demographics

Your personal contact information will be included on the visit confirmation letter for each confirmed visit

Mr. ☐ Ms. ☐ Dr. ☐

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
*Last First M.I.*

Home Address \_\_\_\_\_  
*Street Address Apartment/Unit #*

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Preferred E-mail Address: \_\_\_\_\_ Alternate E-mail Address: \_\_\_\_\_

What is the best way to reach you? ☐ Cell phone ☐ Email ☐ Work phone

Emergency Contact Name (optional): \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Bilingual or fluent in languages other than English? ☐ Yes ☐ No

If yes, please list language(s) \_\_\_\_\_

## Employment

Your employment information will be included on the visit confirmation letter for each confirmed visit

Retired? ☐ Currently not employed? ☐ Date of transition: \_\_\_\_\_

Current Place of Employment (If retired or not employed, identify last place of employment): \_\_\_\_\_

Job Title: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Work Email: \_\_\_\_\_

Are you currently practicing in your field? ☐ Yes ☐ No (If yes, this information must be reflected on your resume)



## Education and Credentials

### Highest level of education completed

- |  |  |
|--|--|
| <input type="checkbox"/> Diploma/Certificate           | <input type="checkbox"/> Baccalaureate Degree    |
| <input type="checkbox"/> Occupational Associate Degree | <input type="checkbox"/> Master's Degree         |
| <input type="checkbox"/> Academic Associate Degree     | <input type="checkbox"/> Earned Doctorate Degree |

List current professional credentials (registration, licensure, and certification) **ALL COLUMNS MUST BE COMPLETED FOR EACH CREDENTIAL LISTED**

Acronym	Full Credential Name	Expiration Date

## Specialty Experience

### Program Specialist Experience

Requirements are as follows:

- At least two years of related experience in the specialty area
- Appropriate educational background (as applicable)
- Credentialing in the field, as applicable
- Evidence of teaching, development of curriculum, or service as a practitioner
- Evidence of currency in the field through active participation in the profession
- ABHES Core Evaluator Training
- Specialty areas with an (\*) asterisk require the ABHES programmatic-specific training

#### # of Years Specialty Area

- |       |   |
|-------|---|
| _____ | Accounting  |
| _____ | Aesthetician  |
| _____ | Automotive technology   |
| _____ | Baccalaureate Degree  |
| _____ | Basic X-Ray Operator  |
| _____ | Business (Business Administration,<br>Business Management, Public<br>Admin) |

#### # of Years Specialty Area

- |       |  |
|-------|--|
| _____ | Billing/Insurance<br>(Insurance/Medical Coding, Claims,<br>Patient Accounts) |
| _____ | Broadcasting   |
| _____ | Cardiovascular Technology <input type="checkbox"/>                           |
| _____ | Invasive/ <input type="checkbox"/> Non-invasive                              |
| _____ | Chemical Abuse/Dependency  |
| _____ | Commercial Licensed Driver<br>Training                                       |



_____ Computed Tomography (CAT Scan)	_____ General Office
_____ Computer Technology (Microsoft Certified System Engineering, Network & Database Engineering Software Engineering, Internet Webmaster)	_____ Geriatric Assistant
_____ Colon Hydrotherapy	_____ Gerontology
_____ Cosmetology	_____ Healthcare Administration
_____ Culinary Arts	_____ Healthcare Management
_____ Criminal Justice	_____ Heating /Air
_____ Diagnostic Medical Sonography / Ultrasound Technician	_____ Health Information Technology,
_____ Dialysis Technician	_____ Hemodialysis
_____ Dietetic Technician	_____ Histotechnology
_____ Dental Assisting	_____ Home Health Aide
_____ Dental Assisting w/Expanded Functions	_____ Homeland Security
_____ Dental Hygiene	_____ Hospitality
_____ Dental Laboratory Technician	_____ Human Resources
_____ Early Childhood Development	_____ Legal Assistant
_____ EKG / Electrocardiogram Technology	_____ Massage Therapy/Therapeutic Massage Therapy
_____ Electrical Trades	_____ Marketing
_____ Embalming Technician/ Funeral Director	_____ Medical Assisting
_____ Emergency Medical Dispatcher	_____ Medication Aide
_____ Emergency Medical Technician	_____ Medical Laboratory Technology/Assisting
_____ Fashion Design	_____ Medical Office (Medical Secretary, Transcriptionist, Medical Records Specialist)
_____ Fire Fighter	_____ Mental Health Counselor
	_____ Magnetic Resonance Imaging (MRI)
	_____ Midwifery
	_____ Nuclear Medicine
	_____ Neurodiagnostic Technology



_____ Nursing (RN, LPN, PN, VN, CNA, NA)	_____ Psychiatric Technician
_____ Occupational Therapy	_____ Private Investigating Services
_____ Ophthalmology	_____ Radiation Therapy
_____ Opticianry	_____ Radiologic
_____ Paramedic	_____ Technology/Radiography
_____ Paralegal	_____ Rehabilitation Services
_____ Patient Care Technician	_____ Respiratory Therapy
_____ Perfusionist	_____ Sewing
_____ Personal Trainer / Fitness	_____ Surgical Assisting
_____ Pharmacy Technology	_____ Surgical Technology
_____ Phlebotomy	_____ Sterile Processing Technology
_____ Physical Therapy (Physical Therapy Technician or Aide)	_____ Travel and Tourism
_____ Polysomnographic Technology	_____ Veterinary Assisting/Technology
	_____ Welding
	_____ Other, please specify _____

### Distance Education Experience

Requirements are as follows:

- At least two years of instructional experience, development, or evaluation of distance education programs.
- ABHES Core Evaluator Training
- ABHES Advanced Evaluator Training- Distance Education

# of Years   Specialty Area

_____	Instructional Experience (specific to distance education environment)
_____	Curriculum Development/Instructional Design of Distance Education
_____	Evaluation of Distance Education Design and Delivery
_____	Online Learning
_____	Teleconferencing A/V



### Administrative Team Leader Experience

Requirements are as follows:

- At least two years of related education management experience
- Knowledge of and ability to review: student refunds, clock/credit hour conversion and allocation, satisfactory academic progress, program effectiveness plans (PEP); and general compliance with federal regulations required to be evaluated by accrediting agencies
- Suggested previous service on site visits with ABHES or other recognized accrediting agencies
- ABHES Core Evaluator Training
- ABHES Advanced Evaluator Training- Administrative Team Leader

#### # of Years   Specialty Area

- |       |   |
|-------|---|
| _____ | Department of Education Regulations (compliance with government requirements)   |
| _____ | Student Finance (review of tuition and fees, collection practices and procedures, cancellation and refund policies and calculation of Title IV refunds) |
| _____ | Satisfactory Academic Progress (knowledge and understanding of Appendix B, Standard of Satisfactory Academic Progress)                                  |
| _____ | Clock/Credit Hour Conversion & Allocation (assessment of appropriate outside coursework)  |
| _____ | Student Admissions/Recruitment (review of program advertising and program representations)  |
| _____ | Student Satisfaction  |
| _____ | Program Effectiveness Plan (development and review)   |
| _____ | Student Outcomes (retention, placement and credentialing)   |
| _____ | Student Record Maintenance (review for compliance of Appendix E, Records Maintenance)   |
| _____ | Degree Program Standards (evaluate standards of degree programs as applicable)  |
| _____ | General Office (e.g. Receptionist, Office Administration, Computerized Office Assistant)  |
| _____ | Service on visitation teams with ABHES or other recognized accrediting body   |
| _____ | Other, please specify _____   |



### Baccalaureate Degree Specialist Education and Experience

Requirements are as follows:

- Earned doctorate, professional degree (such as a J.D. or M.D.), or master's degree from an institution/program accredited by an agency recognized by the United States Department of Education or the Council for Higher Education Accreditation (CHEA)
- A minimum of five years of experience instructing, advising and evaluating students at the bachelor's level; or, program administration and supervision of faculty at the bachelor's level
- Knowledge of educational methods and experience in the review, evaluation, and assessment of programs at the bachelor's level including curriculum, educational resources, and student services
- ABHES Core Evaluator Training
- ABHES Advanced Evaluator Training- Baccalaureate

#### # of Years    Specialty Area

_____	Instruction (educational methods and student evaluation specific to the bachelor's degree level)
_____	Curriculum Review (knowledge of educational methods, development, review and assessment of baccalaureate programs)
_____	Program Administration and Faculty Oversight (specific to the bachelor's degree level)
_____	Student Services (academic advising, tutoring, placement services to support baccalaureate programs)
_____	Educational Resources (assessment and/or selection of resources to support baccalaureate programs)

### Master's Degree Specialist Education and Experience

Requirements are as follows:

- Earned doctorate, professional degree (such as a J.D. or M.D.), or master's degree from an institution/program accredited by an agency recognized by the United States Department of Education or the Council for Higher Education Accreditation (CHEA)
- A minimum of three years of experience instructing, advising and evaluating students at the master's level; or, program administration and supervision of faculty at the master's level
- Knowledge of educational methods and experience in the review, evaluation, and assessment of programs at the master's level, including curriculum and educational resources
- Scholarly research
- ABHES Core Evaluator Training
- ABHES Advanced Evaluator Training-Master's Degree

#### # of Years    Specialty Area

_____	Instruction (educational methods and student evaluation specific to the master's degree level)
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- \_\_\_\_\_ Curriculum Review (knowledge of educational methods, development, review and assessment of master's programs)
- \_\_\_\_\_ Program Administration and Faculty Oversight (specific to the master's degree level)
- \_\_\_\_\_ Student Services (academic advising, tutoring, and other services to support master's programs)
- \_\_\_\_\_ Educational Resources (assessment and/or selection of resources to support master's programs)



## EVALUATOR DISCLOSURE AND RECUSAL CONCERNING ACTIONS INVOLVING POTENTIAL CONFLICTS OF INTEREST

The Accrediting Bureau of Health Education Schools (ABHES) conducts its evaluation of institutions and programs in an objective and confidential manner. In order to ensure objectivity, impartiality, and integrity in the accreditation process, an evaluator shall not

- (i) Be involved in evaluations of institutions or programs that constitute a conflict of interest, or may be perceived as such.
- (ii) Accept any gratuity from a reviewed institution.
- (iii) Disclose any information received as the result of the evaluator's involvement in the accreditation process.

### Recusal from Activities Involving Conflicts of Interest

It is the responsibility of each evaluator to identify to the Executive Director actual or potential conflicts of interest. It will then be determined whether the evaluator should be recused from review of the institution or program.

Examples of possible conflicts of interest between an evaluator and the institution or program under review include:

- Ownership of stock in the company or parent organization controlling the institution or program;
- Current or prior service as an employee, officer or director of, consultant to, or in a business or financial relationship with the institution or program;
- Competition in the same service area as the institution or program (normally defined as within a 50-mile radius);
- Personal friendship other than casual business relationship with owners, operators, or senior employees of the institution or program; and,
- Any other interest which affects or may affect the objective judgment of the evaluator in the performance of his or her responsibilities.



### Duty Not to Accept Gifts or Other Consideration

Evaluators shall not solicit or accept, for themselves or any other person, gifts, gratuities, entertainment, loans or other consideration from individuals that are associated with an institution or program subject to accreditation by ABHES where the circumstances indicate that the consideration may be motivated by the donor's interest in the evaluator's findings or recommendations or the final accreditation determination.

Before, during and after an accreditation visit, evaluators may not engage in any behavior that might suggest they would consider or seek, either at present or in the future, any employment, consultation or other relationship of any type with the institution or program evaluated. Accordingly, without regard to whether the evaluator receives compensation, evaluators may not provide any institution or program with assistance or advice in any way related to ABHES accreditation following a visit.

### Duty of Confidentiality

Evaluators will treat all information obtained through the evaluation process as confidential. Once the visit has concluded, evaluators shall have no contact with the host institution regarding the visit. Evaluators shall release no specific information about the reason for the visit, violations, or possible actions to students or employees of the institution. Inquiries about the findings, recommendations or actions of the Commission shall be referred to the Executive Director.

### Code of Conduct

ABHES Evaluators are expected to adhere to high standards of ethical conduct. Although it is impossible to describe all conduct that is addressed, this policy specifically requires the following:

- Dedication to ABHES' mission, vision, and core values at all times, and serve the best interest of ABHES constituencies.
- Ethical handling of actual or apparent conflict of interest between personal and professional relationships.
- Full, fair, accurate, and timely disclosure of relevant facts in all reports and documents dealing with matter of service.
- Compliance with all applicable governmental laws, rules, and regulations.
- Treatment of all persons with respect equity, and fairness regardless of race religion, gender, ability, age, or national origin.
- Protection of confidential and/or privileged information accessed in the course of ABHES duties.
- Prompt reporting of Code of Conduct violations to an appropriate person or persons within ABHES.
- Personal Accountability for adherence of this Code of Conduct policy.



Attestations

I agree that, as a condition of my services as an ABHES evaluator, I will abide by the ABHES Conflicts of Interest and Confidentiality policy described above.

I agree that the information I have provided above regarding my qualifications to serve as an ABHES evaluator accurately represents my academic and professional experiences to date.

I acknowledge that I have read the electronic signature policy provided under the evaluator tab at [www.abhes.org](http://www.abhes.org) and choose to submit this form, including my scanned or copied signature, electronically. (Please note: you may opt out and submit a hard copy of this form to the ABHES office at 6116 Executive Boulevard, Suite 730, North Bethesda, MD 20852).

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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Upon completion, submit to [evaluator@abhes.org](mailto:evaluator@abhes.org)