Thank you for your interest in our quality assurance standards framework. We will accept comments through July 31, 2017.

Please submit your comments and feedback to qastandards@entangled.solutions.

As you review our framework, we invite you to consider and respond to the following questions:

1. **Balancing the administrative burden for education providers**
   Given the financial and operational costs of data, collection, reporting, and auditing, what level of verification is minimally acceptable? Should providers be required to undergo a full audit, or would a review be sufficient? Is the $5 million revenue threshold suggested appropriate?

2. **Location specific data**
   Related to question #1 and realistic/cost effective data collection, how important is location specific data? What is the appropriate balance between feasibility of reporting and variance based on region?

3. **Evidentiary requirements**
   Are the suggested evidentiary standards appropriate? Are they sufficient to ensure reliability and trust in the data? Are they overly burdensome for the provider?

4. **Accredited vs. non-accredited providers**
   Do the standards fit for both accredited providers and non-accredited providers? Are the same standards able to be applied equally for both?

We look forward to your thoughts and feedback.
QUALITY ASSURANCE STANDARDS
Suggested Framework and Outcomes Metrics

2017
With the growth of unaccredited educational providers, students are facing a barrage of unsubstantiated claims regarding the outcomes these different providers produce. Knowing where to invest their time and money in learning is becoming increasingly difficult. Similarly, employers and all levels of government face challenges determining from where to hire and which providers to allow to operate, respectively.

The U.S. Department of Education's launch of the Educational Quality through Innovative Partnerships (EQUIP) program also brought the federal government into the fray, as EQUIP allows nontraditional providers of education to partner with accredited colleges and universities in order to access federal aid for students.

These developments necessitate the emergence of a third-party quality assurance system for the health of the industry and its student, employer, and government stakeholders. The EQUIP program has jumpstarted the creation of such a system by introducing quality assurance entities (QAEs), which will monitor student outcomes at experimental sites in order to determine eligibility for federal loans and grants.

In order for a third-party quality assurance system to be successful, there must be a framework of quality assurance standards in place to measure and assess learning outcomes and student success so that reporting is transparent and trustworthy, and stakeholders can compare the outcomes from like programs.

This document outlines a framework for a new, outcomes-based system of quality assurance. Although no system can perfectly capture every dimension of an education or training program's quality, these standards assess effectiveness through the lens of the customers—the learners who pay to attend and the employers who hire those individuals afterward. To that end, we examine a range of near- and medium-term outcomes related to learning, completion, placement, earnings, and satisfaction that each program could claim to provide.

HOW WILL THESE STANDARDS BE USED?
These standards are intended to measure and assess each institution's claims of program outcomes and student success, provide transparent and trustworthy reports, and offer a useful comparison for similar programs. They are also intended to hold providers and institutions accountable for the outcomes they claim, as well as monitor unverified claims. Institutions that accept and participate in these standards will be expected to use verified metrics in their promotional content and messaging. If providers opt out of any of the specific metrics, it follows that they should not make claims about those outcomes. In other words, if a program doesn't claim to boost earnings, it doesn't have to report out against that measure, but it also can't make unverified claims about earnings.

It is important to note that these standards are intended only to set a benchmark for what outcomes are measured and how. Compliance with these standards must be monitored and measured by independent auditors. Neither these standards nor the audit process are intended to make a judgement of quality. Rather, students, employers, funders/investors, accreditors, and other third-parties will make judgements for themselves, based on accurate and comparable data.

WHAT IS THE RATIONALE BEHIND THE OUTCOMES SELECTED?
A functional quality assurance system for postsecondary education must rely on multiple measures of results. For one, each additional measure acts as a check on possible ways to manipulate others. For example, a provider could offer short-term certificates that have a high completion rate, but little labor market payoff. Looking only at completion would thus ignore a serious problem. Alternatively, a program could have very good earnings results, but very few completers. In that case, the high rate of non-completion is a sign of concern that would be ignored in an earnings-only evaluation of results.

Conducting rigorous reviews of multiple measures provides benefits for education and training providers, as well as consumers. For educational providers, this process will generate a series of verified, accurate outcomes that could then be used in any marketing or promotional materials, or for benchmarking and continuous improvement efforts. Similarly, students would have greater confidence that the numbers presented to sell them on a program are true and potentially comparable across other providers, as providers would be held accountable for advertising outcomes inconsistent with their audited numbers.
These standards intentionally do not address two other key elements of an education or training offering—the financial stability and governance of the organization. Insolvent and mismanaged providers present a different set of quality concerns. Sudden closure could undermine a credential's value and create difficulties in verifying student attendance/completion. Any complete quality assurance system thus needs to combine investigation of a provider's learner results with a sharp eye to its financial health and governance. Given the different work and skills needed to assess finances/governance and student outcomes, it is entirely possible that these verification processes could be conducted by two separate entities. Having separate reviews makes sense as well because these outcomes standards operate at the programmatic level, while financial and governance questions look at the overall education institution or training provider.

FOR WHICH ENTITIES DO THESE STANDARDS APPLY?
These standards are intended to be applied broadly to higher education providers, including accredited and nonaccredited institutions. As they are meant to measure and validate only the outcomes that a program claims, these standards are intentionally agnostic to institutional mission, structure, and other elements that might vary in a review of traditional institutions of higher learning. As a result, these standards do not restrict participation to education or training providers based on any type of qualifications related to facilities, faculty, or other structural elements. The goal of an agnostic approach to a provider's model or structure is for these standards to provide assurance about the value of enterprises with regards to their student outcomes.

Although these standards are agnostic to a provider’s structure, they cannot operate at any level of learning more granular than a program. While individual courses certainly can have value, it is unrealistic to expect these standards to assess the value of each individual piece. Accordingly, these standards are designed to provide a quality assurance process at the program level. We chose program for several reasons. First, there is substantial evidence that outcomes within different program offerings at an institution of higher education may vary as much as they do across schools. Second, consideration of learning outcomes operates better at a programmatic level, where expected results are more specific and measurable. By contrast, institution-wide learning outcomes for a place with diverse offerings would have to be quite vague in order to capture learning that all students should accumulate. Third, some institutions may offer seemingly similar programs that are designed for different populations. For example, someone may offer a full-time, intensive web design program alongside a part-time one that targets a different population. It is likely that these similar programs would produce different results, if for no other reason than the timeframe for finding employment might be different.

We recognize that any programmatic approach must still have some room for flexibility. For example, there may be instances where a provider operates different programs but they are closely related. In these cases, it is better to combine programs to reach sufficient sizes for evaluation rather than simply not measure results. Ideally, program combination should strive to avoid lumping together programs of vastly different levels. For example, a program that is three months in length should not be combined with one that is 12 months, unless no other options exist.

These standards are agnostic to the level of programs considered. They check the outcomes one would want to see for a short-term certificate program as they would for a degree program. Despite this, we assume the initial application of these standards will likely be at career-oriented training programs rather than the traditional offerings that bedevil any discussion of outcome (e.g., liberal arts degrees).

WHAT ARE THE LEVELS OF COMPLIANCE?
Getting the indicators discussed in these standards right takes a lot of work. For many, the underlying quality and accuracy will also be a function of what types of data a provider can access. Recognizing this, these standards outline the differing levels of compliance possible with each measure. These are meant to serve as guidance for auditors on how to evaluate the evidence provided so that they can qualify their opinions on the veracity of a program’s claims appropriately.

In addition, third-party auditors should conduct full, annual audits of any program with at least $5 million of revenue. Although an audit is more expensive than a review, it is also more thorough at examining the underlying evidence behind a provider’s claim. Due to the cost of a full audit, it is acceptable for programs with revenue less than $5 million to simply be reviewed, but for programs serving larger numbers of students, a simpler review offers inadequate trust behind the outcomes it claims.

LIMITED WAIVER OPTION
The broader the application of standards, the greater the chance that instances will arise where some of these measures may make less sense for a particular program or provider, relative to its mission and/or intended outcomes. Recognizing this, programs may waive standards measurements under the following conditions:
- They are not required to report one as part of any other requirement. This includes demands from states, the federal government, or licensing and certification bodies.
- They do not make any advertising, marketing, or promotional claims about the measures they waive.
LEARNING

Although students may consider getting a job to be the primary objective of a program, the process of acquiring skills and knowledge is what gives them the tools to achieve that goal. To that end, understanding student learning is an important part of any consideration of quality.

Learning is admittedly a far more complex issue than any other suggested measure in these standards. Some elements that indicate learning will vary more by program type than a measure such as completion. This may be especially true in instances of attempting to measure non-cognitive, or "soft skills," relative to technical proficiency, which is generally accepted to be more easily assessed. Given the potential for substantial variation in learning, these standards supply a process for measuring it and offer general guiding principles, rather than focusing on what the exact measure should be.

Every program should have clearly articulated and transparent learning outcomes and goals. Every program within a provider would first have to create a clear list of all learning outcomes it expects all graduates to achieve. These could include both skills and specific content knowledge. They ideally should include statements of what students can do with the knowledge and skills. Providers should ensure that the learning outcomes are clear and not overly vague or generalized. For instance, instead of simply saying graduates should "demonstrate the ability to think critically," they should say something closer to “differentiate and evaluate theories and approaches to selected complex problems within the chosen field of study and at least one other field.”

Learning outcomes should be clearly documented. Articulating learning outcomes alone is insufficient. Providers must also have a process for concrete documentation that verifies the learning took place. This starts with a plan for how the provider will measure each student's ability to demonstrate these outcomes.

Although the exact process and documentation will vary, possible acceptable items include:

- Pre- and post-program assessments that demonstrate gains in learning and have identical administration conditions (e.g., a pre-program test cannot be given in half the time allotted for a final assessment)
- Post-program assessments that demonstrate mastery in learning
- Portfolios of students' work
- Common assessments that are used by other providers (e.g., CLA+, NAEP, although the latter obviously would not be used here)
- Licensing exam results; this could work in fields where licenses are required (e.g., nursing), but is probably less effective for many other professions
- Industry-recognized certifications, where applicable

It is also useful to provide some guidance about what should not be considered acceptable demonstrations of learning:

- Grades or GPA: Too subjective, lack external validation, and provide little detail
- Program completion: Tells nothing about whether standards were high or lax
- Student self-evaluations: Lack quality external validation

ASSESSMENT SHOULD BE INDEPENDENT, OBJECTIVE, AND EXTERNALLY VALIDATED.

Learning documentation should include external, independent processes that ensure that someone with no financial relationship to the provider reviewed the materials to evaluate whether they meet the claims of the provider. These standards do not presume the proper way to construct or administer assessments. Different levels for compliance with this standard follow below.

Ideal evidence
All learning claims are independently verified. This includes an external sign off on assessment tools prior to their administration, as well as independent scoring. This could include professional associations or their equivalent.

Strong evidence
Learning assessments are externally verified, and at least some portion of the completed assessments are independently verified.
Acceptable evidence
Some learning assessments are externally verified, and some portion of the completed assessments are verified internally by individuals who are separate from the learning process.

ASSESSORS SHOULD BE TESTED FOR RELIABILITY.
Human graders will inevitably have inconsistent marks. Although good rubrics and training can partially solve this problem, assessment processes should also include structures that allow testing and controlling for inter-rater reliability.

PROCESSES MUST BE IN PLACE TO ENSURE LEARNERS ARE WHO THEY SAY THEY ARE AND THEIR WORK IS ORIGINAL.
Independent, well-documented learning will mean nothing if the people taking the assessments are not who they say they are. Protecting against this requires two things at minimum:
- Robust, upfront checks to verify a student’s identity and protect privacy
- Periodic checks during and at the end of a program, course, or other unit of learning, to ensure that the person verified at the beginning is still the person completing the work, and that their work is their own, original work

COMPLETION RATE

Completion rates provide a useful measure of how individual learners fare within a program, but completion rates alone should not be the sole outcome or measure of success for a program. Evidence from California demonstrates that there are individuals who may attend and complete only part of a program and still have valuable workforce outcomes. But it is also undeniable that program non-completion tends to strongly correlate with unwanted outcomes, such as defaulting on federal student loans. For these reasons, we include completion as one of several measures that provide information about program quality.

Proper formulas for completion rates are a hotly debated topic in traditional higher education circles. The problem is that the conventional formula for tracking graduation rates fails to include students who attend part-time, does not give schools credit for individuals who transfer in, and dings their graduation rate for students who transfer out. The suggested definition below acknowledges these problems and tries to solve the question of part-time attendance and transfer students.

MEASURE DEFINITION
The percentage of learners who entered a given program in the same starting cycle and graduated from that program within the stated, anticipated time to completion.

REPORTING LEVEL
Completion rates must be reported separately for each program and level within it. Online-only programs can be combined across campuses, but in-person offerings should be reported separately. The only exception would be multiple locations for a program in the same metropolitan area, which can be combined. Providers may additionally elect to aggregate programs across multiple regions, but location-specific data must be reported.

Aggregation
We recommend that programs that produce fewer than 30 learners in the denominator of a completion rate should follow the following guidelines for aggregation. These do not propose combining results for in-person programs across any areas except those within the same metro area.
- Combine the same program across up to five years until reaching a minimum size.
- If that does not work, combine closely related programs across the same year until reaching a minimum size.
- If that does not work, combine closely related programs across multiple years until reaching a minimum size.

One important caveat—graduate-level programs should never be combined with undergraduate-level programs.
**Subpopulations**
Where sample sizes are large enough, programs should report results for students broken down into the following categories:
- Socioeconomic status
- Full- or part-time attendance intensity
- Whether they already possess bachelor’s degrees or higher
- Race
- Gender

Results do not need to be reported across categories (e.g., completion rates for white men) due to cell size concerns.

Subpopulations should follow the same aggregation process outlined above to generate adequate sample sizes. If none of these produce a sufficiently large number of learners, then the provider should at least report a provider-wide rate for a campus location.

**COHORT DEFINITION**
A provider should include all students who started at a program during a 12-month period. The provider would decide what dates define that period, and it should be consistent each year. For example, one provider could choose a measurement period that runs from September 1 of one year to August 30 of the next year, while another could choose a calendar year. The measurement window period should align with what is used for placement rates.

With that starting group of learners, the provider would then divide them into students who attend full-time and those who attend part-time. Each would be tracked for differing time periods.

**COMPLETER DEFINITION**
Institutions should only count students as completers if they have graduated from their program(s). Individuals who have finished all required learning elements but have not been formally recognized as graduates should not be counted here. This is important for ensuring that providers that require the completion of a licensing or certification test in order to graduate only count students who pass that final hurdle.

These standards use different measurement windows for learners who attend full-time and those who attend part-time. To figure out the proper timeframe for tracking learners, a provider must generate an anticipated time to completion. How to do this based upon attendance intensity is discussed below.

**Full-time students**
This anticipated time to completion should be set by the school based upon the amount of time that it expects a student to finish a program with the full-time level of competencies, modules, credits, or other learning measurement units.

**Part-time learners**
Part-time completion is a more complex measure. Some providers may have a set schedule with a clear time to finish that is just extended beyond that of full-time attendees. Others may have setups where learners have flexibility to choose how much or how little of their coursework they want to attempt.

Because of these complexities, providers would have some options for defining anticipated time to completion. First, they must decide if they wish to generate individualized completion estimates. This option makes sense when a program allows students to pursue different levels of part-time attendance, such as three-quarter time, half-time, etc. It should not be used in instances where programs have set schedules and part-time learners cannot vary their attendance intensity.

If a program does not offer a set part-time schedule, it can choose to define anticipated time to completion in one of three ways:
1) **Use the historical mode**—under this option, providers would examine the mode time to completion for part-time learners during the past several years.
2) **Individually estimate based upon initial attendance intensity**—under this option, providers would examine learners’ initial attendance intensity during the first learning period and project how long those individuals will take to finish, if they continue at that pace uninterrupted. For example, if a program consists of 60 modules and a learner attempts 10 modules in a three-month learning period, then the expected time to completion is 18 months (six cycles of 10, each lasting three months). This anticipated date of completion can also include expected breaks, such as if a provider does not offer necessary modules for a summer period.
3) **Use a multiple of the anticipated time to completion for full-time students**—under this option, a provider would simply take its full-time completion rate and adjust it for the attendance intensity of students. For example, if a full-time program takes 14 weeks to complete, the provider would estimate that a half-time student would take 28 weeks, a quarter-time student would take 56 weeks, etc.

**MEASUREMENT PERIOD AND UPDATE CYCLE**

These standards only expect providers to update their completion rates once per year. A more frequent approach would cause too much difficulty due to staggered completion dates and the addition of multiple cohorts of completers each year. A provider would have the option to choose the reset date for its completion cycle, but any provider with multiple programs would have to choose the same date for all programs, for the sake of simplicity.

Based upon the date chosen, the provider would report completion results for all learners within a cohort who have been enrolled long enough to meet the expected date of completion. In other words, if a program is one-year long and someone enrolls on September 1, 2016, then the provider should not consider that person a full-time enrollee in a program cohort until after September 1, 2017.

Providers would be expected to update learner completion results once more after the first census to provide the percentage of learners who completed after 150 percent of anticipated time to completion.

To encourage number smoothing, these standards would combine up to three years’ worth of cohorts of completion rates. The three years would be defined by the expected date of completion, not entry. In other words, if a program started in 2013 and ended in 2013, it would not be counted in the data reported for 2017. But if it started in 2013 and ended in 2014, it would be counted in the 2017 data because anticipated completion is within the last three years.

To the extent practicable, providers should strive to have reporting dates that are not close to the anticipated completion date for cohorts. Where that is unavoidable—as it will be for certain programs with more flexible start-dates, for example—providers have the option to decide in what reporting year to include programs that have anticipated completion dates close to the reporting date. This is done to ensure there is enough time to properly tabulate results. For example, a cohort with an anticipated completion date of December 31, 2016, may not have collected all the data necessary for reporting results on January 1, 2017. In this case, that program can report its results on January 1, 2018.

An example illustrates how this works. A program resets its completion rates on January 1 of each year. It has been in operation since 2013 and has had entering cohorts of learners in July and September of each year. The full-time program lasts six months, while the part-time program uses an anticipated time to completion of one year.

Under that framework, here’s how the cohorts would work for the completion data reported on January 1, 2017.

### **Full-time students**

<table>
<thead>
<tr>
<th>COHORT START DATE</th>
<th>ANTICIPATED COMPLETION DATE</th>
<th>COUNTED IN THE MEASURE?</th>
</tr>
</thead>
<tbody>
<tr>
<td>May 1, 2013</td>
<td>October 31, 2013</td>
<td>No—cohort too old</td>
</tr>
<tr>
<td>September 1, 2013</td>
<td>February 28, 2014</td>
<td>Yes</td>
</tr>
<tr>
<td>May 1, 2014</td>
<td>October 31, 2014</td>
<td>Yes</td>
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<tr>
<td>September 1, 2016</td>
<td>February 28, 2017</td>
<td>No—cohort too new</td>
</tr>
</tbody>
</table>
**Part-time learners**

<table>
<thead>
<tr>
<th>COHORT START DATE</th>
<th>ANTICIPATED COMPLETION DATE</th>
<th>COUNTED IN THE MEASURE?</th>
</tr>
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<tbody>
<tr>
<td>May 1, 2013</td>
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</tr>
</tbody>
</table>

As the example shows, every cohort included in the placement rate is finished prior to the reporting date with enough time to conduct a measurement. Cohorts also do not receive future follow up. Data reported at the 12-month evaluation are included in the rate until they age out.

**EXCLUSIONS**

In general, too many exclusions from a completion rate are worrisome and a potential sign of manipulation. That said, there may be some circumstances where including a student's results in that cohort is unfair. For example, learners called to active military service may be unable to finish their programs. They should be moved to later cohorts that afford enough time after ending their service to track their results.

**Allowable exclusions:**

<table>
<thead>
<tr>
<th>EXCLUSION TYPE</th>
<th>RATIONALE</th>
<th>DOCUMENTATION STANDARD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Death</td>
<td>Learners who have died cannot finish their programs.</td>
<td>Death certificate (original or copy).</td>
</tr>
<tr>
<td>Permanent disability</td>
<td>Learners who become disabled cannot finish their programs.</td>
<td>Designation from Social Security Administration.</td>
</tr>
<tr>
<td>Employed before completion</td>
<td>It may be possible for some learners to achieve their desired outcomes of the program before completion. In these instances, completion is no longer a relevant measurement.</td>
<td>Employment verification (see Placement Rate standards).</td>
</tr>
</tbody>
</table>
Circumstances that move students to later cohorts:

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<th>RATIONALE</th>
<th>DOCUMENTATION STANDARD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Military deployment</td>
<td>Individuals who are deployed likely cannot finish their programs.</td>
<td>Service orders or other formal documentation from relevant branch of military.</td>
</tr>
<tr>
<td>Pregnancy/parental leave</td>
<td>Pregnancy and/or parental leave are temporary circumstances. They do, however, mean that individuals may be unable to finish their programs for a period of time. Moving students to a later cohort is a fair way to approach this problem, since students still are counted, just at a later date.</td>
<td>Letter or documentation from a doctor.</td>
</tr>
<tr>
<td>Religious mission</td>
<td>This is accepted practice in traditional higher education. Students on religious missions will not be able to complete their coursework.</td>
<td>Letter or other documentation from the religious authority.</td>
</tr>
</tbody>
</table>

Unacceptable exclusions:

<table>
<thead>
<tr>
<th>EXCLUSION TYPE</th>
<th>RATIONALE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not looking to finish</td>
<td>This is too vague a term and open to manipulation. These individuals are best sorted out by determinations on whether they are enrolled in a program. For example, someone who only tries an adult education course at a community college would not be in a program's cohort.</td>
</tr>
</tbody>
</table>

TRANSFER STUDENTS

Students who transfer into or out of a program represent one of the biggest challenges to accurate completion rates in traditional higher education.

It is likely that the question of transfer for programs that last only a few weeks or months is not relevant. The short enrollment period reduces the likelihood that students would be looking to move to other programs. And even if they were, they likely could not bring any credits or other measures of learning with them to other providers.

That said, these standards recognize the potential pitfalls of transfers with suggestions for tackling this issue. This area will be updated as the standards are used in the field.

Transfer to other locations of the same program

Learners who stay in the same program but move across locations should be moved to the cohort of the new program. For example, a learner starts an intensive coding program in New York. Halfway through, the individual moves to San Francisco and enrolls in that same program there. That individual should be counted only in the San Francisco cohort and be removed entirely from the New York cohort.

Transfers into the program

Learners who move into a program after its beginning should be placed into a cohort that reflects the anticipated date of completion. This includes going into the corresponding full- or part-time cohort.
Placements and Transfers

Programs should have a substantial burden of proof to demonstrate that a transfer out of the program is counted as a success. For starters, the program has to demonstrate and document subsequent enrollment in a program elsewhere. But they must go further. Any successful transfer out must show that the learner is now enrolled in a program that accepted the majority of the learning units earned at the original program. Someone who simply starts at a new program with no carryover from the initial program should not be deemed a success. In addition, a program should not count as a success someone who transfers to another program and then never completes any additional learning units. Such a situation would suggest that the transfer did not stick and that perhaps the learner was not properly prepared for transferring. This condition also protects against the possibility that a program simply moves underperforming students out to improve numbers.

Verified transfers out of the program should be removed from the numerator and denominator. The exception is if a program has transfer as a stated part of its mission and views it as a success to transfer students. In these cases, a program could choose to report a transfer rate alongside its completion rate. Claims about transfer must be successfully audited and documented to make sure that programs do not claim a transfer is equivalent to a completion unless there is proof that transfers ultimately finished.

Placement Rate

Learners frequently cite obtaining jobs or advancing their careers as key reasons for pursuing any kind of postsecondary education or training. This is especially true for career-oriented programs. For other programs, the desired outcome may be placement into another educational program (e.g., the purpose of a liberal arts program in history could be to place students into prestigious history Ph.D. programs). A placement rate thus provides a direct measurement as to whether a program was successful in aiding learners with their overall goals.

**Measure Definition**

The breakdown of all students eligible to receive a credential in the past 36 months and the percentage that within 180 days of exiting the program:

- Obtained new employment/placement in an occupation/program related to the training;
- Continued employment at a higher title or substantially higher salary at a position related to the training;
- Obtained or continued self employment or contract work in a field related to the training; or
- Did not obtain or continue employment, contract work, or self-employment in an occupation related to the training.

Exclusions from the measure for the reasons discussed later should be reported in a footnote to the measure.

This measure requires distinguishing between the first two bullets because they speak to different types of outcomes. For instance, if most of a program’s successes come from individuals advancing in a current field, it may suggest that someone not currently employed in that field may want to consider a different program. Similarly, it would acknowledge the results with contract work or self-employment.

The advantage of multiple measures is that the placement rate can sidestep the question of what to do about a person who is not placed in the field but still earns substantial wages. This type of success would show up within the earnings data, thereby ensuring an institution still has a way of getting credit for it.

**Measurement Period and Update Cycle**

These standards recommend placement rates within 90 and 180 days of completion as standard measurements. Some programs may wish to report and make claims about shorter (and/or longer) placement periods. This is acceptable if the institution can provide evidence to support these claims. Longer placement periods may be measured provided that the 180-day standard is also reported. Importantly, these standards mandate that all promotional claims related to placement rate must be qualified with a timeframe. Programs should not make blind claims for placement rates (job or otherwise) without specifying the period of time measured.

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1 The American Freshman: National Norms Fall 2015
Although 90 and 180 days are recommended as the standard timeframes for placement rate measurements, providers are only expected to report/update their placement rate once per year. A more frequent approach could cause too much difficulty due to staggered completion dates and the addition of multiple cohorts of completers each year. A provider would have the option to choose the reset date for its placement rate, but any provider with multiple programs would have to choose the same date for all of its programs for the sake of simplicity.

To avoid substantial fluctuations and keep data up-to-date, placement rates should include cohort data from the 36 months preceding the reporting date. Cohort rates need not be measured/updated again after the first 90/180-day thresholds, but the reported placement rate should be an aggregate measure of placement rates from the past 36 months.

**DENOMINATOR**

The denominator should be comprised of all students who earned or were eligible to receive a credential in the past 36 months and were out of the program for at least 90/180 days. The criterion that students “were eligible to receive” ensures that students who complete enough credits or competencies are counted, so that programs do not have an incentive to delay awarding credentials. This requirement does not apply to students who may be eligible to receive credentials through a reverse transfer process.

**NUMERATOR: PLACED IN FIELD REQUIREMENTS**

Placement rates should be measured within 90 and/or 180 days of program completion. Below are the conditions for determining whether a learner should be counted as a successful placement based upon: (1) new employment, (2) continued employment, or (3) contract/self-employment.

These standards lay out different levels of verification. They reflect a range of different ways to obtain information, from the ideal result to ones that are acceptable. Because data must be collected on an individual basis, it is likely that a given program will have learners with data that fall into different levels.

When verifying these results, the QAE will track the extent to which data come from each of the levels. The more results that come from lower levels of quality, the greater the accompanying scrutiny. In addition, large numbers and percentages of students in the self-employed or contract work category will also trigger greater investigation because these categories have greater potential for manipulation.

In all of these cases, the following types of documentation alone will not count for meeting any standard: sample surveys, LinkedIn, non-company websites.
<table>
<thead>
<tr>
<th>SITUATION</th>
<th>JOB REQUIREMENTS</th>
<th>DOCUMENTATION STANDARDS</th>
</tr>
</thead>
<tbody>
<tr>
<td>New employment in field</td>
<td>32 hours a week or more</td>
<td><strong>Ideal evidence:</strong> Government data, such as unemployment insurance at the state level, or the National Directory of New Hires data at the federal level.</td>
</tr>
<tr>
<td></td>
<td>Paid</td>
<td><strong>Strong evidence:</strong> Employer attestation backed up with documentation. This includes job classification and title, with job description as a backup but not the primary factor used.</td>
</tr>
<tr>
<td></td>
<td>Duration of five weeks or longer</td>
<td><strong>Acceptable evidence:</strong> Student attestation backed up with documentation. This includes job classification and title with job description as a backup but not the primary factor used. Offer letter could be an option here. Any student attestation requires demonstrated verification that employer exists.</td>
</tr>
<tr>
<td>Advancement within existing employment</td>
<td>32 hours a week or more</td>
<td><strong>Ideal evidence:</strong> Government data.</td>
</tr>
<tr>
<td></td>
<td>Paid</td>
<td><strong>Strong evidence:</strong> Employer attestation.</td>
</tr>
<tr>
<td></td>
<td>Duration of five weeks or longer</td>
<td><strong>Acceptable evidence:</strong> Student attestation, backed up by proof of new job. This can include promotion letter, business cards, etc.</td>
</tr>
</tbody>
</table>
| Self-employment or contract work | 32 hours a week or more (a learner who hits the 32-hour mark through a combination of part-time employment and self-employment is counted here, even if self-employment represents a minority of hours worked) | **Contract work**  
**Ideal evidence:** Employer attestation that learner is employed on a contract basis, with details about duration and weekly hours.                                                                                                                                                                                                                    |
|                               | Paid                                                                             | **Acceptable evidence:** Student attestation paired with documentation of contracts.                                                                                                                                                                                                                                                                                                                                  |
|                               | Duration of five weeks or longer                                                 | **Self-employment**  
**Ideal evidence:** Student attestation plus documentation. Includes business license, evidence of investment/capitalization, working website, or other tangible products.                                                                                                                                                                                                                         |
|                               |                                                                                  | **Note:** *For learners who combine employment and self-employment, the standards for the employment portion listed above apply for that share of the work.*                                                                                                                                                                                                 |

**NON-RESPONSE**

It is likely that even aggressive, well-designed learner outreach will not yield a 100-percent response rate. These individuals should not be counted as successful placement. While some of them may have been successfully placed, it is unreasonable to count them as such without definitive proof. Providers also should not exclude non-responsive learners from the placement rate denominator. Doing so creates unwanted incentives to intentionally avoid less successful learners so they do not show up in the data. If desired, non-response rate may be reported as a separate figure for context.

**EXCLUSIONS**

In general, too many exclusions from a placement rate are worrisome and a potential sign of manipulation. Of particular concern is the "not looking for a job" exclusion, which seems doubtful for programs with a specific vocational bent. Below, we consider exclusion options along with recommendations.
That said, there may be some circumstances where including a student's results in that cohort is unfair. For example, a learner called to active military service may be unable to obtain a job. The individual should be moved to a later cohort that affords enough time after ending service to track results.

**Allowable exclusions:**

<table>
<thead>
<tr>
<th>EXCLUSION TYPE</th>
<th>RATIONALE</th>
<th>DOCUMENTATION STANDARD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Death</td>
<td>Learners who have died cannot work.</td>
<td>Death certificate (original or copy).</td>
</tr>
<tr>
<td>Permanent disability</td>
<td>Learners who are disabled cannot work.</td>
<td>Designation from Social Security Administration.</td>
</tr>
</tbody>
</table>

**Circumstances that move students to later cohorts:**

<table>
<thead>
<tr>
<th>EXCLUSION TYPE</th>
<th>RATIONALE</th>
<th>DOCUMENTATION STANDARD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Military deployment</td>
<td>An individual who is deployed cannot also hold a job.</td>
<td>Service orders or other formal documentation from the relevant branch of the military.</td>
</tr>
<tr>
<td>Pregnancy/parental leave</td>
<td>Pregnancy and/or parental leave are temporary circumstances. They do, however, mean that someone may be out of the job search for a period of time. Moving students to a later cohort is a fair way to approach this problem as students are still counted, just at a later date.</td>
<td>Letter or documentation from a doctor.</td>
</tr>
<tr>
<td>Religious mission</td>
<td>Students on religious missions will be temporarily out of the job market and should be moved to a new cohort.</td>
<td>Letter or other documentation from the religious authority.</td>
</tr>
<tr>
<td>Enrolled full-time in additional training program offered by the same provider</td>
<td>Someone who is still enrolled at the same provider pursuing another offering will not be able to look for a job.</td>
<td>Enrollment agreement, transcript, or other documentation from the new program, including an end date.</td>
</tr>
</tbody>
</table>

**Unacceptable exclusions:**

<table>
<thead>
<tr>
<th>EXCLUSION TYPE</th>
<th>RATIONALE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not looking for a job</td>
<td>Too vague, open to manipulation through verbal attestation.</td>
</tr>
<tr>
<td>Foreign students</td>
<td>Though these individuals may have a harder time finding employment, they presumably still sought the course for this purpose.</td>
</tr>
<tr>
<td>Full-time enrollment in a training program offered by a different provider</td>
<td>Graduate school placement or enrollment in additional training may be reported separately from job placement for applicable programs, but should not be excluded.</td>
</tr>
<tr>
<td>Non-responsive students</td>
<td>This would encourage too much manipulation in the data.</td>
</tr>
</tbody>
</table>
REPORTING LEVEL
Placement rates must be reported separately for each program and level within it. Online-only programs can be combined across campuses, but in-person offerings should be reported separately. The only exception would be multiple locations for a program in the same metropolitan area, which can be combined. Any placement rate requires at least 30 learners in the denominator.

Aggregation
We recommend that programs that produce fewer than 30 learners in the denominator of a placement rate should follow the following guidelines for aggregation. These do not propose combining results for in-person programs across any areas except those within the same metro area.

- Combine the same program across up to five years until reaching a minimum size.
- If that does not work, combine closely related programs across the same year until reaching a minimum size.
- If that does not work, combine closely related programs across multiple years until reaching a minimum size.

One other caveat—graduate-level programs should never be combined with undergraduate-level programs.

Subpopulations
Where sample sizes are large enough, programs should report results for students broken down into the following categories:

- Socioeconomic status
- Full- or part-time attendance intensity
- Whether they already possess bachelor’s degrees or higher
- Race
- Gender

Results do not need to be reported across categories (e.g., placement rates for white men) due to cell size concerns.

Subpopulations should follow the same aggregation process outlined above to generate adequate sample sizes. If none of these produce a sufficiently large number of learners, then the provider should at least report a provider-wide rate for a campus location.

EARNINGS

Earnings are a crucial measure of value. They provide answers to key questions that students want answered, such as, “Will my investment pay off?” Earnings also serve as a check on completion data. If programs have high completion rates but poor earnings results, then there may not be sufficient value in the underlying program. Similarly, good earnings results may be cause for excusing so-so (but not abysmal) completion rates.

These standards acknowledge that several factors go into earnings. In addition to underlying program quality, earnings can be affected by geographic location, the types of occupations available to completers, and the program type. For these reasons, these standards recommend looking at earnings through four distinct measures:

- Absolute earnings
- Percent of students earning above a minimum threshold
- Change in earnings over time
- Annual debt service relative to earnings

Having multiple measures helps protect against certain issues. For example, looking only at absolute earnings would otherwise disadvantage programs that may be tied to lower-wage occupations, even if they provide value. But such programs may still look OK if they provide a good increase in wages or at least help secure a salary that is not too low relative to what students paid upfront. From this data, outside rankings could construct return-on-investment (ROI) measures for multiple stakeholders (e.g., students, taxpayers) to better inform policy and enrollment decisions.

The ideal standard of evidence would be to obtain results from a government database, such as those held by the Social Security Administration or state unemployment insurance agencies.
MEASUREMENT DEFINITIONS

Absolute earnings: The median annual earnings of program graduates within the first full calendar year and after the fifth full calendar year post-graduation. Includes individuals with $0 earnings.

Earnings threshold: The percentage of program graduates whose earnings within the first full calendar year and after the fifth full calendar year post-graduation are more than 200 percent of the federal poverty level for a one-person household in the continental United States.

Earnings change over time: The median increase in earnings for program graduates within the first full calendar year and after the fifth full calendar year post-graduation, measured as the change in income from the last full calendar year prior to entering a program.

Earnings relative to net price paid: The amount paid for a program expressed as a percentage of the typical annual earnings of a graduate within the first full calendar year and after the fifth full calendar year post-graduation.

EARNINGS DATA SOURCES AND QUALITY STANDARDS

Each of the measures would follow the same tests for determining the level of compliance with the standards.

Ideal evidence
Earnings data come from a government administrative data source based upon the actual earnings of graduates. This includes the federal government’s Social Security Administration or U.S. Department of the Treasury. It also includes state administrative data systems. Federal data are the absolute best standard to pursue. If available, federal earnings information will include all students, regardless of the states they live in or who their employers are. State data are second best because they cannot track individuals across borders and they exclude individuals who are federal employees, self-employed, or fall into other categories.

Unfortunately, obtaining earnings data from federal sources will likely be a difficult task. There currently is not a process for alternative providers to obtain federal income information. That said, agreements like the one recently executed between the U.S. Census Bureau and the University of Texas System may provide a model path to replicate. State data availability, meanwhile, will vary across states.

Data from the U.S. Bureau of Labor Statistics cannot meet the standard of ideal evidence because they are not unique to the graduates of a given program.

Strong evidence
Earnings data come from employers with backup documentation to verify their accuracy. Programs using this level of evidence have the option to slightly tweak their reporting timeframe for the first earnings look. Instead of using results measured for the first full calendar year after graduating from a program, this process could instead use the initial earnings offered for a job taken during this period of time. For example, if a graduate takes a job at Company A six months after leaving the program, the provider could count the earnings from that job reported by the company at that point in time and have it suffice for the initial earnings census.

To guard against manipulation, programs using this alternative census would have to ensure that the job results used for these earnings data span at least three months. This prevents the possibility of programs counting short-term employment with an impressive initial offer letter that then terminates after a few weeks.

Acceptable evidence
Earnings data come from learners with backup documentation to verify their accuracy.

Not meeting the standard
The following items do not meet any of the standards:
- U.S. Bureau of Labor Statistics: Cannot separate data out by level of experience (e.g., includes new entrants to a field as well as seasoned professionals). Also reports national or regional data, not specific results for a provider. Crosswalking results from a program to a job are not always clean (e.g., all business degrees appear to track into chief executive officer jobs).
- PayScale: Interesting survey data, but it is not scientific. No control for nonresponse bias. No backup data documentation.
- Burning Glass Technologies or job listings: Very important data for understanding demand, but again do not speak to actual earnings obtained by graduates of a specific program or provider.
- Anticipated salary data: This is too subjective and based upon learner assumptions.
MEASUREMENT WINDOW
These standards recommend two measurement windows to judge earnings success. First is an early-term look that judges earnings results within the first full calendar year after completing a program. Second is a longer-term measure that looks at results in the fifth full calendar year after completing a program.

In general, these standards believe that the longer window is better suited for accountability purposes because it affords time for learners to adjust to the workforce and also judges whether the program has ongoing usefulness. That said, we recognize that obtaining information from learners five years after leaving a program may be especially difficult and could be less relevant for short-term programs focused on more proximate outcomes.

MEASUREMENT PERIOD AND UPDATE CYCLE
These standards only expect providers to update their earnings results once per year. A provider would have the option to choose the reset date for its earnings data, but any provider with multiple programs would have to choose the same date for all of its programs for the sake of simplicity.

Based upon the date chosen, the provider would report completion results for all graduates within a cohort who have been out of school long enough to track within a window that includes at least one calendar year. In other words, if someone graduates from a program on September 30, 2016, then the provider has until December 31, 2017, to report their earnings.

Providers would be expected to update earnings results at two census points: within at least one full calendar year after leaving a program and after the fifth full calendar year post-graduation. They would not be expected to collect intermediate data points for the purposes of these standards.

To encourage number smoothing, these standards would combine up to three years’ worth of cohorts of earnings rates together. The three years would be defined by the end census date for earnings. In other words, if a program ends in September 2016, its census date would be on December 31, 2017, and so would not be counted in the data reported for 2017.

To the extent practicable, providers should strive to have reporting dates that are not close to the final measurement dates for cohorts. If that is not avoidable, a provider has the option to decide in what reporting year to include programs that have anticipated completion dates close to the reporting date. This is done to ensure there is enough time for properly tabulating results. For example, a cohort with earnings tracked until December 31, 2016, may not have collected all the data necessary for reporting results on January 1, 2017. In this case, that program can report its results on January 1, 2018.

An example illustrates how this works. A program resets its earnings rates on January 1 of each year. It has been in operation since 2013 and had graduating cohorts of learners in May and September of each year. Under that framework, here’s how the cohorts would work for the earnings data reported on January 1, 2017.

<table>
<thead>
<tr>
<th>COHORT COMPLETION DATE</th>
<th>1 YEAR WINDOW ENDS</th>
<th>COUNTED IN THE MEASURE?</th>
</tr>
</thead>
<tbody>
<tr>
<td>May 1, 2013</td>
<td>December 31, 2014</td>
<td>Yes</td>
</tr>
<tr>
<td>September 1, 2013</td>
<td>December 31, 2014</td>
<td>Yes</td>
</tr>
<tr>
<td>May 1, 2014</td>
<td>December 31, 2015</td>
<td>Yes</td>
</tr>
<tr>
<td>September 1, 2014</td>
<td>December 31, 2015</td>
<td>Yes</td>
</tr>
<tr>
<td>May 1, 2015</td>
<td>December 31, 2016</td>
<td>Yes</td>
</tr>
<tr>
<td>September 1, 2015</td>
<td>December 31, 2016</td>
<td>Yes</td>
</tr>
<tr>
<td>May 1, 2016</td>
<td>December 31, 2017</td>
<td>No—cohort too new</td>
</tr>
<tr>
<td>September 1, 2016</td>
<td>December 31, 2017</td>
<td>No—cohort too new</td>
</tr>
</tbody>
</table>
REPORTING LEVEL
Earnings rates must be reported separately for each program and level within it. Online-only programs can be combined across campuses, but in-person offerings should be reported separately. The only exception would be multiple locations for a program in the same metropolitan area, which can be combined.

Aggregation
We recommend that programs that produce fewer than 30 learners in the denominator of an earnings rate should follow the following guidelines for aggregation. These do not propose combining results for in-person programs across any areas except those within the same metro area.
- Combine the same program across up to five years until reaching a minimum size.
- If that does not work, combine closely related programs across the same year until reaching a minimum size.
- If that does not work, combine closely related programs across multiple years until reaching a minimum size.

One other caveat—graduate-level programs should never be combined with undergraduate-level programs.

Subpopulations
Where sample sizes are large enough, programs should report results for students broken down into the following categories:
- Socioeconomic status
- Full- or part-time attendance intensity
- Whether they already possess bachelor's degrees or higher
- Race
- Gender

Results do not need to be reported across categories (e.g., placement rates for white men) due to cell size concerns.

Subpopulations should follow the same aggregation process outlined above to generate sufficient sample sizes. If none of these produce a sufficiently large number of learners, then the provider should at least report a provider-wide rate for a campus location.

COHORT DEFINITION
Ideally, earnings data should include all learners who were eligible to complete a program during a 12-month window (i.e., earnings data should reflect the same group of learners captured in the denominators for completion and placement).
It may of course be unrealistic for some programs to capture this data from non-completers. Therefore, these standards recommend that institutions include data for all program graduates and encourage them to provide data for all students. The level of data and evidence provided should be qualified during the audit process, and institutions must not make false or misleading claims about earnings data or the population from whom they collect and report data.

Providers have the option to define their own 12-month window (e.g., July 1 to June 30, calendar year, October 1 to September 30).

Earnings cohorts should include graduates, even if they are making $0 and do not meet one of the exclusion categories mentioned below.

EXCLUSIONS
In general, too many exclusions from earnings data are worrisome and a potential sign of manipulation.
That said, there may be some circumstances where including a student’s results in that cohort is unfair. For example, learners called to active military service may see lower wages than they would have otherwise. They should be moved to later cohorts that afford enough time after ending their service to track their results.
Allowable exclusions:

<table>
<thead>
<tr>
<th>EXCLUSION TYPE</th>
<th>RATIONALE</th>
<th>DOCUMENTATION STANDARD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Death</td>
<td>Learners who have died cannot earn salaries/wages.</td>
<td>Death certificate (original or copy).</td>
</tr>
<tr>
<td>Permanent disability</td>
<td>Learners who become disabled may not earn salaries/wages.</td>
<td>Designation from Social Security Administration.</td>
</tr>
<tr>
<td>Foreign students who have left the country</td>
<td>Learners on education visas may not be able to stay in the country.</td>
<td>Evidence that the individual has left the country.</td>
</tr>
</tbody>
</table>

Circumstances that move students to later cohorts:

<table>
<thead>
<tr>
<th>EXCLUSION TYPE</th>
<th>RATIONALE</th>
<th>DOCUMENTATION STANDARD</th>
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<tbody>
<tr>
<td>Military deployment</td>
<td>Individuals who are deployed may not have earnings related to their programs.</td>
<td>Service orders or other formal documentation from the relevant branch of the military.</td>
</tr>
<tr>
<td>Religious mission</td>
<td>Individuals on religious missions likely will not have earnings related to their programs.</td>
<td>Letter or other documentation from the religious authority.</td>
</tr>
</tbody>
</table>

Unacceptable exclusions:

<table>
<thead>
<tr>
<th>EXCLUSION TYPE</th>
<th>RATIONALE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not looking for employment</td>
<td>Most individuals initially using these programs are looking for jobs. This claim is too vague and open to manipulation.</td>
</tr>
<tr>
<td>Foreign students who are working or seeking work in the country</td>
<td>These individuals are able to obtain employment and should be counted. This should include both employed and unemployed foreign students who are planning to stay in the country.</td>
</tr>
<tr>
<td>Non-responsive students</td>
<td>This would encourage too much manipulation in the data.</td>
</tr>
</tbody>
</table>

ADDITIONAL EARNINGS DEFINITIONS.

Absolute earnings: The median income earned by all individuals tracked in the cohort. These data should be annualized if reported on a quarterly basis.

Earnings threshold: A comparison of how many individuals’ earnings exceeded 200 percent of the poverty level in the continental United States. This measure assumes a single person household, regardless of their actual circumstances. These measures use 200 percent because it more closely approximates the level of a high school graduate’s earnings, which the U.S. Department of Education puts at roughly $25,000.
Earnings growth: The key part of this measure is obtaining prior data on earnings. This must be done through an information collection that occurs at the time of entry. Asking for past earnings several years after a learner graduated is unlikely to yield accurate data. Providers should obtain these data from either:
- Federal or state data systems capable of tracking this information; or
- Some sort of financial aid application that requires verified documentation of prior earnings through a tax form such as a W-2.

Annual debt service to earnings: This measure requires determining the ideal typical debt service at a program. In cases where learners have a traditional loan, the annual payment should be based on the balance owed upon entering into repayment, the underlying interest rate, and the anticipated repayment timeframe.

Alternative payment products, such as income-share agreements (ISAs), need to be handled slightly differently. In these cases, the assumed debt service should be determined based on the contract.

**STAKEHOLDER SATISFACTION AND CONFIRMATION OF PURPOSE**

Feedback from students and employers can provide vital insight into attitudes and opinions that could not otherwise be captured by the numbers. In particular, it can help to see if the reasons students are attending a given program match up with the mission of that program. It also represents a mechanism for bringing employer validation into the quality assurance system.

**MEASUREMENT PERIOD AND UPDATE CYCLE**
These standards only expect providers to update their satisfaction results once per year. A provider would have the option to choose the reset date for its earnings data, but any provider with multiple programs would have to choose the same date for all of its programs for the sake of simplicity.

Based upon the date chosen, the provider would conduct retrospective satisfaction surveys of all students who left a program and the employers who hired them no sooner than one year after separation and no later than two years after separation. In other words, if someone leaves a program on September 30, 2016, then the provider would not survey that student until after September 30, 2017, but before September 30, 2018. The rationale for this waiting period is that in the aftermath and euphoria of completing a program, before students have been out into the next phase of life, it is easy to overvalue or overrate one's satisfaction with the program on a simple net promoter score. Instead, the measure here is asking the question, “Knowing what you now know, having been out of the program at least a year, would you choose to repeat your experience here?” This allows a student to not only evaluate the program experience itself, but also its value to his life after leaving the program.

To encourage results smoothing, these standards would combine up to three years' worth of satisfaction surveys. The three years would be defined by the end date for conducting a survey.

An example illustrates how this works. A program resets its satisfaction data on January 1 of each year. It has been enrolling students since 2013. Under that framework, here's which students would be counted in the reported data as of January 1, 2018.
To the extent practicable, providers should strive to have reporting dates that are not close to the final measurement dates for cohorts. If that is not avoidable, a provider has the option to decide in what reporting year to include programs that have anticipated completion dates close to the reporting date. This is done to ensure there is enough time to properly tabulate results. For example, students and employers whose satisfaction scores can be tracked until December 31, 2016, may not have collected all the data necessary for reporting results on January 1, 2017. In this case, that program can report its results on January 1, 2018.

REPORTING LEVEL
Satisfaction scores must be reported separately for each program and level within it. Online-only programs can be combined across campuses, but in-person offerings should be reported separately. The only exception would be multiple locations for a program in the same metropolitan area, which can be combined.

Aggregation
We recommend that programs that produce fewer than 30 learners should follow the following guidelines for aggregation. These do not propose combining results for in-person programs across any areas except those within the same metro area.

- Combine the same program across up to five years until reaching a minimum size.
- If that does not work, combine closely related programs across the same year until reaching a minimum size.
- If that does not work, combine closely related programs across multiple years until reaching a minimum size.

One other caveat—graduate-level programs should never be combined with undergraduate-level programs.

Subpopulations
Every learner-based retrospective satisfaction rate should be broken down by graduates versus dropouts. This is necessary to reflect the high likelihood that dropouts will have a less positive impression of a program and thus skew results downward. Employer satisfaction surveys should only be handed out to those who hire graduates of a program.

Where sample sizes are large enough, programs should also report results for graduates and dropouts broken down by the following categories:
- Socioeconomic status
- Full- or part-time attendance intensity
- Whether they already possess bachelor's degrees or higher
- Race
- Gender

Results do not need to be reported across categories (e.g., placement rates for white men) due to cell size concerns.

Subpopulations should follow the same aggregation process outlined above to generate adequate sample sizes. If none of these produce a sufficiently large number of learners, then the provider should at least report a provider-wide rate for a campus location.

BENCHMARKING
To establish a benchmark for satisfaction, we must first understand students’ purpose for attending, expectations, and desired outcomes. Upon admission to a program, but prior to beginning, students should complete an intake survey to capture why they are enrolling and what they hope to accomplish.
Upon completion of a program, this framework recommends two types of satisfaction measurements; one for students and another for employers who have hired program graduates.

**POST-SEPARATION SURVEY LEVELS**  
Below are suggestions for different levels of quality satisfaction surveys, ranked in ascending order.

*Not meeting standards*  
Any of the below are insufficient for measuring student satisfaction:

- End of course surveys
- Instructor surveys
- Any survey that lacks analyses for non-response bias and a rigorous, vetted methodology put together by an independent third party

*Acceptable evidence*  
These should follow a similar approach to the one used for a net promoter score, which relies on a single, clear question. Alternative follow-up questions with more detail may have some utility, but are not contemplated here.

In this case, the survey would look something like the below:
Strong evidence
These surveys combine the retrospective satisfaction score with a few additional questions added.

Additional student questions:

<table>
<thead>
<tr>
<th>QUESTION</th>
<th>SCORE RANGE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Did this program fulfill your purpose for attending?</td>
<td>1 to 5</td>
</tr>
<tr>
<td>Did this program meet your expectations/desired outcomes?</td>
<td>1 to 5</td>
</tr>
<tr>
<td>If you secured a new job after completing this program, do you believe it was a direct result of having completed the program?</td>
<td>Yes, No, Don't Know</td>
</tr>
<tr>
<td>Was this program required for you to obtain this job?</td>
<td>Yes, No, Don't Know</td>
</tr>
<tr>
<td>How well did the program prepare you for this job?</td>
<td>1 to 5</td>
</tr>
</tbody>
</table>

Additional employer questions:

<table>
<thead>
<tr>
<th>QUESTION</th>
<th>RESPONSE TYPE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Was program completion the deciding factor in the hiring or promoting of this individual?</td>
<td>Yes, No, Don't Know</td>
</tr>
<tr>
<td>Was the program relevant to placement in this job?</td>
<td>Yes, No, Don't Know</td>
</tr>
<tr>
<td>How well prepared was the graduate for this job?</td>
<td>1 to 5</td>
</tr>
</tbody>
</table>

Ideal evidence
All of the above, executed and validated by an independent third party.