**Admission Hold Request**

A program planning to not enroll students/interns for a period of time must submit an Admission Hold Request in order to maintain the program’s accreditation status per ACEND Policy on Admission Holds. An Admission Hold Request must be submitted electronically to acendreports@eatright.org as described in ACEND’s Guidelines for Requesting Substantive Changes posted on the ACEND website: [Policy and Procedures](http://www.eatrightpro.org/resources/acend/accreditation-standards-fees-and-policies/policy-and-procedures). Revised 6/2024

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| --- | --- |
| **Date:** |  |
| **Program name and type:** |  |
| **Sponsoring institution:** |  |
| **City:** |  | **State:** |  |

**Directions:** Provide a narrative in the boxes below and supporting documentation.

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| 1. Explain why the program is requesting not to admit students/interns.
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| 1. State the effective date and length of time that the program will not be admitting students/interns.
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| 1. Attach a list of students/interns currently enrolled in the program that includes all of the courses and/or rotations that each enrolled student/intern must complete for graduation/program completion and date of expected completion.
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| 1. Explain the plans to ensure all currently enrolled students/interns will be provided the opportunity to complete program requirements as planned.
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| 1. Explain the adequacy of resources (administrative, technical, and IT support, financial, physical facilities, learning resources, support services, faculty and preceptors, if applicable) available to enrolled students/interns during the time the program is not accepting students/interns.
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| 1. Describe how prospective and enrolled students/interns will be informed that the program is not admitting students for a period of time. Attach a copy of all communications that were provided to prospective and enrolled students about the program’s admission hold, including website information.
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| 1. Explain the program’s plans to maintain program management activities during the admission hold period, including data collection for the Program Evaluation Plan and student learning assessment, and maintenance/updates to program information to the public, policies and procedures.
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***Signatures may be presented as an electronic signature or scanned.***

**Program Director:**

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| Name: | Title: |
|  |  |
| Signature | E-mail Address |
|  |
| **Administrator (program director’s supervisor):**  |
|  |  |
| Name: | Title: |
|  |  |
| Signature | E-mail Address |