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May 7, 2019

Dr. Armeda Wojciak  
Marriage and Family Therapy Program  
University of Iowa (PhD)

Dear Dr. Wojciak:

The Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE), at its April 12-13, 2019 meeting, reviewed the Marriage and Family Therapy (PhD) program at University of Iowa for Initial Accreditation. This review included consideration of the program's Eligibility Criteria, Self-Study, COAMFTE's Self-Study Review Letter, Program's Additional Information, Site Visit Report, Program's Response to Site Visit Report, and any additional materials submitted by the program.

The Commission voted to grant Initial Accreditation for a period of six (6) years, May 1, 2019 - May 1, 2025, with **Stipulations** on the following Key Elements:

Key Element III-D  
Key Element III-F

Key Element III-H  
Key Element IV-C

The Commission's review of the program's Renewal of Accreditation materials is below:

## **ELIGIBILITY CRITERIA**

### **Commission's Response:**

The program provided sufficient information to meet all the Eligibility Criteria.

## **STANDARD I: OUTCOME-BASED EDUCATION**

### **Key Element I-A: Outcome-Based Education Framework**

*The program has an overall outcome-based education framework that includes the following:*

- *A description of the program's mission, and how it fits with the larger institutional setting of the program.*

- *Specific program goals (which describe broad aspirations for the program and for students/graduates of the program) are clearly derived from the program's mission and that promote the development of Marriage and Family Therapists (including knowledge, practice, diversity, research, and ethics competencies).*
- *Measurable Student Learning Outcomes (SLOs) for each program goal.*
- *Programs must include SLOs that measure student/graduate achievement appropriate to the program's mission and goals.*
- *Specific assessment measures for operationalizing the achievement of Student Learning Outcomes (including student/graduate achievement) including targets and benchmarks. Measurement includes assessment of students' academic and professional competencies by the faculty and others, appropriate to the program's mission, goals, and outcomes.*

**Commission's Response:**

The program meets the requirements of this Key Element. The program provided evidence of a mission statement, goals, and student learning outcomes that clearly fit within the institutional setting of the program and promote the development of MFTs. In addition, they have measurable student learning outcomes for each program goal and appropriate assessments.

**Key Element I-B: Assessment Plan with Mechanisms and Timeline**

*The program has an overall assessment plan that includes:*

- *Mechanisms in place for evaluating/reviewing the Student Learning Outcomes, including student/graduate achievements (utilizing specific measures identified in I-A).*
- *Mechanisms in place for evaluating student support services; curriculum and teaching/learning practices; fiscal and physical resources; technological resources; and instructional and clinical resources to determine sufficiency for attainment of targeted program outcomes.*
- *An assessment plan and corresponding timeline that addresses when, from whom, and how data is collected, and a description of how data will be aggregated and analyzed and the findings used for program improvement (feedback loop). The assessment plan should include a specific description of how the program will review and revise, as needed, their overall outcome-based education framework and assessment plan.*
- *The assessment plan must incorporate feedback from Communities of Interest (as defined in Key Element I-C).*

**Commission's Response:**

The program meets the requirements of this Key Element. The program provided evidence of an assessment plan that encompasses evaluation of resources, student learning outcomes, and student/graduate achievement. In addition, this plan specifies persons responsible for collection, aggregation, and analysis of data. Finally, the assessment plan incorporates feedback from Communities of Interest.

### **Key Element I-C: Communities of Interest**

*The program identifies its Communities of Interest, obtains formal and informal feedback from them, and describes how they inform the program's mission, goals, and Student Learning Outcomes. Communities of Interest vary according to the program's mission, goals, and outcomes and may include, but are not limited to, students, administrators, faculty, supervisors, consumers, graduates, potential employers, germane regulatory bodies, germane private and public funding sources, and diverse, marginalized, and/or underserved groups within these communities.*

#### **Commission's Response:**

The program meets the requirements of this Key Element. The program provided evidence of collecting and incorporating feedback from their Communities of Interest into their mission, goals, and outcomes.

## **STANDARD II: COMMITMENT TO DIVERSITY AND INCLUSION**

### **Key Element II-A: Multiculturally-informed Education Approach**

*The program has a multiculturally-informed educational approach that includes:*

- 1) specific program goals with specific Student Learning Outcomes reflecting a commitment to diversity and inclusion;*
- 2) an overarching definition of diversity; and*
- 3) curriculum elements with accompanying teaching/learning practices consistent with the program's mission. The educational approach includes the teaching of ideas and professional practices for MFTs that address a range of diversity, including (but not limited to) race, age, gender, ethnicity, sexual orientation, gender identity, socioeconomic status, disability, health status, religious, spiritual, and/or political beliefs, nation of origin or other relevant social categories, immigration or language.*

#### **Commission's Response:**

The program meets the requirements of this Key Element. The program provided evidence of program goals and student learning outcomes reflecting a commitment to diversity and inclusion. Additionally, the program demonstrated how their curriculum and teaching/learning practices are consistent with the program's mission.

### **Key Element II-B: Program Climate of Safety, Respect, and Appreciation**

- The program has demonstrated systematic efforts and has an ongoing comprehensive strategy in place to attract and retain a diverse student body, faculty, and supervisors.*
- The program demonstrates a climate of safety, respect, and appreciation for all learners including those from diverse, marginalized, and/or underserved communities, and has mechanisms in place for evaluating the climate and responding to any feedback regarding the climate.*

**Commission's Response:**

The program meets the requirements of this Key Element. The program provided evidence of policies and initiatives aimed at creating a culture of safety for all learners. Additionally, they provided evidence of actions taken in response to feedback about climate. Finally, the program has initiatives in place to try and attract and retain a diverse group of students, faculty, and supervisors.

**Key Element II-C: Experience with Diverse, Marginalized, and/or Underserved Communities**

*The program demonstrates student experience in Couple or Marriage and Family Therapy practice with diverse, marginalized, and/or underserved communities. Experiences may include:*

- 1) *professional activities (such as therapy, research, supervision, consultation, teaching, etc.) with diverse, marginalized, and/or underserved communities; and/or*
- 2) *other types of activities (such as projects, service, interviews, workshops, etc.), as long as the program can demonstrate that the experience is directly related to MFT activities, and students are in interaction with members of these communities.*

**Commission's Response:**

The program meets the requirements of this Key Element. The program provided evidence of providing professional activities aimed at supporting students practice with the LGBTQIA+ community.

**STANDARD III: INFRASTRUCTURE AND ENVIRONMENTAL SUPPORTS**

**Key Element III-A: Fiscal and Physical Resources**

*The program demonstrates that fiscal and physical resources are sufficient to achieve the program's mission, goals, and outcomes. These resources are reviewed, revised as needed, and support program effectiveness.*

**Commission's Response:**

The program meets the requirements of this Key Element. The program provided evidence of fiscal and physical resources sufficient to meet the mission, goals, and outcomes. Additionally, they demonstrated a process by which they evaluate and revise resources as necessary.

**Key Element III-B: Technological Resources**

*The program demonstrates that technological resources (e.g., laptops, audio/visual equipment, EMRs and Billing Systems, Virtual Meeting Space) are secure, confidential, Health Insurance Portability and Accountability Act compliant (if relevant), and sufficient to achieve the program's mission, goals, and outcomes. These resources are reviewed, revised as needed, and support program effectiveness.*

**Commission's Response:**

The program meets the requirements of this Key Element. The program provided evidence that technology resources are secure, compliant, and sufficient to achieve the program's mission, goals, and outcomes. The program demonstrated a cycle of review and revision when necessary.

**Key Element III-C: Instructional and Clinical Resources**

*The program demonstrates that instructional and clinical resources (e.g., space, personnel, supplies) are sufficient to enable the program to meet the program's mission, goals, and outcomes. These resources are reviewed, revised as needed, and support program effectiveness.*

**Commission's Response:**

The program meets the requirements of this Key Element. The program provided evidence of instructional and clinical resources sufficient to meet the program's mission, goals, and outcomes. They also demonstrate a process of review and revision when necessary.

**Key Element III-D: Academic Resources and Student Support Services**

*The program demonstrates that academic resources (e.g., library, advising, writing centers) and student support services (e.g., access to counseling, financial advising) are accessible to students and sufficient to achieve the program's mission, goals, and outcomes. These resources are reviewed based on core faculty and student input, and the program takes action or advocates for institutional change to address areas required for program effectiveness.*

**Commission's Response:**

The program does not meet the requirements of this Key Element. The program indicated a process by which students are made aware of the resources available to them. Additionally, they have demonstrated clear mechanisms for eliciting faculty and student feedback specific to these resources. The program needs to provide evidence of a metric by which they define the difference between sufficiency and insufficiency for these resources. Additionally, the program needs to describe the process for advocating for institutional changes related to these resources when they are deemed insufficient.

**Key Element III-E: Faculty Qualifications & Responsibilities**

*The faculty roles, in teaching, scholarship, service, and practice are identified clearly and are congruent with the program's mission, goals, and outcomes.*

- *The faculty members are academically, professionally, and experientially qualified to achieve the program's mission, goals, and outcomes. The qualifications must be identified in documented descriptions of roles and responsibilities. Faculty members must have documented expertise in their area(s) of teaching responsibility and knowledge of the content delivery method (e.g., distance learning).*
- *The program must demonstrate that it has mechanisms for reviewing and evaluating faculty effectiveness in support of the program's mission, goals, and outcomes. Faculty evaluations include explicit links to the program's mission, goals, and outcomes.*

**Commission's Response:**

The program meets the requirements of this Key Element. The program provided evidence of faculty that are academically, professionally, and experientially qualified to achieve the mission, goals and outcomes. Additionally, they provided evidence of a process for evaluating faculty according to the required criteria.

**Key Element III-F: Faculty Sufficiency**

*The faculty must be sufficient in number with a faculty-student ratio that permits the achievement of the program's mission, goals, and outcomes and ensures that student educational needs are met. These resources are reviewed, revised as needed, and support program effectiveness.*

- *The program must have sufficient core faculty members who are knowledgeable and involved in ongoing program development, delivery, and evaluation required to achieve the program's mission, goals, and outcomes.*
- *The program must have a stated process for evaluation of ongoing sufficiency of faculty resources.*
- *The program must demonstrate there are sufficient faculty and effective linking mechanisms with feedback loops, such as regular coordination, meetings, and/or communication, to connect and involve all faculty members in the achievement of expected and actual Student Learning Outcomes of the program.*
- *The program is permitted to use a combination of full-time, part-time and/or multiple adjuncts.*

**Commission's Response:**

The program does not meet the requirements of this Key Element. The program indicated a clear process for evaluating the sufficiency of their faculty. Additionally, they have processes to include faculty in the achievement of students learning outcomes. However, it is unclear how the program would know they do not have a sufficient number of faculty to achieve their mission, goals, and outcomes. The program needs to provide evidence of a metric by which they define the difference between sufficient and insufficient number of faculty.

**Key Element III-G: Governance of Program**

*Roles of faculty and student participation in the governance of the program are clearly defined and enable the program to meet the program's mission, goals, and outcomes.*

*The program must describe decision-making processes and procedures at the program and institutional levels regarding the operation of the program that support program effectiveness.*

**Commission's Response:**

The program meets the requirements of this Key Element. The program provided evidence of faculty and student roles in governance that support the program in meetings its mission, goals, and outcomes.

**Key Element III-H: Supervisor Qualifications & Responsibilities**

*Supervisors must be AAMFT Approved Supervisors or meet the supervisor equivalency definition in the glossary. Supervisor roles, as distinguished from teaching faculty, are identified clearly and are congruent with the program's mission, goals, and outcomes.*

- *Supervisors are academically, professionally, and experientially qualified to achieve the program's mission, goals, and outcomes. The qualifications must be identified in documented descriptions of roles and responsibilities.*

- *If supervisor equivalency is used, there must be full disclosure to students in order for them to make informed decisions and evaluate regulatory implications for other states/provinces/locations.*

**Commission's Response:**

The program does not meet the requirements of this Key Element. The program indicated that all core faculty members who are responsible for supervision during practicum are AAMFT Approved Supervisors or Candidates. The program also indicated that some, but not all, students will continue to work with a clinical supervisor during their internship. It was not clear what credentials the clinical supervisors in internship must hold and how the program verifies these supervisors have the appropriate credentials. Additionally, it was not clear how the differences in the roles the faculty members are assuming when operating as teaching faculty is different/distinct from the roles they are assuming as supervisors and where these distinctions are documented. The program needs to provide evidence of the definition of clinical supervisors for internships and the credentials they are required to hold. The program needs to provide evidence of the process used to verify the supervisor credentials of clinical supervisor used during internships. Additionally, the program needs to describe how the supervisory role and teaching role of faculty are distinguished and how that information is communicated to students.

**Key Element III-I: Supervisor Sufficiency**

*Supervisors must be sufficient in number with a supervisor-student ratio that permits the achievement of the program's mission, goals, and outcomes, especially Student Learning Outcomes. Supervisory resources are reviewed, revised as needed, and support program effectiveness.*

- *The program must have a stated process for evaluation of ongoing sufficiency of supervisor resources.*
- *The program must demonstrate there are sufficient and effective linking mechanisms with feedback loops, such as regular coordination, meetings, and/or communication, connecting and involving all supervisors in the achievement of expected and actual achievement of Student Learning Outcomes within the program.*

**Commission's Response:**

The program meets the requirements of this Key Element. The program provided evidence of a process for evaluating supervisor sufficiency and a process for communicating with supervisors and involving them in the achievement of student learning outcomes.

**STANDARD IV: CURRICULUM**

**Key Element IV-A: Curriculum and Teaching/Learning Practices**

*The program must provide:*

- *A description of the logical sequencing of the curriculum and practice components, including rationale for how the program's goals and accompanying Student Learning Outcomes fit within the program offered (e.g., where goals and outcomes are addressed and assessed within the curriculum).*

- *A description of key teaching/learning practices used to accomplish program goals, and Student Learning Outcomes.*
- *A description of processes and procedures to ensure and monitor student progress and completion of requirements.*
- *A description of governance processes and procedures for designing, approving, implementing, reviewing, and changing the curriculum.*

**Commission's Response:**

The program meets the requirements of this Key Element. The program provided evidence of logically sequenced curriculum and practice components and key teaching/learning practices that are inclusive and supportive of the program goals and student learning outcomes. Additionally, the program provided evidence of a process to monitor student progress. Finally, the program provided evidence of a process for reviewing and revising curriculum with evidence of implementation.

**Key Element IV-B: Foundational and Advanced Curricula**

*Advanced Curriculum*

*The advanced curriculum advances knowledge and skill by addressing the curricular areas below.*

- *Doctoral degree programs demonstrate that they offer course work in all the Advanced Curricular Areas (ACA) that make up the advanced curriculum.*
- *Post-degree programs may offer components of the advanced curriculum.*
- *Within each area, the balance of skills and competencies developed should be appropriate to the program's mission, goals, and outcomes as well as the program's local context.*
- *Programs may emphasize some of the areas more than others and include other areas that are consistent with their program's mission, goals, and outcomes.*

*ACA 1: Advanced Research*

*This area facilitates students in developing competencies in: a) advanced research, including demonstrated proficiency in quantitative methods and analysis techniques, qualitative methods and analysis techniques, or mixed methods and analysis techniques appropriate to carrying out research in relationships; b) demonstrated working knowledge of other methodologies and analysis techniques outside of their proficiency area (e.g., if a student decides to become proficient in quantitative methods, s/he will have a working knowledge of qualitative methods as well); c) demonstrated understanding of the theoretical complexity of change within relationships and how this complexity informs research; d) understanding and demonstrated sensitivity to and awareness of how issues of diversity in terms of culture, gender, sexual orientation, age, SES, etc. play a role in their choice of research topics and their conduct of research activities; and e) students should have opportunities to participate in grants and grant-writing activities, and in the publication and presentation of research material.*

*ACA 2: Advanced Relational/Systemic Clinical Theory*

*This area facilitates students developing advanced clinical competencies including: a) demonstrating an advanced understanding and application of multiple family and couple models and empirically-supported interventions; b) skill in working with diverse populations across the lifespan through direct clinical work or in supervision of the therapy of others; c) demonstration of an awareness of cultural*

*issues, differences, and personal blind spots in their clinical and supervisory work; and d) development of a specialized clinical area that is grounded in research and is at an advanced level of intervention and understanding.*

**ACA 3: Advanced Relational/Systemic Applications to Contemporary Challenges**

*This area facilitates the development of leading-edge professionals who develop relational/systemic innovations. This includes application to controversial moral and advanced ethical dilemmas, international, cross-cultural, and multicultural issues in Couple or Marriage and Family Therapy professional roles, responsibilities, practices, and applications to other contemporary problems. This area also includes a focus on family policy and/or family law.*

**ACA 4: Foundations of Relational/Systemic Teaching, Supervision, Consultation, and/or Leadership**

*This area facilitates the development of competencies in relational/systemic teaching, supervision, and/or MFT consultation. This may include educational/learning theories, relevant research, multicultural content, evaluation and assessment methods, ethics and professional issues, and personal philosophy. This area also addresses administrative competencies including program development and policy, leadership roles and evaluation of MFT educational and service-oriented institutions and agencies. Students who intend to teach at the higher education level will develop and apply a teaching philosophy, as well as demonstrate the capacity to develop and apply course evaluation methods and Student Learning Outcomes. All students will demonstrate skills in clinical supervision. Students who have teaching opportunities in formal or informal settings will demonstrate a sensitivity to issues of diversity in the material they teach, to the persons they are teaching, and in the ways in which information and correction is provided.*

**Commission's Response:**

The program meets the requirements of this Key Element. The program provided evidence of the advanced curricular areas being covered by their curriculum.

**Key Element IV-C: Foundational and Advanced Application Components**

*The program must demonstrate they offer an application component with appropriate placement in the curriculum, duration, focus, and intensity consistent with their program's mission, goals, and outcomes.*

Advanced Practical Experience Component

- *Programs that teach the advanced curriculum must offer the advanced experience component.*
- *Areas include selected experiences consistent with the program's mission, goals, and outcomes in any of the following: advanced research, grant-writing, teaching, supervision, consultation, advanced clinical theory, clinical practice/innovation, program development, leadership, or policy. In addition, programs may offer experiences in presenting and professional writing.*
- *The program must demonstrate appropriate and adequate mentoring of students during the experience.*
- *The advanced experiences offered by doctoral degree programs must address a minimum of two of the areas noted above and combined be over a minimum of 9 months.*

- *The advanced experiences offered by post-graduate programs must address a minimum of one area and combined be over a minimum of 6 months.*

**Commission's Response:**

The program does not meet the requirements of this Key Element. The program indicated an advanced practical experience component consistent with their mission, goals, and outcomes. The program provided evidence of a process to evaluate the sufficiency of the mentorship being received. The program clearly indicated that the advanced practical experience component does not always consist of a clinical element. However, it was unclear in the instances that the student is engaged in advanced clinical training, what the role of the mentor at the site includes. Specifically, it was unclear if the mentor at the site provides clinical supervision in those cases. The program needs to provide evidence of the distinction between the role of the faculty member who oversees the student during internship and the on-site mentor. The program is asked to define the role of the on-site mentor and to clarify if those on-site mentors provide any supervision of the student's clinical work.

**Key Element IV-D: Program and Regulatory Alignment**

*The program demonstrates that graduates have met educational and clinical practice requirements (e.g., coursework, clinical experience, and supervision) that satisfy the regulatory requirements for entry-level practice in the state, province, or location in which the program physically resides or in which the student intends to practice. Programs must also document that students are informed (e.g., demonstrate review of appropriate regulatory sites or licensing laws) about the educational, clinical, and regulatory requirements for entry-level practice in the state, province, or location in which each student resides or intends to practice.*

**Commission's Response:**

The program meets the requirements of this Key Element. The program provided evidence of a process by which they help the students determine if they meet the requirements for entry-level practice in the location the program resides or another state the student is interested in. The program provided links to information about regulatory requirements for other locations.

**Key Element IV-E: Curriculum/Practice Alignment with Communities of Interest**

*The program demonstrates that it considers the needs and expectations of identified Communities of Interest in developing and revising its curriculum and application component.*

**Commission's Response:**

The program meets the requirements of this Key Element. The program provided evidence of considering the needs of Communities of Interest in the development and maintenance of their curriculum.

## **STANDARD V: PROGRAM EFFECTIVENESS AND IMPROVEMENT**

### **Key Element V-A: Demonstrated Student/Graduate Achievement**

*The program provides aggregated data regularly collected on student/graduate achievement.*

#### **Commission's Response:**

The program meets the requirements of this Key Element. The program provided evidence of regularly collected aggregated data on student/graduate achievement.

### **Key Element V-B: Demonstrated Achievement of Program Goals**

*The program describes how data was analyzed and provides aggregated data that demonstrates achievement of each program goal via data from measured Student Learning Outcomes, based on targets and benchmarks provided in the program's outcome-based education framework—data from Student Learning Outcomes demonstrate that the program is meeting program goals.*

#### **Commission's Response:**

The program meets the requirements of this Key Element. The program provided evidence of aggregated data that supported the achievement of their program goals and identified plans for addressing areas of deficiency.

### **Key Element V-C: Demonstrated Achievement of Faculty Effectiveness**

*The program must demonstrate faculty effectiveness in achieving the program's mission, goals, and outcomes.*

- *The program provides aggregated data that demonstrates the Program Director provides effective leadership for the program to achieve its program's mission, goals, and outcomes.*
- *The program provides aggregated data that demonstrates the performance and achievements of faculty that support attainment of the program's mission, goals, and outcomes.*

#### **Commission's Response:**

The program meets the requirements of this Key Element. The program provided evidence of aggregated data that demonstrates the program director and faculty are effectively supporting the mission, goals, and outcomes of the program.

### **Key Element V-D: Demonstrated Program Improvement**

*The program demonstrates how evidence is used to maintain the achievement of Student Learning Outcomes and/or foster program improvement with plans for future improvement based on the evidence. Evidence includes but is not limited to findings regarding program goals and outcomes, student/graduate achievement, Communities of Interest, and evaluations (as described in the assessment plan) of curriculum and teaching/learning practices; fiscal and physical resources; technological resources; instructional and clinical resources; academic resources; and student support resources. Data should demonstrate that the program is meeting its goals and outcomes, especially specified targets and benchmarks and if not, what plans the program has for meeting or modifying its goals.*

**Commission's Response:**

The program meets the requirements of this Key Element. The program provided evidence of a process that allows them to use evidence collected to support the program in meeting its student learning outcomes or to make necessary improvements.

***NOTE: Consistent with the COAMFTE Corrective Action Policy (COAMFTE Accreditation Manual: Policies and Procedures, pp. 20-21), COAMFTE accredited programs carrying stipulations will have a maximum of two years from the date of stipulation to come into compliance with the standards. Year One will include Imposing of Stipulations; Year Two will include Probation and hosting a Focused Site Visit. Programs that fail to rectify such compliance issues will be subject to revocation of accreditation status at the beginning of Year Three.***

***Please note that the program is now in its Year 1 – Impose Stipulations stage. Consistent with the Corrective Action Policy, programs must submit a compliance report addressing deficiencies by the noted deadline, review accreditation materials, and consult with Accreditation Staff. Additionally, it is recommended that the program attend accreditation trainings and seek consultation from an external consultant (a list of consultants can be obtained from the Accreditation Office).***

***Programs may elect to submit their response to stipulations earlier, for an interim review, to clear their stipulations. The interim response can only be submitted during the first year of the Corrective Action Policy. Following the interim response, programs will continue to report on the established timeline. Programs interested in submitting an interim response should contact COAMFTE staff to confirm the submission deadline.***

Program's Response to Stipulations Instructions:

- 1) Program's response should address all Key Elements that have Stipulations and include definition of all referenced Key Elements.
- 2) Program's response should not refer to previously submitted documents (Eligibility Criteria, Self-Study, appendices, etc.).
  - *Programs may provide additional information as supporting evidence of the program's response.*
- 3) Program's Response to Stipulations and any supporting documentation must be in one document, in a PDF format with bookmarks linked to the individual components. The bookmarks MUST follow the order of the individual components. The PDF document must not exceed 30 MB in size.
- 4) Program's Response to Stipulations must be submitted on or before the due date to [coa@aamft.org](mailto:coa@aamft.org).

The following documents must be submitted in the required format by the noted deadlines:

<b>Document</b>	<b>Submission Deadline</b>
<i>Interim Response to Stipulations (optional)</i>	<i>July 31, 2019</i>
Response to Stipulations	January 31, 2020
Annual Report	

In accordance with COAMFTE policy, the program will need to submit an Annual Report on January 31<sup>st</sup> of every year of your accreditation term.

Please feel free to contact the Accreditation Office by e-mail at [coa@aamft.org](mailto:coa@aamft.org) or by phone at (703) 253-0448 if you have further questions or if you would like any additional information.

Sincerely,



Dale Hawley, PhD  
COAMFTE Chair



Tanya A. Tamarkin  
Director of Accreditation