



NAACLS Accreditation Application Packet

Dear Program Director,

Welcome to the NAACLS Accreditation Application Packet. This document is designed to gather important administrative information and determine a program's likelihood of complying with the standards. the process of demonstrating compliance with NAACLS Standards. If you are a program director of the biological medical sciences (BMS), doctorate in clinical laboratory sciences (DCLS), or non-USA program, please reach out to NAACLS Staff before starting the application packet. All items must be complete before the application packet is submitted. NAACLS depends on volunteer content experts to review all documents. As a result, materials such as the application packet may take up to two months to review.

1. Adobe Acrobat Required:

This template must be opened in Adobe Acrobat. Most computers' default setting is to open PDFs in a web browser. PDFs opened in a web browser will not have the functionality to complete the application packet.

To ensure you're using Adobe Acrobat:

- Right-click on the file.
- Select "Open with" from the menu.
- Choose "Adobe Acrobat" from the list of programs.

[If Adobe Acrobat is not installed, download Adobe Acrobat Reader DC for free.](#)

2. Required Information:

Please download the Standard Compliance Guide (SCG) for important information to include in your narrative and documentation. The bulk of the SCG is dedicated to the Self-Study Report and site visit. The information in this section be helpful, but review of this section is not necessary at this time. Please visit the "Preliminary Reports Requirements" in the "Compliance Requirements for Additional Reports" section of the compliance guide.

In the template there are areas in blue for you to provide narratives. The areas to attach/pin documentation are gray. The narrative boxes remain blue.

Please be mindful of how you label documents. Additional details can go a long way in assisting our volunteer application packet reviewer. For example, instead of "Affiliate1.docx," consider "StandardIBG_MercyHospitalNorthWestAgreement.docx." These extra details save our volunteers a lot of time as they double-check and cross-reference documentation.

Please pin all required documents within the gray boxes provided. For standards with multiple documents, do not "stack" attachments on top of each other. This can hide documentation and lead to concerns within an application packet.



NAACLS Accreditation Application Packet

3. Attaching Documents:

To add attachments to Adobe Acrobat Reader, please see the following steps:

- Open the Accreditation Application Packet in Adobe Acrobat Reader.
- Locate the floating vertical toolbar to the left of the program.
 - You will see the following icon buttons on the toolbar: arrow, comment bubble, highlighter, lasso, and fountain pen.
- Locate the comment bubble button and click the black arrow in the bottom right corner of the button.
- You will see multiple options to replace the comment bubble in the toolbar.
- Select the comment bubble with a paper clip.
- Press the paper clip button to use your cursor to place attachments.
- Make sure attachments are not stacked on top of each other.
- You may move attachments by selecting the arrow button.

On-demand demonstration: Every month, NAACLS has interactive virtual sessions called Dr. NAACLS that are available for free. NAACLS hosted a Dr. NAACLS session that featured a demonstration on downloading, saving, and opening the Self-Study Template. Additionally, there was a demonstration of how to attach files to a PDF. The NAACLS Self-Study Template functions similarly to this template. The instructions in that video will be beneficial to you for working with this template. [If you need additional guidance, we recommend watching this video.](#)

4. Glossary of Terms:

Refer to the glossary in the NAACLS Standards Compliance Guide for commonly used NAACLS terminology.

5. Support Available:

- For standard compliance questions, contact a discipline lead person (DLP).
- For other questions, contact NAACLS Staff.

Your dedication to maintaining high standards in laboratory science education is appreciated. Let's begin with the Accreditation Application Packet.



NAACLS Accreditation Application Packet

Contents

Application	4
Program Information.....	4
Faculty and Administration Information.....	5
Program Details.....	6
Letter of Intent	6
Preliminary Report	7
Introduction.....	7
Standard I: Sponsorship	7
Standard II: Assessment and Continuous Quality Improvement	9
Standard III: Resources	10
Standard IV: Students	11
Standard V: Operational Policies	12
Standard VII: Program Administration.....	12
Standard VIII: Curriculum Requirements	17



NAACLS Accreditation Application Packet

Application

Program Information

Program Sponsor: _____

Program Type:

BMS ☐ CG ☐ DMS ☐ HT ☐ HTL ☐ MLA ☐
MLM ☐ MLS ☐ MLT ☐ Path A ☐ PHM ☐ PBT ☐

Program Address: _____

Program Location (City, State, Zip): _____

Institution Type:

- ☐ Hospital or Medical Center
- ☐ Academic Health Center/Medical School
- ☐ Two-Year College or University
- ☐ Four-Year College or University
- ☐ Independent Laboratory or Non-Hospital Healthcare Facility
- ☐ Blood Center
- ☐ Military Facility
- ☐ Non-Degree Granting Proprietary Program

Institutional Control:

- ☐ State, County or Local Government
- ☐ Non-Profit (private or religious)
- ☐ For Profit
- ☐ Federal Government



NAACLS Accreditation Application Packet

Faculty and Administration Information

Program Director Information:

Name/Credentials: _____

Phone: _____

Email: _____

Mailing Address: _____

City, State, and Zip Code: _____

President/CEO Information:

Name/Credentials: _____

Phone: _____

Email: _____

Mailing Address: _____

City, State, and Zip Code: _____

Dean Information:

**For institution types (hospital-based, military, etc.), please identify a comparable administrator.*

Name/Credentials: _____

Phone: _____

Email: _____

Mailing Address: _____

City, State, and Zip Code: _____

Medical Director Information:

**Medical director is required for Path A programs only. See the NAACLS Standards for details.*

Name/Credentials: _____

Phone: _____

Email: _____

Mailing Address: _____

City, State, and Zip Code: _____



NAACLS Accreditation Application Packet

Education Coordinator Information:

**Education coordinator may be required for HT, HTL, MLM, Path A programs only. See the NAACLS Standards for details.*

Name/Credentials: _____

Phone: _____

Email: _____

Mailing Address: _____

City, State, and Zip Code: _____

Program Site Administrator Information:

**Program site administrator required for partnerships only. See the NAACLS Standards for details.*

Name/Credentials: _____

Phone: _____

Email: _____

Mailing Address: _____

City, State, and Zip Code: _____

Program Details

Length of Program: _____

Month(s) Program Begins: _____

Award(s) Program Grants: _____

Average Tuition: _____

Maximum Enrollment: _____

Month and Year of First Graduating Class: _____

Month and Year of First Accepting Students: _____

Program Homepage URL: _____

Letter of Intent

Please include Letter of Intent in this gray box provided.



NAACLS Accreditation Application Packet

Preliminary Report

Introduction

Please introduce us to your program! The Preliminary Report will get into more specifics so please feel free to review what will be provided later. However, a general overview in your own words is very helpful for NAACLS Volunteers as they begin their review. Please include a brief history of the program, as well as any information you believe may aid reviewers.

Standard I: Sponsorship

Narrative for Preliminary Report:

Clinical/Applied Learning Affiliates and Student Capacity: Describe how your clinical/applied learning affiliate sites will accommodate projected student numbers.



NAACLS Accreditation Application Packet

Accompanying Documentation for Preliminary Report:

Institutional Accreditation/Certification: Provide copies of award letters and/or certificates as proof of current sponsoring institution accreditation/certification by a regional or national agency (see NAACLS Standard Compliance Guide for recognized accreditors/certifiers).

Please include all documentation in this gray box provided. Please ensure that attachment pin placements are easily identifiable by the reviewers.

Sponsorship Affiliations: Provide letters of intent, signed affiliation agreements or memorandums of understanding (MOUs) from proposed clinical sites, which will accommodate projected numbers of students accepted into the program.

Affiliate (Name, City and State) <i>Check if Clinical (C) or Academic (A)</i>		Letter of Intent, Signed Affiliation Agreement or MOU
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NAACLS Accreditation Application Packet

Standard II: Assessment and Continuous Quality Improvement

Narrative for Preliminary Report:

Assessment Plan: Summarize a documented plan for continuous and systematic assessment of program effectiveness and continuous improvement.

Responsible Individuals

Identified Processes

Assessment Schedule/Timeline (containing identified assessment methods)



NAACLS Accreditation Application Packet

Modification and Improvement: Describe the process of program modification and how changes are assessed for effectiveness of implemented changes.

Accompanying Documentation for Preliminary Report:

No documentation necessary for this standard.

Standard III: Resources

Narrative for Preliminary Report:

Physical Resources: Describe facilities, equipment, and supplies sufficient to achieve program goals.



NAACLS Accreditation Application Packet

Accompanying Documentation for Preliminary Report:

Financial Resources: Program budget or letter of financial support.

Please include all documentation in this gray box provided. Please ensure that attachment pin placements are easily identifiable by the reviewers.

Standard IV: Students

Narrative for Preliminary Report:

Publications and Disclosures: Describe how you will disclose admission criteria, essential functions and student outcome measures to students.

Accompanying Documentation for Preliminary Report:

Program Goals: Please provide program goals that will align, correlate, and support NAACLS entry-level competencies including both core and unique standards for the profession.

Please include all documentation in this gray box provided. Please ensure that attachment pin placements are easily identifiable by the reviewers.



NAACLS Accreditation Application Packet

Standard V: Operational Policies

Narrative for Preliminary Report:

Students: Describe student recruitment, processing of applications, and selection of students appropriate to the size and scope of the program.

Accompanying Documentation for Preliminary Report:

No documentation necessary for this standard.

Standard VII: Program Administration

Narrative for Preliminary Report:

Faculty/Personnel Plan: Describe the faculty/personnel plan (additional faculty positions if appropriate) adequate to support the number of students proposed in the program and to achieve the program goals.



NAACLS Accreditation Application Packet

Advisory Committee: Describe the membership of the advisory committee which provides input into the program/curriculum to maintain relevancy and effectiveness.

Narrative for Preliminary Report:

For the following Program Director Approval Section, NAACLS Staff encourages applicants to review the “Program Official Approval Requirements” in the Standard Compliance Guide. If you have been previously approved as a program director of a NAACLS Accredited program, please attach approval letter here and skip to Standard VIII. Otherwise, please continue with the program director sections below.

Please include all documentation in this gray box provided. Please ensure that attachment pin placements are easily identifiable by the reviewers.

Program Director: Please describe the program director’s qualifications.



NAACLS Accreditation Application Packet

Program Director: Please describe how the applicant has gained teaching experience and knowledge.

Program Director: Please describe how the applicant has gained experience in educational methodology.



NAACLS Accreditation Application Packet

Program Director: Please describe how the applicant has gained knowledge in the NAACLS accreditation process.

Accompanying Documentation for Preliminary Report:

Program Director: Please provide a curriculum vitae.

Please include all documentation in this gray box provided. Please ensure that attachment pin placements are easily identifiable by the reviewers.

Program Director: Please provide proof of required teaching experience.

Please include all documentation in this gray box provided. Please ensure that attachment pin placements are easily identifiable by the reviewers.

Program Director: Please provide proof of required educational methodology and administration knowledge.

Please include all documentation in this gray box provided. Please ensure that attachment pin placements are easily identifiable by the reviewers.

Program Director: Please provide proof of knowledge of NAACLS Accreditation procedures.

Please include all documentation in this gray box provided. Please ensure that attachment pin placements are easily identifiable by the reviewers.



NAACLS Accreditation Application Packet

Program Director: Please provide proof of the applicant has completed the required amount of professional development.

Please include all documentation in this gray box provided. Please ensure that attachment pin placements are easily identifiable by the reviewers.

Program Director: Certification transcripts.

Proof of ASCP BOC/ASCPⁱ BOC certification or relevant certification, licensure or recognition must be sent directly from the primary source to Jessy Jasso.

If emailed, please send to POForms@naaccls.org.

If electronic documents are not available, please have the primary source send the documents to NAACLS, Attn: Jessy Jasso, 5600 N River Road, Suite 720, Rosemont, IL 60018.

Program Director: Education transcripts.

Education transcripts must be sent from the primary source to Jessy Jasso.

If emailed, please send to POForms@naaccls.org.

If electronic documents are not available, please have the primary source send the documents to NAACLS, Attn: Jessy Jasso, 5600 N River Road, Suite 720, Rosemont, IL 60018.

Program Director: Recommendation letters.

Recommendation letters must be sent from the primary source to Jessy Jasso.

If emailed, please send to POForms@naaccls.org.

If electronic documents are not available, please have the primary source send the documents to NAACLS, Attn: Jessy Jasso, 5600 N River Road, Suite 720, Rosemont, IL 60018.

Staff Use:

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NAACLS Accreditation Application Packet

Education Coordinator: If an education coordinator is necessary for your program, please provide a completed [Program Official Approval Form](#). For questions about whether an education coordinator is necessary please see the NAACLS Standards.

Please include all documentation in this gray box provided. Please ensure that attachment pin placements are easily identifiable by the reviewers.

Medical Director: If a medical director is necessary for your program, please provide a completed [Program Official Approval Form](#). For questions about whether a medical director is necessary please see the NAACLS Standards.

Please include all documentation in this gray box provided. Please ensure that attachment pin placements are easily identifiable by the reviewers.

Standard VIII: Curriculum Requirements

Narrative for Preliminary Report:

Program and Course Description: Describe the proposed length of program, program tracks and rationale for course sequencing.



NAACLS Accreditation Application Packet

Accompanying Documentation for Preliminary Report:

Program and Course Description: Provide a plan of study that contains all courses required, including prerequisites, in recommended sequence for completion of the degree or certificate.

Please include all documentation in this gray box provided. Please ensure that attachment pin placements are easily identifiable by the reviewers.

Program Specific Courses: Provide course syllabi including course descriptions, measurable student learning outcomes.

Please include all documentation in this gray box provided. Please ensure that attachment pin placements are easily identifiable by the reviewers.

Instructional Areas: Provide evidence of learning in the cognitive, affective and psychomotor domains.

Please include all documentation in this gray box provided. Please ensure that attachment pin placements are easily identifiable by the reviewers.

Instructional Areas: Provide evidence that all the instructional areas delineated in Standard VIII.A, specific for the level of program, are included in the curriculum.

Please include all documentation in this gray box provided. Please ensure that attachment pin placements are easily identifiable by the reviewers.

Evaluation: For one content area, provide examples of learning materials/activities and evaluation tools that align with identified program outcomes. Include learning objectives for cognitive, psychomotor and affective domains. The example might include multiple modalities like lecture materials, case studies, a laboratory activity, exams, and checklists.

Please include all documentation in this gray box provided. Please ensure that attachment pin placements are easily identifiable by the reviewers.