February 26, 2020

Mr. Steven Bloomberg
President
Southeast Arkansas College
1900 Hazel Street
Pine Bluff, AR 71603

Certified Mail
Return Receipt Requested
7018 0360 0000 7852 6416

RE: **Final Program Review Determination**
OPE ID: 00570700
PRCN: 201920629982

Dear Mr. Bloomberg:

The U.S. Department of Education's (Department's) Dallas School Participation Division issued a program review report on July 23, 2019 covering the Southeast Arkansas College's (SAC's) administration of programs authorized pursuant to Title IV of the Higher Education Act of 1965, as amended, 20 U.S.C. §§ 1070 et seq. (Title IV, HEA programs), for the 2017-2018 and 2018-2019 award years. The institution's final response was received on January 24, 2020.

The Dallas School Participation Division has reviewed SAC's responses to the Program Review Report. A copy of the program review report (and related attachments) and SAC's responses are attached. Any supporting documentation submitted with the responses are being retained by the Department and are available for inspection by SAC upon request. Additionally, this Final Program Review Determination (FPRD), related attachments, and any supporting documentation may be subject to release under the Freedom of Information Act (FOIA) and can be provided to other oversight entities after this FPRD is issued.

SAC's responses have resolved all findings. In addition, SAC has provided assurances that the appropriate corrective actions have been taken to resolve and prevent future occurrences of all findings. Therefore, SAC may consider the program review closed with no further action required.

Program records relating to the period covered by this program review must be retained until the later of: the resolution of the loan(s), claim(s) or expenditure(s) questioned in the program review [34 C.F.R. § 668.24(e)(3)(i)] or the end of the retention period applicable to the record [34 C.F.R. § 668.24(e)(1) and (e)(2)].

If you have any questions, please contact Ms. Leticia Chavez at 214-661-9501 or at Leticia.Chavez@ed.gov.

Sincerely,

[redacted]

Cynthia Thornton, Director
Dallas School Participation Division

Enclosures Sent Via Email:
Program Review Report
SAC's Responses to the Program Review Report

cc: Donna Cox, Director of Financial Aid
Arkansas Department of Higher Education
North Central Association of Colleges and Schools, the Higher Learning Commission
Department of Defense
Department of Veterans Affairs
Consumer Financial Protection Bureau

Prepared for

Southeast Arkansas College

Federal Student Aid
An OFFICE of the U.S. DEPARTMENT of EDUCATION

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OPE ID: 00570700
PRCN:201920629982

Prepared by
U.S. Department of Education
Federal Student Aid
Dallas School Participation Division

Final Program Review Determination
February 26, 2020

1999 Bryan Street, Suite 1410, Dallas, TX 75201-6817
StudentAid.gov.

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A. Institutional Information

Southeast Arkansas College
1900 Hazel Street
Pine Bluff, AR 71603

Type: Public

Highest Level of Offering: Associates Degree

Accrediting Agency: North Central Association of Colleges and Schools, the Higher Learning Commission (HLC)

Enrollment Management Data:

- Spring 2019 Student Enrollment: 1,097
- 65% of Undergraduate Students Receiving Title IV, Higher Education Act (HEA) Funds

Title IV Participation Funding Levels for the 2016-2017 Award Year:

Federal Pell Grant Program (Pell)	3,516,836.00
William D. Ford Federal Direct Loan Program (Direct Loan or DL)	1,522,720.00
Federal Supplemental Educational Opportunity Grant Program (FSEOG)	58,000.00
Federal Work-Study Program (FWS)	84,413.00
Total:	**$5,181,969.00**

Direct Loan 3-year default rate:

Fiscal Year	Rate
2016	19.5%
2015	21.2%
2014	14.5%

B. Scope of Review

The U.S. Department of Education (the Department) conducted a program review at Southeast Arkansan College (SAC). The onsite portion of the review was conducted from March 11, 2019 through March 15, 2019. The review was conducted by Ms. Leticia Chavez, Ms. Jenny Hendrickson and Mr. John Nading.

The focus of the review was to determine SAC's compliance with the statutes and federal regulations as they pertain to the institution's administration of the Title IV programs. The review consisted of, but was not limited to, an examination of SAC's policies and procedures regarding institutional and student eligibility, individual student financial aid and academic files, attendance records, student account ledgers, fiscal records, and consumer information requirements.

A sample of 30 files was identified for review. The sample consisted of 15 files from the 2017-2018 award year and 15 files from the 2018-2019 award year. The student files were selected randomly from the list of Title IV recipients provided by the institution for any term within the award year being reviewed. Appendix A1, provided with the program review report, lists the names and social security numbers of the students whose files were examined during the program review.

The Department issued its Program Review Report (PRR) on July 23, 2019, included in Appendix B1. SAC submitted written responses to the PRR on September 23, 2019 (Response 1) and on January 24, 2020 (Response 2,) included in Appendix C1. The school's responses were complete and included supporting documentation for each finding.

Disclaimer:

Although the review was thorough, it cannot be assumed to be all-inclusive. The absence of statements in the report concerning SAC's specific practices and procedures must not be construed as acceptance, approval, or endorsement of those specific practices and procedures. Furthermore, it does not relieve SAC of its obligation to comply with all of the statutory or regulatory provisions governing the Title IV, HEA programs.

C. Final Determinations

Resolved Findings

SAC has taken the corrective actions necessary to resolve findings 1- 7 of the PRR. Therefore, these findings may be considered closed. Appendix C1 includes the institution's responses to these findings.

- **Finding 1. Ineligible Location**. Reviewers noted that 50% or more of an educational program was provided to students at the Education Childhood Development Center (ECDC,) which is geographically separate from the main location. At the time of the review, ECDC was not approved by SAC's acceding agency, Higher Learning Commission (HLC), as an additional location. SAC provided a letter from HLC indicating that "due to the proximity of the Early Childhood Development Center to the campus… HLC considers the Early Childhood Development Center building to be part of the main campus."

- **Finding 2. Return of Title IV (R2T4) Violations**. SAC updated its updated polices to ensure that R2T4 calculations will be processed within 45 days and that only appropriate institutional charges are included in the calculations. Furthermore, SAC performed a file review and determined that its calculations were correct and no changes were needed. The Department has determined that the Cost of Funds associated with this finding would be de minimis; therefore, liabilities were not established.

- **Finding 3. Verification Violations**. Student #8's Institutional Student Information Record (ISIR) and verification worksheet revealed a discrepancy in the student's household. However, since the student's expected family contribution (EFC) was 0, a change in the number of household would have not changed the student's EFC. The finding was resolved prior to the issuance of the PRR.

- **Finding 4. Inaccurate Recordkeeping**. SAC provided documentation showing it corrected the COD Common Records and/or the account ledgers for the students identified in the PRR and for those identified in its file review. It also revised institutional policies to describe how reporting of disbursement dates to COD will match institutional student account ledgers.

- **Finding 5. NSLDS Enrollment Reporting Inaccurate/Untimely**. SAC revised its enrollment reporting policies and procedures to report student enrollment information. It also conducted the file review and provided the necessary assurances that its 2017-2018 and 2018-2019 data is accurate.

- **Finding 6. Ineligible Student—Student in Default**. SAC failed to successfully resolve the default status for Student #21 prior to disbursing Title IV funds for the 2018-2019 award year. However, prior to the issuance of the PRR, SAC returned all disbursed funds to the Department.

- **Finding 7. Federal Work Study Program – Timesheet Violations**. SAC has revised its FWS policies including ensuring that students are not working during scheduled class times. Additionally, students and supervisors are reminded in emails and internal documents of the policy.

Campus Safety and Security Findings

Finding 8: Crime Awareness Requirements Not Met—Multiple Violations

The following program review findings have been addressed by the institution, and may be considered closed for purposes of the program review. The Department will provide a separate notice if an administrative action is initiated or additional corrective actions are needed.

Summary of Noncompliance: The Jeanne Clery Disclosure of Campus Security Policy and Campus Crime Statistics Act (*Clery Act*) and the Department's regulations require that all institutions that receive Title IV, Higher Education Act (*HEA*) funds must, by October 1 of each year, publish and distribute to its current students and employees, a comprehensive Annual Security Report (ASR) that contains, at a minimum, all of the statistical and policy elements enumerated in 34 C.F.R. § 668.46(b).

The ASR must be published and actively distributed as a single document. Acceptable means of delivery include U.S. Mail, hand delivery or campus mail distribution to the individual, or posting on the institution's website. If an institution chooses to distribute its report by posting to an internet or intranet site, the institution must, by October 1 of each year, distribute a notice to all students and employees that includes a statement of the report's availability and its exact electronic address, a description of its contents, as well as a statement that a paper copy will be provided upon request. 34 C.F.R. § 668.41(e)(1). These regulations also require institutions to provide a notice containing this information to all prospective students and prospective employees. This notice must also advise interested parties of their right to request a paper copy of the ASR and to have it furnished upon request. 34 C.F.R. § 668.41(e)(4).

The ASR also must include several policy statements. These disclosures are intended to inform the campus community about the institution's security policies, procedures, and the availability of programs and resources, as well as channels for victims of crime to seek recourse. In general, these policies must include topics such as the law enforcement authority and practices of campus police and security forces, incident reporting procedures for students and employees, and policies that govern the preparation of the ASR itself. Institutions are also required to disclose alcohol and drug policies and educational programs. Policies pertaining to sexual assault education, prevention, and adjudication must also be disclosed.

Furthermore, an institution's ASR must include statistics for incidents of crimes reported during the three most recent calendar years. Statistics for certain hates crimes, as well as arrest and disciplinary referral statistics for violations of certain laws pertaining to illegal drugs, and to illegal usage of controlled substances, liquor, and weapons also must be disclosed in the ASR. These crime statistics must be published for the following geographical categories: 1) on campus; 2) on-campus student residential facilities (as a subset of category #1); 3) certain non-campus buildings and property; and, 4) certain adjacent and accessible public property. 34 C.F.R. § 668.46(c)(1).

As applicable, an institution must also compile, and publish separate crime statistic disclosures for each of its campuses. 34 C.F.R. § 668.46(d).

Each institution must also submit campus crime statistics to the Secretary for inclusion in the Department's "Campus Safety and Security Data Analysis Cutting Tool (CSSDACT)." 34 C.F.R. § 668.41(e)(5).

Institutions with a police or campus security department must maintain a written, easily understood daily crime log, listing all crimes that occurred in the above geographical areas, as well as those that occur within the campus police or security department's patrol area of which it either becomes aware or are reported to it. This reporting requirement applies to all crimes, not merely those crimes listed in 34 C.F.R. § 668.46(c)(1) and (3). The log must include the nature, date, time, general location, and disposition of each offense. The crime log must be kept up to date and be freely accessible to any requestor. 34 C.F.R. § 668.46(f).

SAC violated multiple provisions of the *Clery Act*. Although SAC did publish its two most current ASRs on its website, the 2017 and 2018 ASRs are not comprehensive and accurate as SAC failed to include many of the required policy statements. Many of the required statements are blanket statements that are directly from the FSA Assessments training materials. SAC provided copies of the distribution disclosure notices that were sent to the SAC community regarding the ASRs and other numerous consumer information disclosures. The 2017 disclosure notice, dated October 19, 2017, was sent late, the official due date was October 1, 2017.

SAC's 2017 and 2018 ASRs did not include the following required policy statements:

- A statement of current policies concerning campus law enforcement that describes procedures, if any, that encourage pastoral counselors and professional counselors, if and when they deem it appropriate, to inform the persons whom they are counseling of any procedures to report crimes on a voluntary, confidential basis for inclusion in the annual disclosure of crime statistics § 668.46(b)(4)(iv).

- A statement of policy regarding the institution's programs to prevent domestic violence, dating violence, sexual assault, and stalking, and procedures that the institution will follow once an incident of domestic violence, dating violence, sexual assault or stalking has been reported § 668 .46(b)(11)(i)(ii) (A)(B)(C)(D). The statement must include:
    - a description of the institution's educational programs and campaign to promote the awareness of dating violence, domestic violence sexual assault, and stalking; and
    - procedures victims should follow if a sex offense, domestic violence, dating violence, sexual assault, or stalking has occurred, including information in writing about:
        - the importance of preserving evidences as may be necessary to the proof of criminal domestic violence, dating violence, sexual assault or stalking, or in obtaining a protection order;

- how and to whom the alleged offense should be reported;
- options regarding law enforcement and campus authorities, including notification of the victim's option to notify proper law enforcement authorities, including on campus and local police, be assisted by campus authorities in notifying law enforcement authorities if the victim so chooses; and decline to notify such authorities;
- where applicable, the rights of victims and the institution's responsibilities regarding orders of protection, no contract orders, restraining orders, or similar lawful orders issued by a criminal, civil or tribal court or by the institution.

- A statement on how the institution will maintain as confidential any accommodations or protective measures provided to the victim, to the extent that maintaining such confidentiality would not impact the ability of the institution to provide the accommodations or protective measures.
- A statement that the institution will provide written notification to students and employees about existing counseling, health, mental health, victim advocacy, legal assistance, visa and immigration assistance, student financial aid, and other services available for victims, both within the institution and in the community.
- A statement that the institution will provide written notification to victims about options for available assistance with, and how to request changes to, academic, living, transportation, and working situations or protective measures.
- A statement that, when a student or employee reports to the institution that the student or employee has been a victim of dating violence, domestic violence, sexual assault, or stalking, whether the offense occurred on or off campus, the institution will provide the student or employee with a written explanation of the student's or employee's rights and options.
- Procedures for documenting each test, a description of the exercise, the date, time and whether it was announced or unannounced.
- A description of the institution's primary and ongoing prevention and awareness campaigns for students and faculty which shall include:
  - a statement that the institution prohibits the crimes of dating violence, domestic violence, sexual assault, and stalking;
  - the definition of "sexual assault" in the applicable jurisdiction;
  - the definition of "consent" in reference to sexual activity, in the applicable jurisdiction;
  - a description of save and positive options for bystander intervention;
  - information on risk reduction

- Procedures for institutional disciplinary action in cases of an alleged domestic violence, dating violence, sexual assault, or stalking, as required by § 668.46(b)(11)(i)(ii)(D)(k) including clear statements that:
    - describe each type of disciplinary proceeding used by the institution; the steps, anticipated timelines, and decision-making process for each type of disciplinary proceeding; how to file a disciplinary complaint; and how the institution determines which type of proceeding to use;
    - describe the standard of evidence that will be used during any institutional disciplinary proceeding arising from any allegation;
    - list all of the possible sanctions that the institution may impose following the results of any institutional disciplinary proceeding for any allegation;
    - describe the range of protective measures that the institution may offer to the victim following any allegation;
    - such proceedings provide a prompt, fair, and impartial investigation and resolution;
    - the proceedings be conducted by officials who receive annual training on the issues related to domestic violence, dating violence, sexual assault, and stalking that includes how to conduct an investigation and hearing process that protects the safety of victims and promotes accountability;
    - the accuser and the accused will be provided with the same opportunities to have others present during any institutional disciplinary proceeding, including the opportunity to be accompanied to any related meeting or proceeding by an advisor of their choice;
    - the institution may not limit the choice of advisor or presence for either the accuser or the accused in any meeting or disciplinary proceeding. However, the institution may establish restrictions regarding the extent to which the advisor may participate in the proceedings, as long as the restrictions apply equally to both parties and;
    - require simultaneous notification, in writing, to both the accuser and the accused of:
        - the result of any institutional disciplinary proceeding that arises from any allegation;
        - the institution's procedures for the accused and the victim to appeal the results of the institutional disciplinary proceeding;
        - of any change to the results that occur prior to the time that such results become final and;
        - when such results become final.

Furthermore, SAC failed to compile and publish accurate and complete statistics in its 2017 and 2018 ASRs. In its 2017 ASR, SAC reported the sexual offenses as forcible and non-Forcible Assault. The correct subcategories that should have been reported include: Rape, Fondling, Incest and Statutory Rape. As such, SAC submitted inaccurate data to the Department's Online

Campus Crime Statistics Database, also known as the "Campus Safety and Security Data Analysis Cutting Tool (CSSDACT)."

The reviewers compared the crime statistics in SAC's 2017 and 2018 ASRs to those that were submitted to the CSSDACT and identified the following discrepancies in the chart below:

Clery Geography – On Campus			
Source	**2017 ASR**	**2018 ASR**	**CSSDACT**
2015 – Aggravated Assault	0	1	1
2015 – Burglary	0	0	1
2015 – Stalking	0	1	1
2016 Dating Violence	0	2	2

Noncampus Categories

Moreover, in reviewing the CSSDACT data, the 2015 and 2016 years are blank for all noncampus categories. However, SAC reported in its ASRs, all the noncampus categories with zeros.

Directives from the PRR: The Department instructed SAC to develop and implement policies and procedures governing the preparation, publication, and distribution of its ASR and ensure that all facets of the process are carried out in a manner that meets Federal regulations. SAC was also required to ensure that all crime statistics are disclosed accurately and completely, both in its ASR and in its data submission to the Department's Campus Safety and Security Data Analysis Cutting Tool (CSSDACT).

Furthermore, SAC was required to prepare an accurate and complete 2018 ASR that included all the statistical disclosures, and policy, procedure and programmatic information and submit a copy with its response to the program review report.

The institution was also required to provide documentation to the Department evidencing the distribution, as well as a statement of certification attesting to the fact that the materials were distributed in accordance with the *Clery Act.*

Analysis of Determination: Finding 8 cited SAC for multiple violations of the *Clery Act* and the Department's 34 C.F.R. § 668.46 regulations as outlined in the Summary of Noncompliance section above. Specifically, the review team found that SAC failed to include many of the required statements, as many of the statements in its ASRs were blanket statements that are directly from the FSA Assessments training materials. In addition, SAC failed to provide accurate information as discrepancies in its reported statics on the CSSDACT and ASRs were found for the on-campus and noncampus categories. Furthermore, SAC failed to provide timely distribution disclosure notices evidence to students and employees.

In Response 1, SAC did not state whether it concurred with or denied the violations that were cited in Finding 8. Rather, SAC provided detailed information outlining the actions taken to ensure compliance with the *Clery Act*. SAC developed policies and procedures and updated and distributed its 2018 ASR. As part of its response, SAC provided a copy of its newly developed policies and procedures and a revised copy of the 2018 ASR, including the email that was sent to all students and employees. The 2018 ASR included all elements that were missing in the 2017 and 2018 ASRs, bringing SAC into compliance.

The Department has carefully examined SAC's response and supporting documentation. Based on that review, and SAC's submission, each of the violations identified in the noncompliance section of the initial finding is sustained. Subsequently, the review team's examination showed that the identified violations were satisfactorily addressed by the institution's response. The Department has also determined that SAC's corrective action plan to be satisfactory. For these reasons, the Department has accepted SAC's response and considers this finding to be closed for the purposes of this program review. Nevertheless, the officials and directors of SAC must continue to develop the institution's campus safety program and take any additional action that may be necessary to fully address the deficiencies and weaknesses identified by the Department, as well as any such deficiencies that were detected during the preparation of the institution's response to the Department's report and as may otherwise be needed to ensure that these violations do not recur.

Although the finding is now closed for the purposes of this program review, it is necessary to remind SAC that the exceptions identified above constitute serious violations of the *Clery Act* that, by their nature, cannot be cured. By initiating corrective action, SAC has begun to remediate the conditions that led to these violations. The institution has stated that it has brought its overall campus security program into compliance with the *Clery Act*, as required by its Program Participation Agreement. Nevertheless, SAC officials must understand that persistent compliance failures of the type documented in this case deprive students and employees of important campus security information to which they were entitled. For these reasons, the institution is advised that such corrective measures cannot and do not diminish the seriousness of these violations, nor do they eliminate the possibility that the Department will impose an adverse administrative action and/or require additional corrective measures.

The Department strongly recommends that SAC officials re-examine the school's campus safety and general Title IV policies and procedures on an annual basis to ensure that they continue to reflect current institutional practices and are compliant with Federal requirements. For example, SAC is reminded that it must take specific steps to document its efforts to comply with the Department's consumer information distribution requirements, including those that apply to the ASR. SAC officials are also encouraged to consult the Department's "Handbook for Campus Safety and Security Reporting" (2016) as a reference guide on *Clery Act* compliance. The Handbook is online at: www2.ed.gov/admins/lead/safety/handbook.pdf**.** The Department also provides a number of other *Clery Act* training resources. The institution can access these materials at: www2.ed.gov/admins/lead/safety/campus.html. The regulations governing the *Clery Act* can be found at 34 C.F.R. §§ 668.14, 668.41, 668.46, and 668.49.

Finally, SAC is reminded that the *Violence Against Women Reauthorization Act of 2013* (VAWA) (Pub. Law 113-4), among other provisions, amended the *Clery Act* to require institutions to compile statistics for incidents of domestic violence, dating violence, sexual assault, and stalking and to include certain policies, procedures, and programs pertaining to these incidents in the school's ASR. On October 20, 2014, the Department's final regulations were published in the *Federal Register* (Vol. 79, No. 202). The changes to the regulations at *34 C.F.R. § 668.46*, which governs the *Clery Act* requirements went into effect July 1, 2015. For information about the modifications to *34 C.F.R. § 668.46*, please see the following electronic announcement: ifap.ed.gov/eannouncements/102014ViolenceAgainstWomenAct.html. The announcement includes a link to the *Federal Register* (Vol. 79, No. 202). An institution's ASR must incorporate the changes made to 34 C.F.R. § 668.46.

Finding 9. Drug and Alcohol Abuse Prevention Program Requirements Not Met

Summary of Noncompliance: The Drug-Free Schools and Communities Act (DFSCA) and Part 86 of the Department's General Administrative Regulations require each institution of higher education (IHE) that receives Federal education funding to certify that it has developed and implemented a drug and alcohol abuse prevention program (DAAPP). The program must be designed to prevent the unlawful possession, use and distribution of illicit drugs and alcohol abuse on campus and at recognized events and activities.

On an annual basis, each IHE must provide the following information in writing to all current students (enrolled for any type of academic credit except continuing education units) and all current employees:

- A written statement about its standards of conduct that clearly prohibits the unlawful possession, use, or distribution of illicit drugs and alcohol by students and employees on its property or as part of any of its activities;

- A written description of the applicable legal sanctions under local, state, or Federal law for the unlawful possession or distribution of illicit drugs and alcohol;

- A description of the health risks associated with the use of illicit drugs and the abuse of alcohol;

- A description of any drug or alcohol counseling, treatment, or rehabilitation or re-entry programs that are available to employees or students; and,

- A clear statement that the institution will impose disciplinary sanctions on students and employees (consistent with Federal, state, and local laws and ordinances) and a description of those sanctions, up to and including expulsion or termination of employment and referral for prosecution, for violations of the standards of conduct. For

the purpose of this section, please note that a disciplinary sanction may include the required completion of an appropriate treatment program.

Moreover, Federal regulations require each institution to conduct biennial reviews to measure the effectiveness of its DAAPP, and to ensure consistent treatment in its enforcement of applicable drug and alcohol-related statutes, ordinances, and institutional policies against students and employees found to be in violation. The institution must prepare a report of findings, maintain its biennial review report and supporting documents, and make them available to the Department upon request. 34 C.F.R. §§ 86.3, 86.100 and 86.103.

SAC violated multiple provisions of the *DFSCA*. Specifically, in its annual distribution notices to the SAC community, SAC provided the link to the DAAPP but failed to attach a copy of the DAAPP. As part of the initial request for institutional documents in the program review announcement letter, SAC was required to submit the two most recent DAAAP biennial review materials to the review team. SAC provided the 2018 biennial review materials; however, it failed to provide any DAAPP biennial review materials for the review period covering January 1, 2015 through December 31, 2016. SAC did not provide current or historical documents to reviewers suggesting it had not conducted a biennial review in 2016.

The failure to comply with the DFSCA's DAAPP requirements deprives students and employees of important information regarding the educational, disciplinary, health, and legal consequences of illegal drug use and alcohol abuse. Moreover, the failure to comply with the biennial review requirements also deprives the institution of important information about the effectiveness of its own drug and alcohol programs. Such failures may contribute to increased drug and alcohol abuse as well as an increase in drug and alcohol-related violent crime.

Directives from the PRR*:* The Department required SAC to take all necessary corrective actions to remediate these violations. To address the specific deficiencies identified in this finding, the institution was instructed to comply with the following required actions:

- Distribute the materials in accordance with the Part 86 regulations, and provide documentation evidencing that distribution, as well as a statement of certification attesting to the fact that the materials were distributed as required.

- Establish policies and procedures to ensure that all subsequent biennial reviews are conducted in a timely manner and are fully documented to ensure that these violations do not recur.

Analysis of Determination: Finding 9 cited SAC for multiple violations of the *DFSCA* and the Department's 34 C.F.R. § 86 regulations as outlined in the Summary of Noncompliance section above. Specifically, the review team found that SAC failed to distribute complete DAAPPs for the 2017 and 2018 years, as only links were provided to students and employees in its annual e-mail notices. Moreover, SAC could not produce any evidence of the DAAPP 2016 biennial review materials.

In Response 1, SAC did not state whether it concurred with or denied the violations that were cited in Finding 9. Rather, SAC provided detailed information outlining the actions taken to ensure compliance with the DAAPP. SAC provided its updated policies and procedures and distributed the DAAPP and biennial review, including the email that was sent to all students and employees.

The Department has carefully examined SAC's narrative response and supporting documentation. Based on that review, and SAC's submissions, each of the violations identified in the noncompliance section of the initial finding is sustained. Subsequently, the review team's examination showed that the identified violations were satisfactorily addressed by the institution's response. The Department has also determined that SAC's corrective action plan to be satisfactory. For these reasons, the Department has accepted SAC's response and considers this finding to be closed for the purposes of this program review

SAC is reminded that the exceptions identified above constitute serious and persistent violations of the *DFSCA* that, by their nature, cannot be cured. There is no way to truly "correct" violations of this type once they occur. SAC asserted that it has taken adequate remedial actions, and is now in compliance with the *DFSCA* as required by its PPA. Nevertheless, SAC officials must understand that the Department deems compliance with the *DFSCA* essential to maintaining a safe and healthy learning environment. This is true for all institutions, regardless of their size, location, or organizational structure. Data compiled by the Department shows that the use of illicit drugs and alcohol abuse is highly correlated to increased incidents of violent crime on campus. Substance abuse is also a leading cause of poor academic performance and contributes to higher rates of absenteeism and failure to graduate. The compliance failures identified above deprived SAC and its officials of important information about the effectiveness of any drug and alcohol programs that were in place during the Department's review period. Such failures may contribute to increased drug and alcohol abuse on-campus, as well as an increase in drug and alcohol-related violent crime and constitute a violation of Federal law. For these reasons, SAC is reminded that corrective measures cannot and do not diminish the seriousness of these violations, nor do they eliminate the possibility that the Department will impose an adverse administrative action and/or require additional corrective measures as a result.

Finally, the Department strongly recommends that SAC re-examine its drug and alcohol abuse prevention policies, procedures, and programs on at least an annual basis and revise them as needed to ensure that they continue to reflect current policies and are in full compliance with the *DFSCA*. Please be advised that the Department may request information on a periodic basis to test the effectiveness of SAC's new policies and procedures.

D. Appendices

The following appendices are attached to this FPRD:

Appendix A1—Student Sample
Appendix B1—Program Review Report
Appendix C1—Institution Responses

Appendix A1 contains personally identifiable information and will be emailed as an encrypted WinZip file using Advanced Encryption Standard, 256-bit. The password needed to open the encrypted WinZip file(s) will be sent in a separate email.

Appendix A1– Student Sample (Sent via e-mail)

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Appendix B1—Program Review Report

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Appendix C1—Institution Responses

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July 23, 2019

Mr. Steven Bloomberg
President
Southeast Arkansas College
1900 Hazel Street
Pine Bluff, AR 71603

Certified Mail
Return Receipt Requested
7018 0360 0000 7852 6386

RE: Program Review Report
OPE ID: 00570700
PRCN: 201920629982

Dear Mr. Bloomberg:

From March 11, 2019, through March 15, 2019, Ms. Leticia Chavez, Ms. Jenny Hendrickson and Mr. John Nading conducted an on-site program review of Southeast Arkansas College's (SAC's) administration of the programs authorized pursuant to Title IV of the Higher Education Act of 1965, as amended, 20 U.S.C. §§ 1070 et seq. (Title IV, HEA programs). The findings of that review are presented in the enclosed report.

Findings of noncompliance are referenced to the applicable statutes and regulations and specify the action required to comply with the statutes and regulations. Please review the report and respond to each finding, indicating the corrective actions taken by SAC. The response should include a brief, written narrative for each finding that clearly states SAC's position regarding the finding and the corrective action taken to resolve the finding. Separate from the written narrative, SAC must provide supporting documentation as required in each finding.

Please note that pursuant to HEA section 498A(b), the Department is required to:

(1) provide to the institution an adequate opportunity to review and respond to any preliminary program review report[1] and relevant materials related to the report before any final program review report is issued;

(2) review and take into consideration an institution's response in any final program review report or audit determination, and include in the report or determination –
   a. A written statement addressing the institution's response;
   b. A written statement of the basis for such report or determination; and
   c. A copy of the institution's response.

[1] A "preliminary" program review report is the program review report. The Department's final program review report is the Final Program Review Determination (FPRD).

The Department considers the institution's response to be the written narrative (to include e-mail communication). Any supporting documentation submitted with the institution's written response will not be attached to the FPRD. However, it will be retained and available for inspection by SAC upon request. Copies of the program review report, the institution's response, and any supporting documentation may be subject to release under the Freedom of Information Act (FOIA) and can be provided to other oversight entities after the FPRD is issued.

The institution's response should be sent directly to Ms. Leticia Chavez of this office within 60 calendar days of receipt of this letter.

Protection of Personally Identifiable Information (PII):
PII is any information about an individual which can be used to distinguish or trace an individual's identity (some examples are name, social security number, date and place of birth). The loss of PII can result in substantial harm, embarrassment, and inconvenience to individuals and may lead to identity theft or other fraudulent use of the information. To protect PII, the findings in the attached report do not contain any student PII. Instead, findings, where applicable, reference students only by a student number created by Federal Student Aid. The student numbers were assigned in Appendix B. The appendix was encrypted and sent separately to the institution via e-mail. Please see the enclosure Protection of Personally Identifiable Information for instructions regarding submission to the Department of required data / documents containing PII.

Record Retention:
Program records relating to the period covered by the program review must be retained until the later of: resolution of the loans, claims, or expenditures questioned in the program review; or the end of the retention period otherwise applicable to the record under 34 C.F.R. § 668.24(e).

We would like to express our appreciation for the courtesy and cooperation extended during the review. Please refer to the above Program Review Control Number (PRCN) in all correspondence relating to this report. If you have any questions concerning this report, please contact Ms. Leticia Chavez by phone at (214) 661-9501 or by email at leticia.chavez@ed.gov.

Sincerely,

[redacted]

Kimberley Peeler
Compliance Manager

cc: Ms. Donna Cox, Director of Financial Aid

Enclosures:
Protection of Personally Identifiable Information
Program Review Report

Protection of Personally Identifiable Information

Personally Identifiable Information (PII) being submitted to the Department must be protected. PII is any information about an individual which can be used to distinguish or trace an individual's identity (some examples are name, social security number, date and place of birth).

PII being submitted electronically must be encrypted. The data must be submitted in a .zip file encrypted with Advanced Encryption Standard (AES) encryption (256-bit is preferred). The Department uses WinZip, however, files created with other encryption software are also acceptable, provided that they are compatible with WinZip (Version 9.0) and are encrypted with AES encryption. Zipped files using Win Zip must be saved as Legacy compression (Zip 2.0 compatible).

The Department must receive an access password to view the encrypted information. The password must be e-mailed separately from the encrypted data. The password must be 12 characters in length and use three of the following: upper case letter, lower case letter, number, special character. A manifest must be included with the e-mail that lists the types of files being sent (a copy of the manifest must be retained by the sender).

Hard copy and electronic files containing PII must be:

- sent via a shipping method that can be tracked with signature required upon delivery
- double packaged in packaging that is approved by the shipping agent (FedEx, DHL, UPS, USPS)
- labeled with both the "To" and "From" addresses on both the inner and outer packages
- identified by a manifest included in the inner package that lists the types of files in the shipment (a copy of the manifest must be retained by the sender).

PII data cannot be sent via fax.

Prepared for

Southeast Arkansas College

Federal Student Aid
An OFFICE of the U.S. DEPARTMENT of EDUCATION

PROUD SPONSOR of the AMERICAN MIND™

OPE ID: 00570700
PRCN:201920629982

Prepared by
U.S. Department of Education
Federal Student Aid
Dallas School Participation Division

Program Review Report

July 23, 2019

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A. Institutional Information

Southeast Arkansas College
1900 Hazel Street
Pine Bluff, AR 71603

Type: Public

Highest Level of Offering: Associates Degree

Accrediting Agency: North Central Association of Colleges and Schools, the Higher Learning Commission (HLC)

Enrollment Management Data:

- Spring 2019 Student Enrollment: 1,097
- 65% of Undergraduate Students Receiving Title IV, Higher Education Act (HEA) Funds

Title IV Participation Funding Levels for the 2016-2017 Award Year:

Federal Pell Grant Program (Pell)	$4,008,165
William D. Ford Federal Direct Loan Program (Direct Loan or DL)	$2,110,589
Federal Supplemental Educational Opportunity Grant Program (FSEOG)	$51,250
Federal Work-Study Program (FWS)	$70,639
Total:	**$6,240,643**

Direct Loan 3-year default rate:

Fiscal Year	Rate
2015	21.2%
2014	14.5%
2013	25.4%

B. Scope of Review

The U.S. Department of Education (the Department) conducted an onsite program review of Southeast Arkansas College (SAC) from March 11, 2019 through March 15, 2019. The review was conducted by Ms. Leticia Chavez, Ms. Jenny Hendrickson and Mr. John Nading.

The focus of the review was to determine SAC's compliance with the statutes and federal regulations as they pertain to the institution's administration of the Title IV programs. The review consisted of, but was not limited to, an examination of SAC's policies and procedures regarding institutional and student eligibility, individual student financial aid and academic files, attendance records, student account ledgers, fiscal records, and consumer information requirements.

A sample of 15 files from the 2017-2018 award year and 15 files from the 2018-2019 were identified for review. The student files were selected randomly from the list of Title IV recipients provided by the institution for any term within the award year being reviewed. Appendix A lists the names and social security numbers of the students whose files were examined during the program review.

Disclaimer:

Although the review was thorough, it cannot be assumed to be all-inclusive. The absence of statements in the report concerning SAC's specific practices and procedures must not be construed as acceptance, approval, or endorsement of those specific practices and procedures. Furthermore, it does not relieve SAC of its obligation to comply with all of the statutory or regulatory provisions governing the Title IV, HEA programs.

This report reflects initial findings. These findings are not final. The Department will issue its final findings in a subsequent Final Program Review Determination (FPRD).

C. Findings

During the review, several areas of noncompliance were noted. Findings of noncompliance are referenced to the applicable statutes and regulations and specify the actions to be taken by SAC to bring operations of the financial aid programs into compliance with the statutes and regulations.

Finding 1. Ineligible Location

Noncompliance: An eligible institution must report substantive changes to the Secretary in a manner prescribed by the secretary no later than 10 days after the change occurs.
34 C.F.R. § 600.21(a).

An eligible institution must report to the Secretary its establishment of an accredited and licensed additional location at which it offers or will offer 50 percent or more of an educational program if the institution wants to disburse Title IV, HEA program funds to students enrolled at that location. 34 C.F.R. § 600.21(a)(3).

Additionally, the institution may not disburse Title, IV, HEA program funds to students at that location before it reports to the Secretary about that location. For an institution that is not provisionally certified and/or not on heightened cash monitoring, and is not subject to the other conditions outlined in 34 C.F.R. § 600.20(c)(1), once an institution reports to the Secretary about that location, the institution may disburse those funds to those students if that location is licensed and accredited. An institution's failure to inform the Secretary of change within the stated time period may result in adverse action against the institution. 34 C.F.R. § 600.21(d) and (e).

The mechanism for reporting to the Secretary is the E-Application (E-App) on the Department's website. The instructions for adding an additional location are as follows:

> Provide the following information for any of your locations (other than your principal location) that meet any one of these three criteria and at which you provide educational programs to students whom you wish to participate in federal student financial aid programs:
>
> - It is a location where students could complete 50% or more of an educational program that you offer during the current award year; or
> - It is a location where students could complete at least 50% of an educational program over a two-year period (consisting of the current award year and the most recently completed award year); or
> - It is a location where you provide any educational programs if, during the past two-year period (consisting of the current award year and the most recently completed award year), you told students that they could complete at least 50% of any educational programs there.

During interviews, SAC officials indicated that 50% or more of an educational program is provided to students at the Education Childhood Development Center (ECDC,) which is geographically separate from the main location. At the time of the review, ECDC was not approved by its accreditation body, HLC and; therefore, the students attending that location are ineligible to receive Title IV, HEA program funds. Additionally, SAC failed to notify the Department of the ECDC location on its most recent recertification application submitted in 2017.

Required Action: In response to this report, SAC must provide the date it began offering 50 percent of more of an educational program at the ECDC. In addition, SAC must provide a copy of the ECDC's initial approval by HLC.

SAC must identify the total amount of Title IV, HEA program funds disbursed to students since it began offering 50% or more of an educational program at the ECDC through the date on which HLC approved the location. A separate Excel spreadsheet for each award year must contain the following information:

- Award Year
- Student's Name
- Student's Social Security Number
- Net Amount of Title IV Funds Disbursed, by program
- Date the funds were disbursed

Award Year	Last Name	First Name	SSN	Start Date	Net Amount Disbursed by Title IV program[1]	Disbursement Date
2017-2018	Doe	Jane	xxx-xx-xxxx	mm/dd/yy	$xx.xx/Pell	mm/dd/yy

Please note that funds disbursed during the payment period in which ECDC received approval from HLC must be excluded.

After the review of SAC's response, the Department will provide repayment instructions for any identified liabilities, including instructions for performing downward adjustments in the Common Origination and Disbursement (COD) system, in the Final Program Review Determination Letter (FPRD).

SAC must also revise its institutional procedures to ensure that additional locations are reviewed on a regular basis to ensure that appropriate approvals have been received by HLC, and any changes are reported to the Secretary.

Finding 2. Return of Title IV (R2T4) Violations

Noncompliance: When a recipient of Title IV grant or loan assistance withdraws from an institution during a payment period of enrollment in which the recipient began attendance, the institution must determine the amount of Title IV grant or loan assistance that the student earned as of the student's withdrawal date. 34 C.F.R. § 668.22(a).

The amount of Title IV assistance earned by the student is calculated by determining the percentage of Title IV grant or loan assistance that has been earned by the student, and applying the percentage to the total amount of Title IV grant or loan assistance that was disbursed (and that could have been disbursed) to the student, or on the student's behalf, for the payment period or period of enrollment as of the student's withdrawal date. 34 C.F.R. § 668.22(e).

[1] Add new column for each Title IV, Pell Fund Source (e.g. FSEOG, DL Subsidized, etc.)

The Federal Student Aid (FSA) Handbook states that institutional charges used in the calculation usually are the charges that were initially assessed to the student for the entire payment period or period of enrollment as applicable. If, after a student withdraws, the institution changes the amount of institutional charges it is assessing a student or decides to eliminate all institutional charges, those changes affect neither the charges nor aid earned in the calculation.

In addition, an institution must document a student's withdrawal date and maintain the documentation as of the date of the institution's determination that the student withdrew. For a student who ceases attendance at an institution that is required to take attendance, including a student who does not return from an approved leave of absence, or a student who takes a leave of absence that does not meet the requirements, the student's withdrawal date is the last date of academic attendance, as determined by the institution, from its attendance records. An institution is required to take attendance if an outside entity (such as the institution's accrediting agency or a State agency) requires that the institution take attendance or the institution itself requires its instructors take attendance. 34 C.F.R. § 668.22(b).

In the event of a return of funds, an institution must return the amount of Title IV funds for which it is responsible under 34 C.F.R. § 668.22(g) as soon as possible but no later than 45 days after the date of the institution's determination that the student withdrew, as stated in 34 C.F.R. § 668.22(j).

Furthermore, institutions that are required to take attendance must have a procedure for monitoring attendance records to determine in a timely manner when a student withdraws. Except in unusual instances, the date of the institution's determination that the student withdrew should be no later than 14 days after the student's last date of attendance as determined by the institution from its attendance records. 34 C.F.R. § 668.22(b)(1). Please also refer to Dear Colleague Letters (DCLs) GEN-04-03, DCL GEN-04-12, and DCL GEN-11-14, which discuss the timeframe for making determinations.

During interviews, SAC officials indicated to the reviewers that instructors are required to take attendance on a regular basis and instructors are required to report non-attendance of students.

Based on its internal R2T4 reports, SAC failed to accurately complete R2T4 calculations and submit returns to the Department within the required timeframes, for the students in the following table:

Student #	Date of Withdrawal	Date R2T4 Calculation Processed	Amount Returned	Department Due Date	Date Returned in G5	# of Days Late
2	02/07/18	05/10/18	848.64	04/07/18	05/25/18	48
11	09/16/17	12/15/17	552.60	11/14/17	01/08/18	55
22	09/10/18	12/13/18	1,633.18	11/08/18	01/22/19	75
25	09/12/18	12/13/18	1,489.09	11/10/18	01/22/19	73

In addition, for Student #11, the institutional charges listed on its internal report for this student do not include a book fee of $1.85.

Required Action: Based on the number of errors, SAC must review the R2T4 calculations of all students who withdrew, either officially or unofficially, in the 2017-2018 and 2018-2019 academic years. For every student for whom errors are identified, SAC must correct or perform the R2T4 calculation based on its attendance records and accurate institutional charges. SAC must provide a copy of the original calculation as well as a copy of the recalculated worksheet.

SAC must submit the results of the file review for each student for whom a correction is necessary, or for each student for whom a calculation should have been completed, in an encrypted Excel spreadsheet, with the following elements:

- Student's Name (Last/First)
- Social Security Number
- Payment Period Start Date
- Payment Period End Date
- Last Date of Attendance
- Date of Determination
- Institutional Charges
- Net Amount of Title IV Disbursements, by program
- Percentage of Payment Period Completed
- Previously Returned Funds, if any
- If Funds Returned, Date of Return
- Additional Unearned Funds to be Returned, by Title IV program, if applicable

The following chart is an example of the format that should be used for the file review:

Last Name	First Name	SSN	Payment Period Start Date	Payment Period End Date	Last Date of Attendance	Date of Determination
Doe	Jane	xxx-xx-xxxx	mm/dd/yy	mm/dd/yy	mm/dd/yy	mm/dd/yy

Institutional Charges	Net Amount Disbursed by Title IV Program[2]	% of Payment Period Completed	Previously Returned Amount, by Title IV Program[2]	If $ Returned, Date of Return	Additional Amount to be Returned by Title IV Program[2]
$xx.xx	$xx.xx/DL Sub	x%	$xx.xx/DL Sub	mm/dd/yy	$x.xx/DL Unsub

[2]Add new column for each Title IV Fund Source (e.g. FSEOG, Pell, DL Subsidized, etc.)

Additionally, SAC is required to update its R2T4 policies and procedures to ensure that:

- SAC utilizes its attendance records to determine a student's withdrawal no later than 14 days after his/her last date of attendance.
- Returns will be processed within 45 days of the date of determination that a student withdrew, and
- Only appropriate institutional charges are included in the calculation.

These updated policies and procedures must be submitted as part of the institution's response to the PRR.

Finally, depending upon the results of the file review, any identified liabilities will be provided in the FPRD.

Finding 3. Verification Violations

Noncompliance: An institution must establish procedures to request, receive, and verify applicant data for each award year. Institutions are also responsible for resolving conflicting information related to a student's application for federal student aid.

Supporting documentation collected from the student (and parents or spouse of the student, if applicable) is compared to the information reported on the student's Institutional Student Information Record (ISIR). Verification documentation collected must be retained in the student's file as evidence that the process was completed. 34 C.F.R. §§ 668.16 (f)(2), 668.51 – 668.61, and the U.S. Department of Education's 2016-2017 Application and Verification Guide.

Additionally, an institution must develop and apply an adequate system to identify and resolve discrepancies in the information that the institution receives from different sources with respect to a student's application for assistance from the Title IV, HEA programs. This includes information regarding a student's citizenship, previous educational experience, documentation of the student's social security number, and other factors relating to the student's eligibility for funds under the Title IV, HEA programs.

2017-2018 Verification Tracking Groups
FAFSA Information Required to be Verified

Verification Tracking Flag/Name		Required Items to Verified for the 2017-2018 Award Year
V1 - Standard Verification Group	**Tax Filers**	Adjusted Gross Income
		U.S. Income Tax Paid
		Untaxed Portions of IRA Distributions
		Untaxed Portions of Pensions
		IRA Deductions and Payments
		Tax-Exempt Interest Income
		Education Credits
	Nontax Filers	Income Earned from Work
	Tax and Nontax Filers	Household Size
		Number in College
V2		Reserved for Future Use
V3		Reserved for Future Use
V4 - Custom Verification Group		High School Completion Status
		Identity/Statement of Education Purpose
V5 -Aggregate Verification Group		High School Completion Status
		Identity/Statement of Education Purpose
		All items in the Standard Verification Group
V6		Reserved for Future Use

SAC failed to correctly perform verification for Student #8. Specifically, the dependent student was selected for verification under Tracking Flag V1. The student and parent submitted the verification worksheet and the parent's 2015 tax return to the institution, which the institution used to perform the verification. However, the verification worksheet indicates 6 as the number of household; the student's ISIR transaction 04 indicates 3 as the number of household.

Required Action: Since the student's EFC was 0 and a change to increase the number of individuals in the household would not have any affect on the EFC, this finding is considered resolved with no further action required.

Finding 4. Inaccurate Recordkeeping

An institution shall establish and maintain, on a current basis, program records that document its disbursement and delivery of Title IV, HEA program funds and documentation related to each student's receipt of Title IV, HEA program funds, including, but not limited to, the date and amount of each disbursement or delivery of grant or loan funds. 34 C.F.R. §§ 668.24 and 690.81.

SAC failed to accurately document the disbursement dates for several of the students in the sample. Specifically, disbursement dates on students' account ledgers do not match the COD system disbursement dates for the following students:

Student #	Award Type	Disbursement Date(s) in COD	Disbursement Date(s) on Student Account Ledger
6	Unsub	09/20/17 11/03/17	11/03/17
7	Unsub	09/20/17 10/23/17	10/23/17
9	Pell	01/04/18	05/22/18
16	Sub	09/28/18 10/08/18	10/11/18
16	Unsub	03/01/19	03/08/19
23	Sub	03/01/19	03/08/19
25	Sub	01/17/19	12/14/18
27	Sub and Unsub	03/01/19	03/08/19

Required Action: SAC must review the record of every student who received Title IV funds during the 2017-2018 and 2018-2019 award years, including the aforementioned students, and correct the COD Common Record and/or the student's account ledger, if necessary, to ensure that all disbursement information is reflected accurately for each student.

Additionally, SAC must submit a summary report regarding the number of records corrected in either COD or the student account ledgers, as part of the institution's response to the PRR.

The summary report should be submitted in an encrypted Excel spreadsheet, with the following elements:

- Student's Name (Last/First)
- Social Security Number
- Award Year
- Fund Source (by Title IV, HEA program)
- COD or Student Account Ledger (indicate which updated)
- Updated Disbursement Date

The following chart is an example of the format that should be used for the file review:

Last Name	First Name	Social Security Number	Award Year	Fund Source by Title IV Program	COD or Student Account Ledger Updated	Updated Disbursement Date
Doe	Jane	xxx-xx-xxxx	2018-2019	Direct Loan	COD	mm/yy/dd

Furthermore, SAC is required to develop and submit a policy describing how Title IV, HEA program disbursement dates will be accurately recorded in both COD and on student account ledgers. A copy of the revised policies and procedures must be submitted with the institution's response to the PRR.

Finding 5. NSLDS Enrollment Reporting Inaccurate/Untimely

Noncompliance: All institutions participating in Title IV programs must have internal procedures for reporting student enrollment data to the National Student Loan Data System (NSLDS) through a roster file. This information determines if the student is eligible for an in-school deferment or must enter repayment. For students entering repayment, the out of school status effective date determines when the grace period begins and when the student must begin repaying loan funds.

Upon receipt of a student status confirmation report from the Secretary, an institution must complete and return that report to the Secretary within 30 days of receipt unless it expects to submit its next student status confirmation report to the Secretary within the next 60 days. In this report the institution must notify the Secretary within 30 days if it discovers that a recipient of a Direct Subsidized, Direct Unsubsidized, and/or Direct PLUS Loan:

- Ceases to be enrolled on at least a half-time basis;
- Has been accepted for enrollment at that school but failed to enroll on at least a half-time basis for the period for which the loan was intended; or
- Has changed his or her permanent address.

34 C.F.R. § 685.309(b).

In addition, the Electronic Announcement dated April 20, 2017 states that the school should continue to report, through the summer months, the student's enrollment status from the spring term even if the student is not enrolled in the summer or is enrolled less than half time. Furthermore, if the student does not return in the fall as expected, the enrollment status must be changed to "Withdrawn" with the end of the spring term as the Enrollment Status Effective Date.

For the Pell Grant program, NSLDS status is important because this is used to determine the appropriate lifetime eligibility used (LEU) for remaining Pell Grant eligibility for students. 34 C.F.R. § 690.6(e).

SAC failed to perform NSLDS enrollment reporting accurately and timely for the following students:

Student #4: The student was certified as withdrawn on 02/09/18 and on 03/08/18; however, per SAC's records, the student graduated on 12/12/17.

Student #5: The student was certified as withdrawn on 10/09/18 and on 11/28/18; however, per SAC's records, the student graduated on 07/31/18.

Student #7: The student was enrolled half-time on 01/22/18; however, the student's effective date was reported as 12/13/17.

Student #13: The student withdrew on 05/08/18; however, the student was not certified as withdrawn until 09/07/18.

Student #14: The student was enrolled full-time during the Spring 2019 semester; however, the student was reported as withdrawn on 09/07/18 and on 10/02/18 with an effective date of 05/08/18.

Students #16, 17, 18, 19, 20, 21, 24, 26, 27, and 29: The students were enrolled during the Spring 2019 semester which started on 01/14/19; however, the students were last certified on 12/14/18.

Student #22: The student withdrew on 09/10/18; however, the student was not certified as withdrawn until 12/14/18.

Student #25: The student withdrew on 09/12/18; however, the student was not certified as withdrawn until 12/14/18.

Student #28: The student withdrew on 05/08/18; however, the student was not certified as withdrawn until 09/07/18. On 10/02/18 the student was also certified as withdrawn, which was the last certification. Additionally, the student reenrolled for the Spring 2019 semester and withdrew on 02/20/19; however, SAC failed to certify the student during the Spring 2019 semester.

Student #30: The student enrolled half-time on 01/14/19; however, the student had not been certified by SAC. It appears the servicer reported the student on 02/13/19.

Required Action: SAC is required to review and revise its NSLDS enrollment reporting policies and procedures to ensure that proper controls are in place to report student enrollment information in a timely and accurate manner.

Based on the number of occurrences of incorrect reporting found during the program review, SAC must conduct a file review for every student enrolled in the 2017-2018 and 2018-2019

award years to ensure that student enrollment status has been accurately reported to NSLDS. For any students identified for whom the enrollment status was inaccurately or not reported, SAC must update the student's information and submit a summary report for all corrections made.

The summary report should be submitted in an encrypted Excel spreadsheet, with the following elements:

- Student's Name (Last/First)
- Social Security Number
- Current Enrollment Status
- Effective Date
- Certification Date

The following chart is an example of the format that should be used for the file review:

Last Name	First Name	Social Security Number	Current Enrollment Status	Effective Date	Certification Date
Doe	Jane	xxx-xx-xxxx	Full-Time	mm/yy/dd	mm/yy/dd

A copy of the revised policies, as well as a summary of any enrollment updates and assurances that all enrollment reporting is accurate, must be included in the institution's response to the PRR.

Finding 6. Ineligible Student—Student in Default

Noncompliance: A student who is in default on a loan made under a title IV, HEA loan program may nevertheless be eligible to receive title IV, HEA program assistance if the student:

- Repays the loan in full; or
- Makes arrangements, that are satisfactory to the holder of the loan and in accordance with the individual title IV, HEA loan program regulations, to repay the loan balance; and makes at least six consecutive monthly payments under those arrangements.

34 C.F.R. § 668.35(a).

SAC failed to successfully resolve the default status for Student #21 prior to disbursing Title IV funds for the 2018-2019 award year. The student's 2018-2019 ISIR transaction 02 indicates that the student was in default on one or more federal student loans. The reviewers reviewed the student's Loan History in NSLDS and determined that the student had previously defaulted on both a Federal Direct Loan and a Federal Perkins Loan. SAC provided a copy of a letter from the Department's Default Resolution Group Servicing Center, dated 12/17/18 clearing the student's defaulted DL status; however, the letter does not provide clearance for the Perkins' debt.

Required Action: In a follow-up email, SAC indicated that the Title IV, HEA funds disbursed to Student #21 were returned. SAC also indicated that the student consolidated his or her federal loans in November 2018 and inadvertently did not include the Perkins loan. An updated consolidation application has been submitted to the servicer to include the Perkins loan.

SAC has taken the corrective action necessary to resolve this finding and may consider it closed with no further action required.

Finding 7. Federal Work-Study Program – Timesheet Violations

Noncompliance: An institution must establish and maintain FWS program and fiscal records that include a certification by the student's supervisor, an official of the institution, or off-campus agency, that each student has worked and earned the amount being paid. The certification must include or be supported by, for students paid on an hourly basis, a time record showing the hours each student worked in clock time sequence, or the total hours worked per day. 34 C.F.R. § 675.19.

Additionally, the FSA Handbook further states that in general, students are not permitted to work in FWS positions during scheduled class times. Exceptions are permitted if an individual class is cancelled, if the instructor has excused the student from attending for a particular day, or if the student is receiving credit for employment in an internship, externship, or community work-study experience. Any such exemptions must be documented.

SAC failed to monitor the hours worked by students, resulting in work being performed during scheduled class times for the following students. Please see Appendix B for the student-level information.

Student #A: The student received FWS for the 2018-2019 award year. The student's class schedule for Fall 2018 and the discrepancy identified are below:

Days	Time
Monday / Wednesday	9:30 a.m.-10:45 a.m.
Monday / Wednesday	11:00 a.m.-12:15 p.m.
Tuesday / Thursday	9:30 a.m.-10:45 a.m.
Tuesday / Thursday	10:50 a.m.-11:50 a.m.

Date	Day of Week	Time Worked	Discrepancy Scheduled Class Time
08/22/18	Wednesday	11:30 a.m.-2:30 p.m.	11:00 a.m.-12:15 p.m.

SAC officials later confirmed in a follow-up email that during 1 instance, the student worked during class time.

Student #B: The student received FWS for the 2018-2019 award year. The student's class schedule for Fall 2018 and the discrepancies identified are below:

Days	Time
Monday / Wednesday	8:00 a.m.-9:15 a.m.
Monday / Wednesday	11:00 a.m.-12:15 p.m.
Tuesday / Thursday	8:00 a.m.-9:15 a.m.

Date	Day of Week	Time Worked	Discrepancy Scheduled Class Time
10/16/18	Tuesday	8:00 a.m.-1:30 p.m.	8:00 a.m.-9:15 a.m.
10/17/18	Wednesday	11:00 a.m.-3:00 p.m.	11:00 a.m.-12:15 p.m.
10/18/18	Thursday	8:30 a.m-1:00 p.m.	8:00 a.m.-9:15 a.m.
10/22/18	Monday	8:00 a.m.-1:00 p.m.	11:00 a.m.-12:15 p.m.
10/23/18	Tuesday	8:00 a.m.-2:00 p.m.	8:00 a.m.-9:15 a.m.
10/24/18	Wednesday	8:00 a.m.-11:00 a.m.	8:00 a.m.-9:15 a.m.

SAC officials also confirmed in a follow-up email that during 6 instances, the student worked during class time.

Required Action: SAC must review and revise its current policy and provide assurances of regulatory compliance and increased supervisory oversight with respect to the certification of student timesheets. The policy must include a procedure for monitoring FWS students to ensure work is not being performed during scheduled class times. A copy of the revised policies and procedures must be included in the institution's response to the program review report.

Finding 8. Crime Awareness Requirements Not Met—Multiple Violations

Noncompliance: The Jeanne Clery Disclosure of Campus Security Policy and Campus Crime Statistics Act (*Clery Act*) and the Department's regulations require that all institutions that receive Title IV, Higher Education Act (*HEA*) funds must, by October 1 of each year, publish and distribute to its current students and employees, a comprehensive Annual Security Report (ASR) that contains, at a minimum, all of the statistical and policy elements enumerated in 34 C.F.R. § 668.46(b).

The ASR must be published and actively distributed as a single document. Acceptable means of delivery include U.S. Mail, hand delivery or campus mail distribution to the individual, or posting on the institution's website. If an institution chooses to distribute its report by posting to an internet or intranet site, the institution must, by October 1 of each year, distribute a notice to all students and employees that includes a statement of the report's availability and its exact electronic address, a description of its contents, as well as a statement that a paper copy will be provided upon request. 34 C.F.R. § 668.41(e)(1). These regulations also require institutions to provide a notice containing this information to all prospective students and prospective

employees. This notice must also advise interested parties of their right to request a paper copy of the ASR and to have it furnished upon request. 34 C.F.R. § 668.41(e)(4).

The ASR also must include several policy statements. These disclosures are intended to inform the campus community about the institution's security policies, procedures, and the availability of programs and resources, as well as channels for victims of crime to seek recourse. In general, these policies must include topics such as the law enforcement authority and practices of campus police and security forces, incident reporting procedures for students and employees, and policies that govern the preparation of the ASR itself. Institutions are also required to disclose alcohol and drug policies and educational programs. Policies pertaining to sexual assault education, prevention, and adjudication must also be disclosed. An institution that provides on-campus housing must include a statement of policy regarding missing student notification procedures.

Institutions must provide detailed policies of the issuance of timely warnings, emergency notifications, and evacuation procedures. All required information referenced in 34 C.F.R. § 668.46(b) must be published in the ASR. With the exception of certain drug and alcohol program information, cross-referencing to other publications is not sufficient to meet the publication and distribution requirements of the Act. 34 C.F.R. § 668.46(b).

A. Policy Statements

Southeast Arkansas College (SAC) violated multiple provisions of the *Clery Act*. Although SAC did publish its two most current ASRs on its website, the 2017 and 2018 ASRs are not comprehensive and accurate as SAC failed to include many of the required policy statements. Many of the required statements, for example, from page 15 of its ASR, are blanket statements that appear to be word for word from the FSA Assessments Consumer Information Activity 5.

During the onsite interview with the Vice President of Student Affairs (VPSA,) the reviewers asked the VPSA about the educational programs offered at SAC; the VPSA indicated that these topics were presented to students during all orientations held during the summer, fall and spring semesters and provided copies of the PowerPoint presentations. However, the PowerPoint presentations titled "New Student Orientation Student Affairs Spring 2018" and "SEARK Safety" that were provided by the VPSA do not include the required statements.

Additionally, SAC provided copies of the distribution disclosure notices that were sent to the SAC community regarding the ASRs and other numerous consumer information disclosures. The 2017 disclosure notice, dated October 19, 2017, was sent late, the official due date was October 1, 2017. Furthermore, a document titled "Your Right to Know Campus Safety and Security" was attached to the email disclosure notices which included several brief paragraphs on various information including the definition of "sexual assault" as well as "disciplinary sanctions." SAC is reminded that although some policy statements may have been included in this document, the requirement statements are fundamental and must be included its ASRs.

As such, SAC's 2017 and 2018 ASRs did not include the following required policy statements:

- A statement of current policies concerning campus law enforcement that describes procedures, if any, that encourage pastoral counselors and professional counselors, if and when they deem it appropriate, to inform the persons whom they are counseling of any procedures to report crimes on a voluntary, confidential basis for inclusion in the annual disclosure of crime statistics § 668 .46(b)(4)(iv).

- A statement of policy regarding the institution's programs to prevent domestic violence, dating violence, sexual assault, and stalking, and procedures that the institution will follow once an incident of domestic violence, dating violence, sexual assault or stalking has been reported § 668 .46(b)(11)(i)(ii) (A)(B)(C)(D). The statement must include:
    - a description of the institution's educational programs and campaign to promote the awareness of dating violence, domestic violence sexual assault, and stalking; and
    - procedures victims should follow if a sex offense, domestic violence, dating violence, sexual assault, or stalking has occurred, including information in writing about:
        - the importance of preserving evidences as may be necessary to the proof of criminal domestic violence, dating violence, sexual assault or stalking, or in obtaining a protection order;
        - how and to whom the alleged offense should be reported;
        - options regarding law enforcement and campus authorities, including notification of the victim's option to notify proper law enforcement authorities, including on campus and local police, be assisted by campus authorities in notifying law enforcement authorities if the victim so chooses; and decline to notify such authorities;
        - where applicable, the rights of victims and the institution's responsibilities regarding orders of protection, no contract orders, restraining orders, or similar lawful orders issued by a criminal, civil or tribal court or by the institution.
- A statement on how the institution will maintain as confidential any accommodations or protective measures provided to the victim, to the extent that maintaining such confidentiality would not impact the ability of the institution to provide the accommodations or protective measures.
- A statement that the institution will provide written notification to students and employees about existing counseling, health, mental health, victim advocacy, legal assistance, visa and immigration assistance, student financial aid, and other services available for victims, both within the institution and in the community.
- A statement that the institution will provide written notification to victims about options for available assistance with, and how to request changes to, academic, living, transportation, and working situations or protective measures.

- A statement that, when a student or employee reports to the institution that the student or employee has been a victim of dating violence, domestic violence, sexual assault, or stalking, whether the offense occurred on or off campus, the institution will provide the student or employee with a written explanation of the student's or employee's rights and options.
- Procedures for documenting each test, a description of the exercise, the date, time and whether it was announced or unannounced.
- A description of the institution's primary and ongoing prevention and awareness campaigns for students and faculty which shall include:
    - a statement that the institution prohibits the crimes of dating violence, domestic violence, sexual assault, and stalking;
    - the definition of "sexual assault" in the applicable jurisdiction;
    - the definition of "consent" in reference to sexual activity, in the applicable jurisdiction;
    - a description of save and positive options for bystander intervention;
    - information on risk reduction
- Procedures for institutional disciplinary action in cases of an alleged domestic violence, dating violence, sexual assault, or stalking, as required by § 668 .46(b)(11)(i)(ii)(D)(k) including clear statements that:
    - describe each type of disciplinary proceeding used by the institution; the steps, anticipated timelines, and decision-making process for each type of disciplinary proceeding; how to file a disciplinary complaint; and how the institution determines which type of proceeding to use;
    - describe the standard of evidence that will be used during any institutional disciplinary proceeding arising from any allegation;
    - list all of the possible sanctions that the institution may impose following the results of any institutional disciplinary proceeding for any allegation;
    - describe the range of protective measures that the institution may offer to the victim following any allegation;
    - such proceedings provide a prompt, fair, and impartial investigation and resolution;
    - the proceedings be conducted by officials who receive annual training on the issues related to domestic violence, dating violence, sexual assault, and stalking that includes how to conduct an investigation and hearing process that protects the safety of victims and promotes accountability;
    - the accuser and the accused will be provided with the same opportunities to have others present during any institutional disciplinary proceeding, including the

opportunity to be accompanied to any related meeting or proceeding by an advisor of their choice;

- the institution may not limit the choice of advisor or presence for either the accuser or the accused in any meeting or disciplinary proceeding. However, the institution may establish restrictions regarding the extent to which the advisor may participate in the proceedings, as long as the restrictions apply equally to both parties and;
- require simultaneous notification, in writing, to both the accuser and the accused of:
  - the result of any institutional disciplinary proceeding that arises from any allegation;
  - the institution's procedures for the accused and the victim to appeal the results of the institutional disciplinary proceeding;
  - of any change to the results that occur prior to the time that such results become final and;
  - when such results become final.

B. Statistics

Furthermore, an institution's ASR must include statistics for incidents of crimes reported during the three most recent calendar years. Per the new reporting requirements in the regulations, which were effective on July 1, 2015, the covered categories and subcategories include:

- Criminal homicide
  - Murder and Non-negligent Manslaughter
  - Negligent manslaughter
- Sex offenses
  - Rape
  - Fondling
  - Incest
  - Statutory Rape
- Robbery
- Aggravated Assault
- Burglary
- Motor Vehicle Theft
- Arson

Statistics for certain hates crimes, as well as arrest and disciplinary referral statistics for violations of certain laws pertaining to illegal drugs, and to illegal usage of controlled substances, liquor, and weapons also must be disclosed in the ASR. These crime statistics must be published for the following geographical categories: 1) on campus; 2) on-campus student residential facilities (as a subset of category #1); 3) certain noncampus buildings and property; and, 4) certain adjacent and accessible public property. 34 C.F.R. § 668.46(c)(1).

As applicable, an institution must also compile, and publish separate crime statistic disclosures for each of its campuses. 34 C.F.R. § 668.46(d).

Each institution must also submit campus crime statistics to the Secretary for inclusion in the Department's "Campus Safety and Security Data Analysis Cutting Tool (CSSDACT)." 34 C.F.R. § 668.41(e)(5).

Institutions with a police or campus security department must maintain a written, easily understood daily crime log, listing all crimes that occurred in the above geographical areas, as well as those that occur within the campus police or security department's patrol area of which it either becomes aware or are reported to it. This reporting requirement applies to all crimes, not merely those crimes listed in 34 C.F.R. § 668.46(c)(1) and (3). The log must include the nature, date, time, general location, and disposition of each offense. The crime log must be kept up to date and be freely accessible to any requestor. 34 C.F.R. § 668.46(f).

SAC failed to compile and publish accurate and complete statistics in its 2017 and 2018 ASRs. Additionally, in its 2017 ASR, SAC reported the sexual offenses as forcible and non-Forcible Assault. The correct subcategories that should have been reported include: Rape, Fondling, Incest and Statutory Rape. As such, SAC submitted inaccurate data to the Department's Online Campus Crime Statistics Database, also known as the "Campus Safety and Security Data Analysis Cutting Tool (CSSDACT)."

The reviewers compared the crime statistics in SAC's 2017 and 2018 ASRs to those that were submitted to the CSSDACT and identified the following discrepancies in the chart below:

Clery Geography – On Campus			
Source	**2017 ASR**	**2018 ASR**	**CSSDACT**
2015 – Aggravated Assault	0	1	1
2015 – Burglary	0	0	1
2015 – Stalking	0	1	1
2016 Dating Violence	0	2	2

Noncampus Categories

Moreover, in reviewing the CSSDACT data, the 2015 and 2016 years are blank for all noncampus categories. It appears that when SAC submitted the data to the CSSDACT, SAC indicated that it did not have any noncampus locations, thus the categories appear blank. However, SAC reported in its ASRs, all the categories with zeros.

Clery Geography – Noncampus		
Source	**2018 ASR**	**CSSDACT**
2017 – Burglary	0	1

Such discrepancies and omissions in an institution's crime statistics confuse users of the ASR and the Department's Online Campus Crime Statistics Database, and deprive the campus community and the public of important campus crime information.

Failure to publish accurate and complete ASRs may indicate a lack of administrative capability and deprives the campus community of important security information that can empower its members to be informed and to play active roles in their own safety and security.

Required Action: As a result of these violations, SAC must develop and implement new policies and procedures that will govern the preparation, publication, and distribution of its ASRs, and ensure that all facets of the process are carried out in a manner that meets Federal regulations. SAC must ensure that all crime statistics are disclosed accurately and completely, both in its ASR and in its data submission to the Department's CSSDACT. As part of this internal review, SAC must review the crime statistics that were included in its 2018 ASR and its corresponding CSSDACT data submission and verify that all statistics are accurate and complete. If additional reporting errors are identified during this internal review, SAC must take immediate action to correct those data discrepancies by amending its ASR(s) and/or its CSSDACT data submissions. Finally, SAC must submit a copy of all of its new and revised policies and procedures, as well as a list of any additional statistical discrepancies that were identified during the internal review, with its response to this program review report.

Using these policies as a guide, SAC must prepare an accurate and complete 2018 ASR that includes all of the statistical disclosures, policy, procedure and programmatic information required under 34 C.F.R. § 668.49(b). A copy of SAC's revised ASR must accompany its response to the program review report.

Finally, the institution will also be required to provide documentation to the Department evidencing the distribution, as well as a statement of certification attesting to the fact that the materials were distributed in accordance with the *Clery Act.* This certification must also affirm that SAC understands its *Clery Act* obligations and that it has taken all necessary corrective actions to ensure that these violations do not recur.

As noted above, the exceptions identified in this finding constitute serious violations of the *Clery Act* that, by their nature, cannot be cured. SAC will be given an opportunity to develop and distribute an accurate and complete ASR, and, in doing so, SAC may finally begin to bring its overall campus security program into compliance with the *Clery Act* as required by its Program Participation Agreement (PPA). However, SAC is advised that these remedial measures cannot and do not diminish the seriousness of these violations, nor do they eliminate the possibility that the Department will impose an adverse administrative action and/or require additional corrective measures.

Because of the consequences of a serious compliance violation, the Department strongly recommends that SAC re-examine its campus safety and general Title IV policies and procedures on an annual basis to ensure that they continue to reflect current institutional practices and are

compliant with federal requirements. To that end, SAC officials are encouraged to consult the Department's "*Handbook for Campus Safety and Security Reporting*" (2016) as a reference guide on *Clery Act* compliance. The handbook is available online at: http://www2.ed.gov/admins/lead/safety/handbook.pdf. The regulations governing the *Clery Act* can be found at 34 C.F.R. § 668.14, 34 C.F.R. § 668.41, 34 C.F.R. § 668.46, and 34 C.F.R. § 668.49.

Based on an evaluation of all available information, including SAC's response, the Department will determine if additional actions will be required and will advise SAC accordingly in its Final Program Review Determination.

Finding 9. Drug and Alcohol Abuse Prevention Program Requirements Not Met

Noncompliance: The *Drug-Free Schools and Communities Act* (DFSCA) and Part 86 of the Department's General Administrative Regulations require each institution of higher education (IHE) that receives Federal education funding to certify that it has developed and implemented a Drug and Alcohol Abuse Prevention Program (DAAPP). The program must be designed to prevent the unlawful possession, use, and distribution of illicit drugs and alcohol abuse on campus and at recognized events and activities.

On an annual basis, each IHE must provide the following information, in writing, to all current students (enrolled for any type of academic credit except continuing education units) and all current employees:

- A written statement about its standards of conduct that clearly prohibits, at a minimum, the unlawful possession, use, or distribution of illicit drugs and alcohol by students and employees on its property or as part of any of its activities;
- A written description of the applicable legal sanctions under local, state, or Federal law for the unlawful possession or distribution of illicit drugs and alcohol;
- A description of the health risks associated with the use of illicit drugs and the abuse of alcohol;
- A description of any drug or alcohol counseling, treatment, or rehabilitation or re-entry programs that are available to employees or students; and
- A clear statement that the institution will impose disciplinary sanctions on students and employees (consistent with local, state, and Federal law) and a description of those sanctions, up to and including expulsion or termination of employment and referral for prosecution, for violations of the standards of conduct. For the purpose of this section, a disciplinary sanction may include the required completion of an appropriate treatment program.

Federal regulations require each institution to conduct biennial reviews to measure the effectiveness of its DAAPP, and to ensure consistent treatment in its enforcement of applicable drug and alcohol-related statutes, ordinances, and institutional policies against students and employees found to be in violation. The institution must prepare a report of findings for each review and maintain its biennial review reports and supporting documents and make them available to the Department upon request. 34 C.F.R. § 86.3, 34 C.F.R. § 86.100 and 34 C.F.R. § 86.103.

SAC violated multiple provisions of the *DFSCA*. Specifically, in its annual distribution notices to the SAC community, SAC provided the link to the DAAPP but failed to attach a copy of the DAAPP. As part of the initial request for institutional documents in the program review announcement letter, SAC was required to submit the two most recent DAAAP biennial review materials to the review team. SAC provided the 2018 biennial review materials; however, failed to provide any DAAPP biennial review materials for the review period covering January 1, 2015 through December 31, 2016. SAC did not provide current or historical documents to reviewers suggesting it had not conducted a biennial review in 2016.

The failure to comply with the DFSCA's DAAPP requirements deprives students and employees of important information regarding the educational, disciplinary, health, and legal consequences of illegal drug use and alcohol abuse. Moreover, the failure to comply with the biennial review requirements also deprives the institution of important information about the effectiveness of its own drug and alcohol programs. Such failures may contribute to increased drug and alcohol abuse as well as an increase in drug and alcohol-related violent crime.

Required Action: SAC must take all necessary corrective actions to resolve these violations. At a minimum, SAC must perform the following:

- SAC must distribute the materials in accordance with the Part 86 regulations, and provide documentation evidencing that distribution, as well as a statement of certification attesting to the fact that the materials were distributed as required. This certification must also affirm that SAC understands all of its *DFSCA* obligations and that it has taken all necessary corrective actions to ensure that these violations do not recur.

- Establish policies and procedures to ensure that all subsequent biennial reviews are conducted in a timely manner and are fully documented to ensure that these violations do not recur.

The exceptions identified in this finding constitute serious violations of the *DFSCA* that, by their nature, cannot be cured. There is no way to truly "correct" violations of this type once they occur. The above required actions provide SAC with an opportunity to implement a substantive DAAPP, publish and distribute an accurate and complete DAAPP disclosure, conduct a biennial review, and to otherwise bring operations into compliance with the DFSCA, as required by its PPA. However, these remedial measures do not diminish the seriousness of these violations, nor

do they eliminate the possibility that the Department will impose an adverse administrative action, require additional corrective measures as a result, or both.

D. Appendices

Appendix A: Student Sample

Appendix B: Finding 7. Federal Work-Study Program – Timesheet Violations

Appendices A and B contain personally identifiable information and will be emailed as an encrypted WinZip files using Advanced Encryption Standard, 256-bit. The password needed to open the encrypted WinZip file(s) will be sent in a separate email.

Appendix A: Student Sample (Sent via e-mail)

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Appendix B: Finding 7 – Federal Work Study Program – Timesheet Violations (Sent via e-mail)

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