

NATIONAL ASSOCIATION OF SCHOOLS OF THEATRE

Affirmation Statement

This document, along with the Institutional Audit, is part of the official accreditation record of the institution. This information is requested in order to ensure attention to and compliance with current federal regulations.

This Affirmation Statement must be completed in its entirety and signed by a designated representative of the institution. All sections of this Statement must be addressed completely.

Failure to complete and return this annual document will result in a review of the institution's accreditation status.

1. With regard to this institution's curricular offerings in theatre, this institution affirms that, as of the execution date of this statement: *(Please note: No individual degree/program should be listed under more than one category [1.a., 1. b., or 1.c.] below. Please answer all, 1.a., 1.b., and 1.c.)*

- a. The appropriate NAST Commission has reviewed, approved, and NAST is listing by level, major, and area of emphasis (if applicable) all continuing degree- and non-degree-granting programs offered and published by the institution that have graduated students *(please check only one of the following two boxes)*.

☐ Yes ☐ No *(if "No" is checked, additional information is required)*

If *no* has been checked, please identify and list below any such degree(s)/program(s) and affirm by signature below that the degree(s)/program(s) so identified will be submitted for Plan Approval and Final Approval for Listing by the published deadline for consideration at the next Commission meeting (see *NAST Handbook 2014-15*, Rules of Practice and Procedure, Part II, Article I., Section 3.: Curricular Requirements).

- b. The institution has submitted to NAST for the appropriate Commission review any/all institution-approved degree- and non-degree-granting programs by level, major, and area of emphasis (if applicable) planned to be offered by the institution *(please check only one of the following three boxes)*.

☐ Yes ☐ No *(if "No" is checked, additional information is required)*

☐ There are no new planned degree(s)/program(s) at this time

If *no* has been checked, please identify and list below any degree(s)/program(s) not yet submitted to the NAST Commission for Plan Approval, and affirm by signature below that the degree(s)/program(s) so identified will be submitted for Plan Approval by the published deadline for consideration at the next Commission meeting (see *NAST Handbook 2014-15*, Rules of Practice and Procedure, Part II, Article VI.: New Curricula: Plan Approval and Final Approval for Listing).

- c. The institution has submitted to NAST for the appropriate Commission review any/all institution-approved substantial changes planned to be made to existing NAST-approved degree- and non-degree-granting programs *(please check only one of the following two boxes)*.

☐ Yes ☐ No *(if "No" is checked, additional information is required)*

☐ There are no substantial changes to curricula planned at this time

If *no* has been checked, please identify and list below any degree(s)/program(s) slated for substantial change which have not yet been submitted to the NAST Commission for Substantive Change, and affirm by signature below that the degree(s)/program(s) so identified will be submitted for Substantive Change by the published deadline for consideration at the next Commission meeting (see *NAST Handbook 2014-15*, Rules of Practice and Procedure, Part II, Article V.: Substantive Change).

(Please consult NAST staff for guidance regarding modifications or events that constitute Substantive Change.)

2. With regard to this institution's operational activities regarding the theatre program, this institution affirms that, as of the execution date of this statement: *(Please answer 2.a., and 2.b.(1), (2), (3), (4), and (5).)*

- a. The institution has submitted to the appropriate NAST Commission for review any/all substantive changes to operating capabilities, conditions, systems, or fundamental administrative structures that have occurred during the 2013-2014 academic year, or that are projected to occur in the 2014-2015 academic year or beyond (see *NAST Handbook 2014-15*, Rules of Practice and Procedure, Part II, Article V.: Substantive Change).

☐ Yes ☐ No *(if "No" is checked, additional information is required)*

☐ There have been no substantive changes made or planned with regard to operational activities

If *no* has been checked, please indicate the nature of the substantive change(s) which have not yet been submitted to the NAST Commission for Substantive Change, and affirm by the signature below that the information so identified will be submitted for Substantive Change by the published deadline for consideration at the next Commission meeting (see *NAST Handbook 2014-15*, Rules of Practice and Procedure, Part II, Article V.: Substantive Change).

(Please consult NAST staff for guidance regarding modifications or events that constitute Substantive Change. Please check only one box.)

- b. This institution affirms that there have been no changes of a substantive nature in the last 12 months, and that as of the execution date of this Statement, no substantive changes are expected in the next 12 months that would compromise its ability to continue doing any of the following consistent with NAST standards: *(For each of items (1) through (5), please check only one of the two boxes provided.)*

(1) Fulfill its fundamental purposes as an institution or in the field of theatre.

☐ No changes ☐ Changes *(if "Changes" is checked, additional information is required)*

(2) Maintain the basic overall financial viability or operational integrity of the institution or the theatre unit.

☐ No changes ☐ Changes *(if "Changes" is checked, additional information is required)*

(3) Continue delivering the theatre program(s) or courses of study offered in its academic catalog or the equivalent.

☐ No changes ☐ Changes *(if "Changes" is checked, additional information is required)*

(4) Provide basic resources and maintain safe facilities.

☐ No changes ☐ Changes *(if "Changes" is checked, additional information is required)*

(5) Publish accurate, clearly stated, and current information about its curricular programs, their purposes, requirements, and achievements.

☐ No changes ☐ Changes *(if "Changes" is checked, additional information is required)*

If *Changes* has been checked, please indicate the nature of the substantive change(s) below and affirm by signature below that, if required, an application for review will be submitted by the published deadline for consideration at the next Commission meeting.

In regard to the questions above, if either “No” or “Changes” has been checked, for each instance, please provide information as requested using the space below. *(Please indicate which question is addressed by using its number such as 1.b. Please ensure that proper materials are submitted by the indicated date. Please add additional pages as necessary.)*

<i>Section/Item</i>	<i>Information</i>	<i>Submission Date</i>
_____	_____	_____
_____	_____	_____
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_____	_____	_____

(Please check to ensure that you have checked only one box in every section of the Affirmation Statement. Thank you for your careful attention.)

By signing this document, I attest that the information submitted herein or attached to this Affirmation Statement to be true to the best of my knowledge and belief.

_____ Printed Name and Title of Reporting Officer	_____ Signature of Reporting Officer	_____ Date
_____ Printed Name of Institution	_____ Address	
_____ City, State, Zip Code	_____ Telephone (include area code)	_____ Email Address

Return completed and signed document to:
NATIONAL ASSOCIATION OF SCHOOLS OF THEATRE
ATTN: AFFIRMATION STATEMENT
11250 Roger Bacon Drive, Suite 21
Reston, VA 20190