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| **School name**:  **Accreditation Organization:** |
| **Program to be Accredited**: |

**Date:**

|  |  |  |  |  |
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| **Summary** | | | | |
| **Accreditation costs** | | |  | |
| **Min time needed for accreditation** | | |  | |
| **Accreditation Criteria** | | |  | |
| **Criterion 1.** | | |  | |
| **Criterion 2.** | | |
| **Criterion 3.** | | |
| **Criterion 4.** | | |
| …………… | | |
| **STEP** | **Expected Time Duration** | **Achievement** | | **Notes** | |
|  |  | **Done 🞏 🞏 Partially done 🞏 Not done** | |  | |
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