



CLARION ACADEMIC  
CONSULTING

# Florida Institutional Compliance Review Checklist

*Professional Edition | Florida Private Higher Education Institutions*

**76 Checklist Items**  
Across 8 Compliance Domains

**Compliance Scorecard**  
Score & Status by Section

**5-Step Action Plan**  
From Gap to Full Readiness

Table of Contents

| Section                                                | Page |
|--------------------------------------------------------|------|
| Quick Start Guide .....                                | 4    |
| About the Creator.....                                 | 6    |
| Section 1: CIE Licensure & State Authorization.....    | 7    |
| Section 2: Governance & Administration .....           | 7    |
| Section 3: Financial Operations & Disclosures .....    | 8    |
| Section 4: Academic Programs & Curriculum .....        | 9    |
| Section 5: Faculty Qualifications & Oversight .....    | 10   |
| Section 6: Admissions & Enrollment Agreements.....     | 10   |
| Section 7: Student Services & Records .....            | 11   |
| Section 8: Catalog Accuracy & Public Disclosures ..... | 12   |
| Compliance Scorecard .....                             | 14   |
| Post-Review Follow-Up.....                             | 15   |
| Overall Compliance Score Summary.....                  | 18   |
| Next Steps: Moving from Review to Readiness.....       | 19   |
| Thank You.....                                         | 21   |

## How to Use This Checklist

This checklist is designed for Florida private higher education institutions that

- Are preparing for a compliance review by the Commission for Independent Education (CIE)
- Want to conduct internal compliance audits
- Need to address findings from previous reviews
- Are seeking accreditation or license renewal
- Want to strengthen their compliance program proactively

**The checklist is organized across eight compliance domains and helps institutions identify gaps, assign responsibility, and confirm readiness before any formal review begins.**

- Review each section with your compliance team.
- Use the Notes / Evidence column to document where supporting materials are located.
- Calculate your percentage score.
- Priority ratings (High / Medium / Low) reflect typical CIE scrutiny levels.
- Conduct the post-review follow-up
- Generate the overall compliance score summary.
- View next steps.
- Schedule internal audit before external review.
- This checklist does not substitute for legal or regulatory counsel or a formal compliance consultation.
- **Contact Clarion Academic Consulting to discuss a formal compliance readiness assessment.**

## Quick Start Guide

If you are new to compliance reviews or simply want to get moving quickly, this guide walks you through how to use the Florida Institutional Compliance Review Checklist from start to finish in five clear steps.

### STEP 01

#### Gather Your Core Documents Before You Begin

Before working through the checklist, pull together the key institutional documents you will need to reference. Having these on hand will allow you to mark items accurately and note where evidence is located.

##### Action items for this step:

- Current CIE license and any renewal correspondence
- Board bylaws, meeting minutes, and organizational chart
- Most recent audited financial statements and operating budget
- Institutional catalog (current and prior year versions)
- Enrollment agreements and student handbook
- Faculty files, including transcripts and credential records
- Student grievance log and records retention policy
- Website and all active marketing or recruiting materials

### STEP 02

#### Work Through Each Section Systematically

The checklist is divided into eight compliance domains. Work through one section at a time. For each item, mark whether it is complete, and use the Notes / Evidence column to record where the supporting document can be found. Do not skip items; even those that seem straightforward can reveal gaps when examined closely.

##### Action items for this step:

- Section 1: CIE Licensure & State Authorization
- Section 2: Governance & Administration
- Section 3: Financial Operations & Disclosures
- Section 4: Academic Programs & Curriculum
- Section 5: Faculty Qualifications & Oversight
- Section 6: Admissions & Enrollment Agreements
- Section 7: Student Services & Records
- Section 8: Catalog Accuracy & Public Disclosures

**STEP  
03****Score Each Section Using the Compliance Scorecard**

After completing each section, transfer your results to the Compliance Scorecard. Count the number of items fully completed with documentation in place, divide by the total items in that section, and multiply by 100 to get your percentage. Enter your score and assign a status: Ready (90%+), In Progress (70–89%), or At Risk (below 70%).

**Action items for this step:**

- Complete items = those with evidence documented, not just believed to be in order
- Partial completion counts as incomplete for scoring purposes
- Recalculate after any remediation to track improvement

**STEP  
04****Log Every Gap in the Post-Review Follow-Up Section**

For every item not fully completed, open the Post-Review Follow-Up section and record the gap. Assign one responsible party and a target date for resolution. Use the Gap Log to drive your internal remediation process; treat it as a living document, not a one-time exercise.

**Action items for this step:**

- Do not leave gaps unassigned; every open item needs an owner
- Set realistic deadlines based on complexity and review timeline
- Review the Gap Log weekly until all items are resolved

**STEP  
05****Review Your Overall Score and Take Action**

Once all eight sections are scored, complete the Overall Compliance Score Summary. Use your overall percentage and the interpretation guide to determine your institution's readiness level. Then follow the five-step Next Steps action plan to move from review to full compliance readiness.

**Action items for this step:**

- 90% or above: Maintain your systems and monitor for regulatory updates
- 70–89%: Address gaps before any formal submission or site visit
- Below 70%: Schedule a compliance readiness consultation with Clarion Academic Consulting immediately

## About the Creator

### Althia Ellis

Founder, Clarion Academic Consulting

Althia Ellis is the founder of Clarion Academic Consulting, an academic consulting firm based in Davie, Florida, serving private higher education institutions across the state. Clarion Academic helps colleges and universities build the documentation systems, governance structures, and operational practices they need to meet Commission for Independent Education (CIE) requirements and achieve their accreditation goals.

Clarion Academic Consulting provides services across seven practice areas: accreditation and compliance, curriculum and program development, institutional compliance and licensing, operational and strategic consulting, skill building, student services, and editing services. Each engagement is tailored to the institution's stage of development, regulatory environment, and long-term goals.

This checklist reflects the practical, field-informed approach Clarion Academic brings to every client engagement. It is grounded in what Florida regulators actually look for, and designed to help institutions move through compliance reviews with clarity and confidence.

### Connect with Clarion

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### Clarion Academic Consulting — Services

**Accreditation & Compliance:** Preparation, documentation strategy, and readiness support for regional and national accreditation bodies.

**Institutional Compliance & Licensing:** CIE licensure support, renewal assistance, and compliance gap remediation for Florida private institutions.

**Curriculum & Program Development:** Program design, SLO development, curriculum mapping, and instructional alignment for new and existing programs.

**Operational & Strategic Consulting:** Governance review, policy development, organizational structure assessment, and strategic planning support.

**Skill Building:** Targeted training and professional development for institutional leaders and academic administrators.

**Student Services:** Time management and study skills framework, goal-setting alignment system, international student transition guide, academic success tracker

**Editing Services:** Professional editing and writing support for accreditation documents, policy manuals, and institutional reports.

## Section 1: CIE Licensure & State Authorization

| #                                                                           | Compliance Item                                                                                      | Notes / Evidence | Priority |
|-----------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|------------------|----------|
| <b>1A — Initial Licensure Requirements (Chapter 1005, Florida Statutes)</b> |                                                                                                      |                  |          |
| 1                                                                           | Institution holds a current, valid license issued by the Commission for Independent Education (CIE). |                  | High     |
| 2                                                                           | License is posted or accessible to students and the public as required.                              |                  | High     |
| 3                                                                           | License renewal application was submitted on time with all required fees.                            |                  | High     |
| 4                                                                           | Any branch campuses or additional locations are separately licensed.                                 |                  | High     |
| 5                                                                           | Institution has not exceeded authorized enrollment or program scope listed on the license.           |                  | High     |
| 6                                                                           | License reflects current ownership, governance structure, and legal entity name.                     |                  | High     |

| #                                                                          | Compliance Item                                                                                    | Notes / Evidence | Priority |
|----------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|------------------|----------|
| <b>1B — State Authorization Reciprocity (SARA / Out-of-State Activity)</b> |                                                                                                    |                  |          |
| 1                                                                          | Institution is a Florida SARA participant (if applicable) and membership is current.               |                  | Medium   |
| 2                                                                          | Distance education students in other states are covered by appropriate state authorization.        |                  | Medium   |
| 3                                                                          | Advertising, recruiting, and enrollment practices comply with states where online students reside. |                  | Medium   |
| 4                                                                          | Institution does not conduct physical presence in other states without proper authorization.       |                  | Medium   |

## Section 2: Governance & Administration

| #                                               | Compliance Item                                                                    | Notes / Evidence | Priority |
|-------------------------------------------------|------------------------------------------------------------------------------------|------------------|----------|
| <b>2A — Board of Trustees / Governing Board</b> |                                                                                    |                  |          |
| 1                                               | Institution has a formally constituted governing board with documented membership. |                  | High     |
| 2                                               | Board bylaws are current, adopted, and on file.                                    |                  | High     |
| 3                                               | Board meeting minutes are maintained and reflect substantive governance decisions. |                  | High     |

| # | Compliance Item                                                                  | Notes / Evidence | Priority |
|---|----------------------------------------------------------------------------------|------------------|----------|
| 4 | Board includes independent/outside members as required (where applicable).       |                  | Medium   |
| 5 | Board has adopted and periodically reviews institutional policies.               |                  | High     |
| 6 | Conflicts of interest policy is in place and board members have acknowledged it. |                  | High     |

| #                                                     | Compliance Item                                                                         | Notes / Evidence | Priority |
|-------------------------------------------------------|-----------------------------------------------------------------------------------------|------------------|----------|
| <b>2B — Organizational Structure &amp; Leadership</b> |                                                                                         |                  |          |
| 1                                                     | An organizational chart accurately reflects the current administrative structure.       |                  | Medium   |
| 2                                                     | All key administrative positions are filled by qualified individuals.                   |                  | High     |
| 3                                                     | The Chief Executive Officer (or equivalent) meets CIE qualifications.                   |                  | High     |
| 4                                                     | Roles and responsibilities are clearly defined and documented for leadership positions. |                  | Medium   |
| 5                                                     | Succession plans or interim protocols are established for key positions.                |                  | Low      |

### Section 3: Financial Operations & Disclosures

| #                                             | Compliance Item                                                                                     | Notes / Evidence | Priority |
|-----------------------------------------------|-----------------------------------------------------------------------------------------------------|------------------|----------|
| <b>3A — Financial Stability Documentation</b> |                                                                                                     |                  |          |
| 1                                             | Institution has current audited financial statements prepared by an independent CPA.                |                  | High     |
| 2                                             | Audit reflects no material weaknesses or going-concern issues (or issues are addressed).            |                  | High     |
| 3                                             | Institution is in compliance with student protection fund requirements (surety bond or equivalent). |                  | High     |
| 4                                             | Operating budget is approved by the board and monitored regularly.                                  |                  | High     |
| 5                                             | Revenue sources are diversified or risks from concentration are managed and documented.             |                  | Medium   |
| 6                                             | Tuition refund policy conforms to Florida law and is applied consistently.                          |                  | High     |

| #                                             | Compliance Item                                                                                | Notes / Evidence | Priority |
|-----------------------------------------------|------------------------------------------------------------------------------------------------|------------------|----------|
| <b>3B — Financial Disclosures to Students</b> |                                                                                                |                  |          |
| 1                                             | All costs, including tuition, fees, books, materials, are clearly disclosed before enrollment. |                  | High     |
| 2                                             | Tuition refund/cancellation policy is included in the enrollment agreement and catalog.        |                  | High     |
| 3                                             | Financial aid policies and federal/state funding sources are disclosed accurately.             |                  | High     |
| 4                                             | Withdrawal and re-enrollment financial terms are documented and communicated.                  |                  | Medium   |

## Section 4: Academic Programs & Curriculum

| #                                 | Compliance Item                                                                   | Notes / Evidence | Priority |
|-----------------------------------|-----------------------------------------------------------------------------------|------------------|----------|
| <b>4A — Program Authorization</b> |                                                                                   |                  |          |
| 1                                 | Every program offered is listed on the CIE license or has been formally approved. |                  | High     |
| 2                                 | New programs were submitted for approval before being marketed or offered.        |                  | High     |
| 3                                 | Program names and credentials are accurately described in all materials.          |                  | High     |
| 4                                 | Programs that have been discontinued have been formally reported to CIE.          |                  | Medium   |
| 5                                 | Credit hours and clock hours meet Florida statutory requirements.                 |                  | High     |

| #                                                                | Compliance Item                                                                        | Notes / Evidence | Priority |
|------------------------------------------------------------------|----------------------------------------------------------------------------------------|------------------|----------|
| <b>4B — Curriculum Integrity &amp; Student Learning Outcomes</b> |                                                                                        |                  |          |
| 1                                                                | Each program has documented, measurable student learning outcomes (SLOs).              |                  | High     |
| 2                                                                | SLOs are assessed regularly, with results used to improve programs.                    |                  | High     |
| 3                                                                | Curriculum maps align course content with program SLOs.                                |                  | Medium   |
| 4                                                                | Syllabi are current, consistent with catalog descriptions, and accessible to students. |                  | High     |
| 5                                                                | Academic calendar meets minimum instructional time requirements.                       |                  | High     |
| 6                                                                | Transfer credit policies are documented, fair, and applied consistently.               |                  | Medium   |

## Section 5: Faculty Qualifications & Oversight

| #                               | Compliance Item                                                                               | Notes / Evidence | Priority |
|---------------------------------|-----------------------------------------------------------------------------------------------|------------------|----------|
| <b>5A — Faculty Credentials</b> |                                                                                               |                  |          |
| 1                               | All faculty hold credentials at or above the level they teach (degree or equivalent).         |                  | High     |
| 2                               | Faculty files contain copies of transcripts, licenses, and credentials.                       |                  | High     |
| 3                               | Faculty with non-traditional qualifications have documented equivalency rationales on file.   |                  | High     |
| 4                               | Adjunct and part-time faculty are held to the same credential standards as full-time faculty. |                  | High     |
| 5                               | Faculty qualification records are kept current and updated upon any changes.                  |                  | High     |

| #                                               | Compliance Item                                                                        | Notes / Evidence | Priority |
|-------------------------------------------------|----------------------------------------------------------------------------------------|------------------|----------|
| <b>5B — Faculty Oversight &amp; Development</b> |                                                                                        |                  |          |
| 1                                               | Faculty are evaluated regularly through a formal performance review process.           |                  | High     |
| 2                                               | Evaluation results are documented and retained in personnel files.                     |                  | Medium   |
| 3                                               | Professional development opportunities are provided or supported.                      |                  | Low      |
| 4                                               | Faculty handbook is current and reflects actual policies and expectations.             |                  | Medium   |
| 5                                               | Faculty teaching loads are reasonable and consistent with instructional quality goals. |                  | Medium   |

## Section 6: Admissions & Enrollment Agreements

| #                                               | Compliance Item                                                                   | Notes / Evidence | Priority |
|-------------------------------------------------|-----------------------------------------------------------------------------------|------------------|----------|
| <b>6A — Admissions Policies &amp; Practices</b> |                                                                                   |                  |          |
| 1                                               | Admissions criteria are documented and consistently applied.                      |                  | High     |
| 2                                               | Admissions representatives are properly trained and knowledgeable about programs. |                  | High     |
| 3                                               | No misleading or deceptive claims are made in recruiting or advertising.          |                  | High     |

| # | Compliance Item                                                                      | Notes / Evidence | Priority |
|---|--------------------------------------------------------------------------------------|------------------|----------|
| 4 | Prospective students receive the required catalog and disclosures before enrollment. |                  | High     |
| 5 | Ability-to-benefit (ATB) or prerequisite requirements are enforced where applicable. |                  | Medium   |

| #                                 | Compliance Item                                                                               | Notes / Evidence | Priority |
|-----------------------------------|-----------------------------------------------------------------------------------------------|------------------|----------|
| <b>6B — Enrollment Agreements</b> |                                                                                               |                  |          |
| 1                                 | Enrollment agreements include all CIE-required elements (program, cost, refund policy, etc.). |                  | High     |
| 2                                 | Enrollment agreements are signed before the student begins class.                             |                  | High     |
| 3                                 | Signed copies are retained in student files and a copy is provided to the student.            |                  | High     |
| 4                                 | Enrollment agreements are updated when policies change and used consistently.                 |                  | High     |
| 5                                 | Cancellation and withdrawal rights are clearly explained in the enrollment agreement.         |                  | High     |

## Section 7: Student Services & Records

| #                                                  | Compliance Item                                                                         | Notes / Evidence | Priority |
|----------------------------------------------------|-----------------------------------------------------------------------------------------|------------------|----------|
| <b>7A — Student Records &amp; FERPA Compliance</b> |                                                                                         |                  |          |
| 1                                                  | Student academic records are maintained securely and retained per Florida requirements. |                  | High     |
| 2                                                  | Institution has a written FERPA policy and notifies students of their rights annually.  |                  | High     |
| 3                                                  | Access to student records is restricted to authorized personnel.                        |                  | High     |
| 4                                                  | Official transcripts can be produced in a timely manner upon student request.           |                  | High     |
| 5                                                  | Student records are protected against loss, damage, or unauthorized disclosure.         |                  | High     |
| 6                                                  | Permanent records are maintained even if a program is discontinued.                     |                  | High     |

| #                                           | Compliance Item                                                                    | Notes / Evidence | Priority |
|---------------------------------------------|------------------------------------------------------------------------------------|------------------|----------|
| <b>7B — Academic &amp; Support Services</b> |                                                                                    |                  |          |
| 1                                           | Students have access to academic advising appropriate to their enrollment level.   |                  | High     |
| 2                                           | Library or learning resources are available and adequate for the programs offered. |                  | Medium   |
| 3                                           | Student complaint and grievance procedures are documented and communicated.        |                  | High     |
| 4                                           | Grievance records are maintained and reviewed to identify patterns.                |                  | Medium   |
| 5                                           | Disability accommodations process complies with ADA/Section 504 requirements.      |                  | High     |
| 6                                           | Students are informed of available support services at or before enrollment.       |                  | Medium   |

## Section 8: Catalog Accuracy & Public Disclosures

| #                                 | Compliance Item                                                                             | Notes / Evidence | Priority |
|-----------------------------------|---------------------------------------------------------------------------------------------|------------------|----------|
| <b>8A — Institutional Catalog</b> |                                                                                             |                  |          |
| 1                                 | Catalog is current, dated, and reflects the current academic year's policies and programs.  |                  | High     |
| 2                                 | Catalog includes all CIE-required elements (license disclosure, cancellation policy, etc.). |                  | High     |
| 3                                 | Catalog content is consistent with the enrollment agreement and institutional website.      |                  | High     |
| 4                                 | Program descriptions, SLOs, and graduation requirements are accurate in the catalog.        |                  | High     |
| 5                                 | Faculty credentials and qualifications are accurately represented.                          |                  | Medium   |
| 6                                 | Prior versions of the catalog are archived and retrievable.                                 |                  | Medium   |

| #                                             | Compliance Item                                                                        | Notes / Evidence | Priority |
|-----------------------------------------------|----------------------------------------------------------------------------------------|------------------|----------|
| <b>8B — Website &amp; Marketing Materials</b> |                                                                                        |                  |          |
| 1                                             | Website does not make unsubstantiated claims about job placement, salary, or outcomes. |                  | High     |
| 2                                             | CIE license information and contact details are visible on the website.                |                  | High     |
| 3                                             | Accreditation status (if any) is accurately and clearly stated.                        |                  | High     |

| # | Compliance Item                                                                     | Notes / Evidence | Priority |
|---|-------------------------------------------------------------------------------------|------------------|----------|
| 4 | Tuition and fee information is current and consistent with the catalog.             |                  | High     |
| 5 | Marketing materials have been reviewed for accuracy and legal compliance.           |                  | High     |
| 6 | Social media and digital advertising are consistent with institutional disclosures. |                  | Medium   |

**HIGH Priority**

Directly reviewed by CIE. Non-compliance may delay licensure, trigger sanctions, or result in denial.

**MEDIUM Priority**

Reviewed during site visits or document audits. Gaps suggest systemic issues and should be resolved.

**LOW Priority**

Best practices and supporting documentation. Strengthens the institution's overall compliance posture.

## Compliance Scorecard

After completing each section of the checklist, record the number of items completed and calculate your percentage score. Use this scorecard to identify which compliance domains need the most attention before your review.

### How to Calculate Your Score

- Count the total number of items in a section (see "Total Items" column).
- Count the items your institution has fully completed and documented.
- Divide Items Completed by Total Items, then multiply by 100 for your percentage.
- A section is considered "Ready" at 90% or above. "In Progress" = 70–89%. "At Risk" = below 70%.

| Section                                  | Total Items | Items Completed | Percentage | Status |
|------------------------------------------|-------------|-----------------|------------|--------|
| 1. CIE Licensure & State Authorization   | 10          |                 |            |        |
| 2. Governance & Administration           | 11          |                 |            |        |
| 3. Financial Operations & Disclosures    | 10          |                 |            |        |
| 4. Academic Programs & Curriculum        | 11          |                 |            |        |
| 5. Faculty Qualifications & Oversight    | 10          |                 |            |        |
| 6. Admissions & Enrollment Agreements    | 10          |                 |            |        |
| 7. Student Services & Records            | 12          |                 |            |        |
| 8. Catalog Accuracy & Public Disclosures | 12          |                 |            |        |
| <b>OVERALL TOTAL</b>                     | <b>76</b>   |                 |            |        |

#### READY (90–100%)

Documentation is in place and consistent. Maintain current practices.

#### IN PROGRESS (70–89%)

Gaps exist but are manageable. Address before submission.

#### AT RISK (Below 70%)

Significant gaps. Immediate remediation required. Consider a formal consultation.

## Post-Review Follow-Up

After completing your internal compliance review, use this section to document the outcomes, assign remediation tasks, and track progress toward full readiness. Each domain has its own follow-up log, followed by an overall summary.

### Section 1: CIE Licensure & State Authorization — Gap Log

| Gap / Issue Identified     | Action Required        | Responsible Party   | Target Date   | Resolved? (Y/N) |
|----------------------------|------------------------|---------------------|---------------|-----------------|
|                            |                        |                     |               |                 |
|                            |                        |                     |               |                 |
|                            |                        |                     |               |                 |
|                            |                        |                     |               |                 |
|                            |                        |                     |               |                 |
| Section 1 Compliance Score | Items Completed: _____ | Percentage: _____ % | Status: _____ |                 |

### Section 2: Governance & Administration — Gap Log

| Gap / Issue Identified     | Action Required        | Responsible Party   | Target Date   | Resolved? (Y/N) |
|----------------------------|------------------------|---------------------|---------------|-----------------|
|                            |                        |                     |               |                 |
|                            |                        |                     |               |                 |
|                            |                        |                     |               |                 |
|                            |                        |                     |               |                 |
|                            |                        |                     |               |                 |
| Section 2 Compliance Score | Items Completed: _____ | Percentage: _____ % | Status: _____ |                 |

### Section 3: Financial Operations & Disclosures — Gap Log

| Gap / Issue Identified | Action Required | Responsible Party | Target Date | Resolved? (Y/N) |
|------------------------|-----------------|-------------------|-------------|-----------------|
|                        |                 |                   |             |                 |
|                        |                 |                   |             |                 |
|                        |                 |                   |             |                 |
|                        |                 |                   |             |                 |

| Gap / Issue Identified     | Action Required        | Responsible Party  | Target Date   | Resolved? (Y/N) |
|----------------------------|------------------------|--------------------|---------------|-----------------|
|                            |                        |                    |               |                 |
| Section 3 Compliance Score | Items Completed: _____ | Percentage: _____% | Status: _____ |                 |

#### Section 4: Academic Programs & Curriculum — Gap Log

| Gap / Issue Identified     | Action Required        | Responsible Party  | Target Date   | Resolved? (Y/N) |
|----------------------------|------------------------|--------------------|---------------|-----------------|
|                            |                        |                    |               |                 |
|                            |                        |                    |               |                 |
|                            |                        |                    |               |                 |
|                            |                        |                    |               |                 |
|                            |                        |                    |               |                 |
| Section 4 Compliance Score | Items Completed: _____ | Percentage: _____% | Status: _____ |                 |

#### Section 5: Faculty Qualifications & Oversight — Gap Log

| Gap / Issue Identified     | Action Required        | Responsible Party  | Target Date   | Resolved? (Y/N) |
|----------------------------|------------------------|--------------------|---------------|-----------------|
|                            |                        |                    |               |                 |
|                            |                        |                    |               |                 |
|                            |                        |                    |               |                 |
|                            |                        |                    |               |                 |
|                            |                        |                    |               |                 |
| Section 5 Compliance Score | Items Completed: _____ | Percentage: _____% | Status: _____ |                 |

#### Section 6: Admissions & Enrollment Agreements — Gap Log

| Gap / Issue Identified | Action Required | Responsible Party | Target Date | Resolved? (Y/N) |
|------------------------|-----------------|-------------------|-------------|-----------------|
|                        |                 |                   |             |                 |
|                        |                 |                   |             |                 |
|                        |                 |                   |             |                 |

| Gap / Issue Identified     | Action Required        | Responsible Party  | Target Date   | Resolved? (Y/N) |
|----------------------------|------------------------|--------------------|---------------|-----------------|
|                            |                        |                    |               |                 |
|                            |                        |                    |               |                 |
| Section 6 Compliance Score | Items Completed: _____ | Percentage: _____% | Status: _____ |                 |

### Section 7: Student Services & Records — Gap Log

| Gap / Issue Identified     | Action Required        | Responsible Party  | Target Date   | Resolved? (Y/N) |
|----------------------------|------------------------|--------------------|---------------|-----------------|
|                            |                        |                    |               |                 |
|                            |                        |                    |               |                 |
|                            |                        |                    |               |                 |
|                            |                        |                    |               |                 |
|                            |                        |                    |               |                 |
| Section 7 Compliance Score | Items Completed: _____ | Percentage: _____% | Status: _____ |                 |

### Section 8: Catalog Accuracy & Public Disclosures — Gap Log

| Gap / Issue Identified     | Action Required        | Responsible Party  | Target Date   | Resolved? (Y/N) |
|----------------------------|------------------------|--------------------|---------------|-----------------|
|                            |                        |                    |               |                 |
|                            |                        |                    |               |                 |
|                            |                        |                    |               |                 |
|                            |                        |                    |               |                 |
|                            |                        |                    |               |                 |
| Section 8 Compliance Score | Items Completed: _____ | Percentage: _____% | Status: _____ |                 |

## Overall Compliance Score Summary

After completing all eight sections and their gap logs, transfer your section percentages below to calculate your institution's overall compliance readiness score.

| Section                                  | Items Completed | Total Items | Percentage | Status |
|------------------------------------------|-----------------|-------------|------------|--------|
| 1. CIE Licensure & State Authorization   |                 | 10          |            |        |
| 2. Governance & Administration           |                 | 11          |            |        |
| 3. Financial Operations & Disclosures    |                 | 10          |            |        |
| 4. Academic Programs & Curriculum        |                 | 11          |            |        |
| 5. Faculty Qualifications & Oversight    |                 | 10          |            |        |
| 6. Admissions & Enrollment Agreements    |                 | 10          |            |        |
| 7. Student Services & Records            |                 | 12          |            |        |
| 8. Catalog Accuracy & Public Disclosures |                 | 12          |            |        |
| <b>OVERALL COMPLIANCE SCORE</b>          |                 | <b>76</b>   |            |        |

### Interpreting Your Overall Score

**90–100% | READY:** Your institution demonstrates strong compliance across all domains. Focus on maintaining documentation and monitoring for regulatory updates.

**70–89% | IN PROGRESS:** Your institution has meaningful compliance coverage but identifiable gaps. Prioritize remediation of High-priority items before any formal review.

**Below 70% | AT RISK:** Significant compliance gaps exist that could delay or jeopardize licensure. Clarion Academic Consulting recommends scheduling a formal compliance readiness assessment before proceeding.

## Next Steps: Moving from Review to Readiness

Completing the checklist and scorecard is a critical first step. What follows is a structured pathway for turning your review results into a compliance-ready institution. Work through these steps in sequence, giving priority to your lowest-scoring and highest-risk sections.

### STEP 01

#### Triage Your Gaps by Priority and Domain

Review every item marked incomplete in the checklist. Categorize each gap as High, Medium, or Low priority using the priority ratings assigned to each item. Address all High-priority gaps before moving to Medium or Low items. Sections scored below 70% require immediate, focused remediation and should be treated as pre-conditions for any formal review submission.

##### Action items for this step:

- List all incomplete High-priority items across all eight sections.
- Identify whether each gap is a missing document, an outdated policy, an ownership gap, or a practice inconsistency.
- Group related gaps to address them together where possible (e.g., catalog and website inconsistencies).

### STEP 02

#### Assign Ownership and Set Deadlines

Every gap must have a single named owner (not a department, but a specific individual) and a realistic target completion date. Use the Gap Log in the Post-Review Follow-Up section to document assignments. Schedule brief weekly check-ins to monitor progress and surface any blockers.

##### Action items for this step:

- Assign one responsible party to each open gap log item.
- Set target dates based on the complexity of each item and the overall timeline to review.
- Share the Gap Log with all stakeholders so accountability is visible and shared.

### STEP 03

#### Rebuild or Update Core Documentation

Many compliance gaps trace back to documentation that is missing, outdated, or inconsistent across institutional materials. Use this step to systematically update your catalog, faculty files, enrollment agreements, student records policies, and financial disclosures so they reflect current practice and align with one another.

##### Action items for this step:

- Cross-check the catalog, website, enrollment agreement, and handbooks for consistency.
- Update faculty credential files and document any equivalency rationales.
- Confirm that all CIE-required disclosures appear in the correct institutional materials.
- Ensure all board minutes, governance documents, and financial audits are current and on file.

**STEP  
04****Conduct a Pre-Submission Internal Audit**

Before submitting any materials to CIE or preparing for a site visit, run a second internal review using this checklist. This follow-up audit confirms that gap remediation was completed, assigns final scores to each section, and ensures the Compliance Scorecard reflects true institutional readiness.

**Action items for this step:**

- Re-score each section using the Compliance Scorecard after remediation is complete.
- Confirm that all previously incomplete items now have supporting documentation in place.
- Review the Overall Compliance Score Summary and verify no section falls below 90%.
- Conduct a final cross-check of all public-facing materials for accuracy and consistency.

**STEP  
05****Engage Professional Support Where Needed**

Some compliance gaps require more than internal effort; they require expert guidance on regulatory interpretation, documentation strategy, and CIE expectations. Clarion Academic Consulting provides formal compliance readiness assessments, document review, and strategic preparation support for Florida private higher education institutions at every stage of the licensing and accreditation process.

**Action items for this step:**

- Schedule a compliance readiness consultation if your overall score falls below 80%.
- Request a document review for governance, catalog, or enrollment agreement gaps.
- Inquire about ongoing compliance monitoring support between review cycles.
- Contact Clarion Academic Consulting to discuss a tailored compliance support plan.

**Ready to take the next step?**

Clarion Academic Consulting works with Florida private higher education institutions to close compliance gaps, prepare documentation, and build systems that hold up under CIE review.

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**Book a Compliance Readiness Consultation Today**

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# Thank You

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We are grateful you chose Clarion Academic Consulting as a resource on your compliance journey.

*Compliance is not just a regulatory requirement; it is the foundation that allows your institution to serve students with integrity, operate sustainably, and grow with confidence.*

We hope this checklist helps your institution move forward with clarity. If you have questions, encounter gaps that feel overwhelming, or simply want a second set of expert eyes on your documentation; we are here to assist.

*We wish you every success in your compliance review.*

— The Clarion Academic Consulting Team

## Clarion Academic Consulting

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*Disclaimer: This document is provided for informational and self-assessment purposes only. It does not constitute legal, regulatory, or compliance advice. Each institution's circumstances are unique, and compliance requirements may change. Clarion Academic Consulting recommends working with qualified professionals to develop strategies tailored to your specific regulatory environment and timeline.*

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