

**ACCREDITING COMMISSION FOR COMMUNITY AND JUNIOR COLLEGES
Western Association of Schools and Colleges (ACCJC)**



COMMENT ON ACCJC PRACTICES

Contact information for Respondent:

Name _____

Title _____

Email _____

Telephone _____

College affiliation or name of other organization you are representing, if applicable:

Comments (attach additional pages if needed):

Thank you for providing input to us. All input received will be considered by the Commission in its continuous quality improvement efforts regarding ACCJC standards and practices.

**By mail to: ACCJC
ATTN: Written Comments
10 Commercial Blvd., Suite 204
Novato, CA 94949 OR**

By email to: ACCJC@accjc.org.