

**Program Information** 

Name of Program

Joint Review Committee on Education in Radiologic Technology 20 N. Wacker Drive, Suite 2850 Chicago, IL 60606-3182 312.704.5300 www.jrcert.org

## **TEACH-OUT PLAN APPROVAL FORM**

The JRCERT requires a program to submit a Teach-Out Plan for approval upon the occurrence of any event outlined in JRCERT Policy 12.200. The Teach-Out Plan must contain, at a minimum, the following items and must be submitted to the JRCERT for approval. The program must also remit the required fee. Click here to view the current fee schedule.

The form must contain, at a minimum, the below items. Provide any supporting documentation to the below questions in PDF format. Please begin the name of the file with the number of the section to which the document corresponds.

Please send the completed form and any supporting documents to mail@jrcert.org.

Traine of Frogram		
Address		
City		
State		
Zip Code		
Telephone Number		
Fax Number		
Contact Person		
E-Mail Address		
Sponsoring Institution Accrediting Agency		
Specific Date of Program Closure		
II. Students currently enrolled and anticipated graduation date.		

III.	Provide the status of current refunds due and account balances.
IV.	Provide assurance that all student records, including educational financial aid records, are
	maintained in an accessible location and are in accordance with applicable legal requirements in the event the program closes.
٧.	Describe the manner and provide timelines in which the program would notify students in the event of program closure.

VI.	Describe the delivery of the educational program to students.
VII.	Describe specific additional charges to students, if any, and the program's plan for providing advance notification to students of any additional charges.
VIII	Describe specific additional charges to students, if any, and the program's plan for providing advance notification to students of any additional charges.

For items IX. through XIII., please provide a brief narrative and supporting documentation to assure the JRCERT that the program will maintain compliance through program closure.	
IX.	Objective 2.1 - The sponsoring institution provides appropriate administrative support and demonstrates a sound financial commitment to the program.
X.	Objective 2.2 - The sponsoring institution provides the program with the physical resources needed to support the achievement of the program's mission.
XI.	Objective 3.1 - The sponsoring institution provides an adequate number of faculty to meet all educational, accreditation, and administrative requirements.

	3.3 - The sponsoring institution and program assure the responsibilities of d clinical staff are delineated and performed.
· · · · · · · · · · · · · · · · · · ·	4.2 - The program provides a well-structured curriculum that prepares to practice in the professional discipline.
Has the JRCERT	directed the school to submit a Teach-Out Agreement as part of this Teach-Out Plan?
Yes □	No □
Has the program	voluntarily entered into a Teach-Out Agreement as part of this Teach-Out Plan?
Yes □	No □
	stion above, please complete the JRCERT Teach-Out Agreement Approval Form and attach hereto. approve the Teach-Out Agreement prior to implementation.
I certify that the	information herein and attached hereto is correct.
Name:	
	(Chief Executive Officer)
Signature:	qualifies as my signature. Date:

JRCERT Teach Out Plan (05/2021)