



JANET NAPOLITANO  
GOVERNOR

STATE OF ARIZONA  
DEPARTMENT OF VETERANS' SERVICES  
OFFICE OF VETERANS' EDUCATION  
(STATE APPROVING AGENCY)  
3225 NORTH CENTRAL AVENUE, SUITE 910  
PHOENIX, ARIZONA 85012-2407  
(602) 255-5395 FAX (602) 255-1038

PATRICK F. CHORPENNING  
DIRECTOR

September 12, 2003

Dr. Gary L. Passer  
President  
Northland Pioneer College  
P.O. Box 610  
Holbrook, AZ 86205

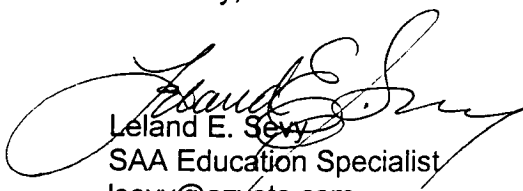
Dear Dr. Passer:

The Arizona Department of Veterans' Services, Office of Veterans' Education, the State Approving Agency (SAA) visited Northland Pioneer College on July 28, 2003. The enclosed report of that visit is provided to you as a follow-up to that visit. Please review the report's comments, discrepancies, and corrective actions.

A copy of this report has been forwarded to the Phoenix Regional Office of the United States Department of Veterans Affairs for their review.

If you have any questions, concerns, or need assistance in regards to the above report, please contact our office at 602-255-5395 or [education@azvets.com](mailto:education@azvets.com).

Sincerely,

  
Leland E. Sevy  
SAA Education Specialist  
[lsevy@azvets.com](mailto:lsevy@azvets.com)  
Cell: 602-677-6562

cc: Director, ADVS  
LO File  
Dr. Carl R. Heilman, Vice-President for Student Services  
Ms. Marva Fellows, Veteran's Coordinator

Enclosure

**ARIZONA DEPARTMENT OF VETERANS' SERVICES  
OFFICE OF VETERANS' EDUCATION  
(STATE APPROVING AGENCY)  
IHL/NCD VISIT REPORT**

TYPE OF VISIT:		<input checked="" type="checkbox"/> SUPERVISION		<input type="checkbox"/> INSPECTION		<input type="checkbox"/> OTHER	
IHL FAC CODE:	14 9144 03	NCD FAC CODE:	14 9145 03	Public	<input checked="" type="checkbox"/>	Private	<input type="checkbox"/>
ACCREDITED	Yes <input checked="" type="checkbox"/>	No	<input type="checkbox"/>	Agency	NCA		
Name of Institution NORTHLAND PIONEER COLLEGE				Date of Last Visit August 7, 2002	Date of This Visit July 28, 2003		
Address (Street, City, ZIP Code) Snowflake, AZ 85937					Phone 928-536-6241		
Personnel Interviewed: Ms. Marva Fellows		Title: Veteran's Coordinator		Phone: same			
Personnel Interviewed: Mr. Mark Vest		Title: Academic Advising, Dean		Phone: same			
Personnel Interviewed:		Title:		Phone:			
Personnel Interviewed:		Title:		Phone:			
Personnel Interviewed:		Title:		Phone:			

<b>1. PRESENT STUDENT ENROLLMENT:</b>							
Number of Veterans Currently Enrolled in an Veterans' Approved Programs, by Chapter:							
	Chapter 30	Chapter 31	Chapter 32	Chapter 35	Chapter 1606	Total Veterans	Total Students
Degree Programs:	24	5		12	1	42	5760
Non - Degree Programs:							
85/15 ratio requirement met						Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
COMMENTS:							

<b>2. SAA / DVA CORRESPONDENCE FILES:</b>		
SAA Approval letters / correspondence available	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
The SAA has approved the current School Catalog	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
The SAA has approved the current School Class Schedule(s)	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Programs and courses being offered to veterans have been approved by the Office of Veterans' Education (SAA)	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Programs and / or courses being offered to veterans are taught via "contract" with another company, institution, or individual that are NOT part of your institution.	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
COMMENTS:		

<b>3. VA FORM 22-8794, DESIGNATION OF CERTIFYING OFFICIAL(S):</b>		
VA Form 22-8794 reflects the current VA Certifying Officials	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Do CO's certify students attending other branch locations or sites	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
COMMENTS:		

<b>4. LICENSURE AND ACCREDITATION:</b>			
The institutions license is current (if applicable) (Private Postsecondary Education, Cosmetology, Barber, FAA, etc.)	N/A <input checked="" type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
All SAA approved programs listed on the applicable license (Private Postsecondary Education, FAA, etc.)	N/A <input checked="" type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
The institutions accreditation document is current (if applicable)	N/A <input type="checkbox"/>	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
COMMENTS:			

5. CHANGES IN INSTITUTIONAL ADMINISTRATION:		
Name / Ownership,	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
State License (if applicable)	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Accreditation (if applicable)	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Location / Facilities,	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Policies,	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Programs,	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Tuition and fees,	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Maximum Student Enrollment (Non-accredited Schools Only),	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Other:	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
COMMENTS: The new Holbrook campus for NPC will be occupied in September.		

6. VACERT:		
VA Cert used by the institution	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
COMMENTS:		

7. WORK STUDY:		
Work study program used by the institution	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
COMMENTS:		

8. MARKETING/ADVERTISEMENTS:		
Degree / Certificate program marketing materials and advertisements contain questionable or misleading information	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
COMMENTS:		

9. STUDENT PLACEMENT:			
The institution provides student employment placement services	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	
Placement Rates indicate areas of concern (Private Institution's Only)	N/A <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
COMMENTS:			

10. DISTANCE LEARNING:			
Programs are offered through Distance Learning exclusively	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	
Programs are offered in which more than 50% of coursework is by Distance Learning	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
Faculty-student interaction is adequate	N/A <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Students are assessed for their suitability to use Distance Learning	N/A <input type="checkbox"/>	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Delivery of Distance Learning used at this institution:			
Interactive Television (2-way)	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
Satellite Teleclasses (1-way)	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	
Open-circuit television	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	
Telecourses (Video)	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	
Computer Based Training (Packaged)	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	
Online Courses	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
Other: Interactive Audio	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
COMMENTS:			

11. INSTRUCTORS:		
Faculty / instructors have adequate credentials to teach in the area they are assigned	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Institution evaluates faculty / instructors	Yes <input type="checkbox"/>	No <input type="checkbox"/>
A plan for faculty and staff development	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Review of instructor records (credentials and evaluations)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
COMMENTS: NOTE: Instructor files are not maintained at the Snowflake campus. Mr. Fellows will be obtaining information on five instructors and mailing them to the SAA. This report will be completed upon receiving and reviewing those records. >>Information was provided on September 12, 2003<<.		

<b>12. VETERAN STUDENT FILES:</b>		
Copies of VA certifications (signed by a designated certifying official) maintained in the file	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Veterans are certified in an SAA approved program	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Copies of "Change in Student Status" maintained in the file	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Certifications and changes in student status completed in a timely manner	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Transcripts showing grades and prior credit available	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Records pertaining to the evaluation and reporting of prior training and experience available	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Program of study / Degree Completion Plan monitored in file	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
COMMENTS: x		

<b>13. INSTITUTION FACILITIES:</b>		
The following facility areas and equipment are adequate		
Classrooms, Labs, student, faculty, and administrative areas	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Student seating and space for learning activities	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Instructional equipment and materials	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Safety, security and disability provisions and considerations	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Additional / temporary facilities or remodeling	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Other:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
COMMENTS:		

<b>14. TECHNICAL ASSISTANCE:</b>		
Technical assistance provided	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
COMMENTS:		

<b>15. RESULTS/CONCLUSION:</b>
DISCREPANCIES: None
CORRECTIVE ACTION REQUIRED: None
COMMENTS/RECOMMENDATIONS: Reviewed the number of VA Counseling requests that were mailed by NPC: 19 were veteran files were reviewed and all 19 indicated that the counseling form was sent to each veteran, out of the 19, 4 had responded with 2 requesting VA counseling.

	Date: July 31, 2003
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PHOENIX, ARIZONA 85012-2407  
(602) 255-5395 FAX (602) 255-1038

PATRICK F. CHORPENNING  
DIRECTOR

August 13, 2003

Dr. Carl R. Heilman  
Vice-President for Student Services  
Northland Pioneer College  
P.O. Box 610  
Holbrook, AZ 86205

Dear Dr. Heilman:

Courses listed in the Northland Pioneer College Class Schedule Fall 2003, for which credit is granted towards an approved associate degree or certificate program, are approved effective August 25, 2003.

The above approval includes programs of study offered at all Northland Pioneer College main sites and additional training centers and site locations as listed in the schedule. Only courses described in the Northland Pioneer College Catalog 2001-2003 and addendum may be certified for veterans' benefits.

The open entry/open exit courses are approved; however, enrollment must be certified after the course is completed. Distance learning/internet courses, for which credit is granted towards an approved associate degree or certificate program, are approved as independent study courses. This approval is made under the provisions of Title 38, Part 21, Section 4267 and applies to those courses that meet the provisions of the law cited above and the Northland Pioneer College's academic administrative procedures.

The above approvals are made under the provisions of Section 3675, Title 38, United States Code and are based upon documentation received on February 8, 2002.

Sincerely,

A handwritten signature in black ink that reads "Michael C. Fugate".

Michael C. Fugate  
Administrator, State Approving Agency

MCF: les

cc: Director, ADVS  
VARO  
LO FILE  
Ms. Marva Fellows, Veteran's Coordinator

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ACCREDITED	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Agency	NCA	
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Personnel Interviewed: Ms. Marva Fellows		Title: Veteran's Coordinator	Phone: same	
Personnel Interviewed: Mark Vest		Title: Dean Student Services	Phone: (928) 532-6141	
Personnel Interviewed:		Title:	Phone:	
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<b>1. PRESENT STUDENT ENROLLMENT:</b>							
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Non - Degree Programs:							
85/15 ratio requirement met						Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
COMMENTS:							

<b>2. SAA / DVA CORRESPONDENCE FILES:</b>		
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COMMENTS:		

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COMMENTS:			

<b>5. CHANGES IN INSTITUTIONAL ADMINISTRATION:</b>
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Accreditation (if applicable)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Location / Facilities,	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Policies,	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Programs,	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Tuition and fees,	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Maximum Student Enrollment (Non-accredited Schools Only),	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Other:	Yes <input type="checkbox"/>	No <input type="checkbox"/>
COMMENTS:		

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VA Cert used by the institution	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
COMMENTS:		

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Work study program used by the institution	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
COMMENTS:		

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COMMENTS:		

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COMMENTS:			

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Online Courses		Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
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COMMENTS:			

<b>11. INSTRUCTORS:</b>		
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Institution evaluates faculty / instructors	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
A plan for faculty and staff development	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Review of Instructor records (credentials and evaluations)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
COMMENTS:		

<b>12. VETERAN STUDENT FILES:</b>
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Transcripts showing grades and prior credit available	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Records pertaining to the evaluation and reporting of prior training and experience available	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Program of study / Degree Completion Plan monitored in file	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
COMMENTS: x		

<b>13. INSTITUTION FACILITIES:</b>		
The following facility areas and equipment are adequate		
Classrooms, Labs, student, faculty, and administrative areas	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
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Instructional equipment and materials	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Safety, security and disability provisions and considerations	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Additional / temporary facilities or remodeling	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Other:	Yes <input type="checkbox"/>	No <input type="checkbox"/>
COMMENTS:		

<b>14. TECHNICAL ASSISTANCE:</b>		
Technical assistance provided	Yes <input type="checkbox"/>	No <input type="checkbox"/>
COMMENTS:		

<b>15. RESULTS/CONCLUSION:</b>
DISCREPANCIES:
CORRECTIVE ACTION REQUIRED:
COMMENTS/RECOMMENDATIONS:

	Date: 7/21/03
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