

SITE VISITOR CATEGORY JUSTIFICATION

Site visit team composition is described in ACAHM's [Site Visitor Policy](#). Generally, site visit teams are comprised of individuals from the categories listed below. It is not unusual for members of a team to have expertise in one or more of the categories. Provide a detailed list of relevant background and experience, excerpted from your curriculum vitae, that qualifies you for service in a category(ies). If you are not qualified/interested in serving for a category, leave the box blank.

Visitor Name: _____ **Date:** _____

Administrator: someone currently or recently directly engaged in a significant manner in postsecondary program or institutional administration (e.g., a President/CEO, Vice-President, or Dean) at an accredited post-secondary institution, not necessarily associated with an ACAHM institution/program.

Academic: someone currently or recently directly engaged in a significant manner in postsecondary teaching and/or research (e.g., a full or part-time faculty member, teaching administrator or researcher) at an accredited post-secondary institution, not necessarily associated with an ACAHM institution/program.

Educator: someone currently or recently directly engaged in a significant manner in postsecondary education in an academic capacity (e.g., a full or part-time faculty member, academic administrator, researcher) associated with an accredited ACAHM program in an accredited post-secondary institution.

Practitioner: someone currently or recently directly engaged in a significant manner in the practice of a profession in an area being evaluated (e.g., an individual working part or full-time using the knowledge and/or skills associated with East Asian medicine). It is preferred that practitioner site visitors be licensed and/or otherwise professionally credentialed in acupuncture.

ACAHM Staff Verification:

Staff have verified that this individual is qualified to serve in the following category(ies) of expertise:

Administrator Academic Educator Practitioner

ACAHM Staff Signature: _____ **Date:** _____

SV Category Justification