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| **MONTESSORI ACCREDITATION COUNCIL FOR TEACHER EDUCATION****Voluntary Withdrawal of Accreditation Form****Instructions:** Complete and email this form and all requested documentation to accreditation@macte.org and the program/institution’s affiliating organization. |
| **This form is to be used for the voluntary withdrawal of accreditation for an entire program/institution, course level(s) (and all related locations) or withdrawal of a single additional location.** |
| **Program Information**  |
| Legal Name of Program/Institution:      Program Name (if different):       |
| **Type of withdrawal** |
| Withdrawal of accreditation for (choose one):[ ]  entire program/institution and all levels and locations ([ ]  check if withdrawal coincides with program ending/institution closing)[ ]  the course level(s) selected and all related locations [ ]  the level(s) selected at a single additional location  |
| **Level(s) Affected** |
| [ ]  Infant Toddler [ ]  Early Childhood [ ]  Elementary I [ ]  Elementary I-II [ ]  Elementary II [ ]  Secondary I [ ]  Secondary I-II [ ]  Administrator |
| **Location(s) Affected**  |
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| **Site Type** (Primary Site, Branch Campus, Additional Location) | **Address** | **Effective Date of Withdrawal** |
|       |        |       |

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| **Attachments to be emailed with voluntary withdrawal of accreditation form** |
| [ ]  1. List of enrolled adult learners still in the process (not completed) and their email addresses[ ]  2. Documentation of proof of notification of withdrawal to incomplete adult learners, including their options for completion[ ]  3. Timeline for completion of program responsibilities to enrolled adult learners[ ]  4. Address where records of past graduates will be maintained[ ]  5. Contact person including contact information (address, telephone, email) |
| **Director’s Statement** |
| I ATTEST THAT our program’s *Voluntary Withdrawal of Accreditation Form* is a true and accurate and supporting documentation is included.**For entire program/institution withdrawals****The program/institution understands that:**1. the MACTE portal will remain open for 14 calendar days after the effective date of withdrawal;2. any reference to MACTE, the MACTE competencies, or the MACTE Quality Principles or Standards must be removed from the program/institution's website, handbooks, syllabi and any other documentation or publications;3. only adult learners who are already registered with MACTE will be considered as graduating from an accredited Montessori teacher education program and be eligible to receive a MACTE seal on their credential. **For Level/Location withdrawals****The program/institution understands that:**1. all of an accredited program/institution’s levels and locations actively enrolling adult learners must be (or applying to become) MACTE accredited;2. the level(s) and location(s) being withdrawn cannot enroll any new cohorts without reapplying for accreditation. |
|       Program Director Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Written Signature/Date        Electronic Signature/Date (type name above)  |      Chief Executive Name     Title\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Written Signature/Date      Electronic Signature/Date (type name above) |