



ALEAP ACCREDITATION TRACKING



Stage of ALEAP Accreditation

IMPORTANT DATES

NOTES

Self-Assessment Start Date*:

Date the ALEAP Commission Approves Agency Application

This date is now your annual anniversary date.

Deadline for Completion*:

24-Months after Commission approved application

This date is when the self-assessment MUST be completed by.

Mock Assessment Date:

Date MUST be 3-4 months before the end of 24-month cycle

Schedule through CAPA on ALEAP website.

Assessor #1: _____

Assessor #2: _____

On-Site Assessment Date:

Date MUST be at least 1-2 months prior end of 24-month cycle

Schedule on-site with ALEAP Program

Director.

Assessor #1: _____

Assessor #2: _____

ALEAP Commission Meeting:

Date

Speak to CAPA about how to prepare for this meeting.

Agency Attendee: _____

Agency Attendee: _____

Agency Attendee: _____

Agency Attendee: _____

AACOP Meeting Award Date:

Date

The accreditation award will be presented at the AACOP meeting, please discuss with CAPA to prepare for presentation.

Agency Attendee: _____

Agency Attendee: _____

Agency Attendee: _____

Agency Attendee: _____

**Proofs of compliance must fall between these dates. Proofs submitted outside these dates will not qualify as proof of compliance.*

4-Year Reaccreditation Cycle

Year 1*	_____	_____	_____	<input type="checkbox"/> Completed
	Start Date (Initial Award Date)	End Date (12-Month Cycle)	ALEAP File Review Date	
Year 2*	_____	_____	_____	<input type="checkbox"/> Completed
	Start Date	End Date	ALEAP File Review Date	
Year 3*	_____	_____	_____	<input type="checkbox"/> Completed
	Start Date	End Date	ALEAP File Review Date	
Year 4*	_____	_____	_____	<i>Schedule through CAPA</i>
	Start Date	End Date (3-4 months prior to actual anniversary date)	Mock Assessment Date 3-4 months prior to anniversary date; Only Year 4 files reviewed.	

Mock Assessor #1: _____

Mock Assessor #2: _____

On-Site Assessment Date: _____ *Schedule on-site with ALEAP Program Director.*
Date MUST be 1-2 months prior to 4-year anniversary date

On-Site Assessor #1: _____

On-Site Assessor #2: _____

ALEAP Commission Meeting: _____ *Speak to CAPA about how to prepare for this meeting.*
Date

Agency Attendee: _____

Agency Attendee: _____

Agency Attendee: _____

Agency Attendee: _____

AACOP Meeting Award Date: _____ *The accreditation award will be presented at the AACOP meeting, please discuss with CAPA to prepare for presentation.*
Date

Agency Attendee: _____

Agency Attendee: _____

Agency Attendee: _____

Agency Attendee: _____

*Proofs of compliance must fall between these dates. Proofs submitted outside these dates will not qualify as proof of compliance.

4-Year Reaccreditation Cycle

Year 1	_____	_____	_____	<input type="checkbox"/> Completed
	Start Date (Reaccreditation Award Date)	End Date (12-Month Cycle)	ALEAP File Review Date	
Year 2	_____	_____	_____	<input type="checkbox"/> Completed
	Start Date	End Date	ALEAP File Review Date	
Year 3	_____	_____	_____	<input type="checkbox"/> Completed
	Start Date	End Date	ALEAP File Review Date	
Year 4	_____	_____	_____	<i>Schedule through CAPA</i>
	Start Date	End Date (3-4 months prior to actual anniversary date)	Mock Assessment Date 3-4 months prior to anniversary date; Only Year 4 files reviewed.	

Mock Assessor #1: _____

Mock Assessor #2: _____

On-Site Assessment Date: _____ *Schedule on-site with ALEAP Program Director.*
Date MUST be 1-2 months prior to 4-year anniversary date

On-Site Assessor #1: _____

On-Site Assessor #2: _____

ALEAP Commission Meeting: _____ *Speak to CAPA about how to prepare for this meeting.*
Date

Agency Attendee: _____

Agency Attendee: _____

Agency Attendee: _____

Agency Attendee: _____

AACOP Meeting Award Date: _____ *The accreditation award will be presented at the AACOP meeting, please discuss with CAPA to prepare for presentation.*
Date

Agency Attendee: _____

Agency Attendee: _____

Agency Attendee: _____

Agency Attendee: _____

**Proofs of compliance must fall between these dates. Proofs submitted outside these dates will not qualify as proof of compliance.*

ALEAP ACCREDITATION TIMELINE

