

**ACCREDITATION REVIEW COUNCIL ON EDUCATION IN SURGICAL TECHNOLOGY AND SURGICAL ASSISTING**  
**[ARC/STSA] sponsored by the**  
**American College of Surgeons [ACS] and Association of Surgical Technologists [AST]**  
**in collaboration with the**  
**COMMISSION ON ACCREDITATION OF ALLIED HEALTH EDUCATION PROGRAMS [CAAHEP]**

**ARC/STSA Maximum Enrollment Capacity (MEC) Change**

Reporting Period August 1 – July 31

A change in MEC must be reported to the ARC/STSA at [info@arcstsa.org](mailto:info@arcstsa.org) within 30 days of the change.

**Please Note:** This form requires the submission of a current **ARC/STSA Clinical Affiliate Site Reporting Form**.

MEC Change    or     One Time Over Enrollment

Sponsoring Institution	Program State
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Approved Number of Students per Cohort		Requested Number of Students per Cohort	
Program’s Current Number of Cohorts		Program’s Requested Number of Cohorts	
Program’s Current Number of Cohorts that Overlap in Clinical at any given point		Program’s Requested Number of Cohorts that Overlap in Clinical at any given point	
Start Date & End Date of Cohort <b>(For One Time Over Enrollment Only)</b>		Implementation Date <b>(For MEC change Only)</b>	

**Attestation of Requirements and Notifications**

- Possesses institutional and community resources to support the proposed change in MEC
- Possesses Program Advisory Committee (PAC) minutes indicating the PAC has been notified of the change

**Attestation of Sufficient Program Resources**

- The program attests to sufficient resources to ensure achievement of the program’s goals and objectives for the program’s stated maximum enrollment capacity.
- Documentation to verify sufficiency of program resources to meet Standard III.A. – Types and Amount
- Documentation to verify sufficiency of program resources to meet Standard III.B. – Faculty Resources
- Documentation to verify sufficiency of program resources to meet Standard III.C. – Curriculum/Clinical Requirements
- Documentation to verify sufficiency of program resources to meet Standard III.D. – Resource Assessment
- Documentation to verify sufficiency of Clinical Affiliation sites and OR Scrub Slots for the proposed MEC change, **ARC/STSA Clinical Affiliate Site Reporting Form** attached

\* If all the above attestations are not checked, please submit a Plan of Action to demonstrate compliance with Standard III. – Resources using the **ARC/STSA Plan of Action Form**.

The Sponsoring Institution President/CEO or their administrative designee acknowledges that the information above is accurate\*\*.

President/CEO or Administrative Designee Signature	Date

\*\*Please note that failure to provide accurate information, verified upon ARC/STSA request or during program review (Site Evaluation) may result in a Recommendation for Probationary Accreditation, which can lead to Withdrawal of Accreditation.

**Please reference Standard III. in the CAAHEP Standards and Guidelines for documentation that must be maintained by the program to demonstrate compliance.**