A change of program director must be reported in writing and submitted by the **immediate supervisor** of the program director at the time of the change. Forms submitted by the program director will not be accepted. Refer to the [ACEND Accreditation Standards](https://www.eatrightpro.org/acend/accreditation-standards-fees-and-policies/acend-policies-and-procedures) for program director requirements in accordance with each program type. **Submit this form and curriculum vitae or résumé electronically to ACEND staff at** **ACENDreports@eatright.org**.

|  |  |
| --- | --- |
| Supervisor Full Name and Credentials: |       |
| Supervisor Signature: |  |
| Institution: |       |
| Title: |       |
| Work Phone: |       | E-mail: |        |

**Program Type:**

|  |  |  |
| --- | --- | --- |
| [ ]  Coordinated Program | [ ]  Dietetic Internship Program | [ ]  Didactic Program in Dietetics  |
| [ ]  Dietetic Technician Program  | [ ]  Graduate Program  | [ ]  Foreign Dietitian Education Program |
| [ ]  International Coordinated Program  | [ ]  Advanced Practice Doctorate Program |  |

**New Program Director Information:**

|  |  |
| --- | --- |
| New program director change effective date: | Click or tap to enter a date. |
| Is this the individual’s first time as a director of an ACEND- accredited program? | Yes [ ]  No [ ]  |
| Full Name: | Last       | First       | M.I.       |
| Title/Position/Credentials:  |       |
| [ ] Registered Dietitian Nutritionist (RDN) **OR** [ ] Nutrition andDietetic Technician Registered (NDTR) (DT programs only)  |
| CDR Registration #: |       |
| Number of years’ experience post CDR credentialingas an RDN or NDTR: |       |
| Institution: |       |
| Address: |       |
|  |       |
|  | City  |       | State  |       | ZIP Code |       |
| Office Phone: |       | Office Fax: |       |
| E-mail: |       | Web URL: |       |
| Employment status:  | Full- time [ ]  Other [ ]  If other, explain:       |
| Faculty status:  | Tenured [ ]   | Non-tenured [ ]   | Adjunct [ ]   | Non-University Position [ ]   | Administrative Staff [ ]  | NA [ ]   |
| Time allocated for program director responsibilities (noted as a percentage, course release or actual hours): |       |
| Degree(s): |       | Institution:  |       |
| **Note:** If the program director does not meet any of the requirements noted in the ACEND Accreditation Standard 1, Required Element 1.5.c, a narrative **must** be included with this request that details the plan to place a program director who meets the specific requirement within Standard 1, Required Element 1.5.c. and the timeline to come into compliance with this requirement.  |