Program of Merit

Health Professions Programs
Gerontology/Geriatrics
Information and Application

Revised May 2018

Providing a Globally Recognized Voluntary Geriatrics/Gerontology
Program Content Evaluation Process

Contact AGHE for additional information or to receive a Health Professions
Gerontology/Geriatrics Application Form

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TABLE OF CONTENTS ~ Health Professions Programs

Program Overview

Purpose of the Program
Prerequisites for Health Professions Programs to Apply for POM Site Visit
Health Professions Program Evaluation Process and Related Information

POM Reviewers and Decision Timeline
Site Visit
Cost of POM Review
Length of POM Designation
Benefits of POM Designation
Outcomes and Appeals Process

Resource List

AGHE Standards and Guidelines, Sixth Edition
Gerontology/Geriatrics Competencies included
AGHE Consultation Program

Frequently Asked Questions

How to Apply

General Guidelines for Program Applicants
Supportive Materials Checklist
Required Documents
Recommended Document

Program of Merit Application Form – Health Professions Programs
Purpose of the Program

In July 1998, the Executive Committee of the Academy for Gerontology in Higher Education (AGHE), formerly known as the Association for Gerontology in Higher Education, approved a proposal to establish and implement a voluntary program of evaluation known as the Program of Merit (POM). The POM designation provides gerontology programs with an AGHE “stamp of approval,” which can be used to verify program quality to administrators, to lobby for additional resources to maintain a quality program, to market the program, and to recruit prospective students into the program.

In 2015, the Program of Merit was expanded and adapted to implement a voluntary evaluation process for health professions programs that are choosing to integrate gerontology/geriatrics competencies in order to prepare students for working with older adults as well as their informal care partners. These programs are now eligible to apply for the Program of Merit designation. The Program of Merit for Health Professions Programs is based on the AGHE Standards and Guidelines for Gerontology/ Geriatrics in Higher Education, Sixth Edition (2015), specifically Chapters 11 and 12.

This international process of evaluation for both Gerontology and Health Professions Programs:

1. Verifies for students that the program is consistent with globally vetted criteria in gerontology and/or geriatrics recognized by AGHE;

2. Informs campus administrators of global guidelines, expectations, and practice in gerontology education and health professions programs;

3. Assures the public of the quality of programs and their graduates;

4. Clarifies for employers the knowledge and skills imparted to students who graduate from POM designated gerontology and health professions programs; and

5. Indicates to interested parties that the program is of high quality.

AGHE’s Academic Program Development Committee oversees the POM initiative. AGHE member and non-member institutions are eligible to apply for a Program of Merit review if they have educational programs in gerontology and/or geriatrics. Specifically, applicable programs include:

1. Health Professions programs that integrate gerontology/geriatrics competencies;

2. Gerontology Programs at the Minor, Certificate, Specialization and Doctoral
levels; (use the POM Application for Gerontology Programs);

3. Programs that culminate in the award of a degree, certificate, minor, or other designation that is reflected on the student’s transcript or through which the student receives identifiable recognition; and

4. Free-standing certificates or degrees and programs integrated into another degree program.

NOTE: Beginning in 2017, gerontology programs globally that offer degrees at the associate, baccalaureate, and master’s levels are eligible for accreditation review by the Accreditation for Gerontology Education Council (AGEC).

**Prerequisites for Health Professions Programs to Apply for POM**

The POM application for Health Professions programs is specifically designed for any health professions program within 2 and 4 year educational institutions within the US and globally. Health Professions programs applying for POM must meet the following prerequisites:

1. Comprehensive gerontology/geriatrics competencies integration (per the AGHE Standards and Guidelines, 2016);

2. A sequenced curriculum so that introductory information precedes advanced information;

3. A list of gerontology/geriatrics courses and/or gerontology/geriatrics competencies that have been integrated into the health profession program curriculum;

4. Identifiable objectives and/or learning statements that make it clear how gerontology/geriatrics competencies and/or content are addressed in the curriculum;

5. Confirmation that the health profession program is a recognized program within the educational institution; and

6. Support by the host academic institution for the health professions program to undergo Program of Merit review for Health Professions Programs.

**Health Professions Program Evaluation Process and Related Information**

The program being evaluated provides a self-study report using the Program of Merit Application Form for Health Professions Programs. This report should compare the program
The self-study report should include statements on the need for gerontology/geriatrics competencies inclusion within the health professions program; description of the instructional program, students, and student services; an outline of the organizational structure and administration; and a description of the relationship with the community. There is currently no application deadline, but this is subject to change by the AGHE Executive Committee.

**POM Reviewers and Decision Timeline.** Senior faculty from three colleges or universities (other than the one being evaluated) are selected and appointed by the POM Chair(s) to be a POM Review Team. All POM Review Teams have been trained to evaluate self-study reports. Efforts are made to select reviewers from diverse institutional settings with one reviewer from an institution comparable to the applicant’s institution and/or applicant’s program. Reviewers base their evaluations on their expertise and a set of guidelines that have been developed for this purpose. This is a confidential review; the identities of members of each POM Review Team are not disclosed.

To help manage the cost of the POM process, reviewers donate their services to AGHE. Therefore, the number of POM applications are limited to ten per year unless the AGHE Executive Committee determines that there is the capacity to complete more in a given year. If applications for the POM designation exceed the maximum number of 10, priority will be given to AGHE member institutions. In all cases, those institutions waiting for review will be notified that their applications are pending and will be given an approximate completion date. The POM Review Committee will make every effort to work with AGHE member institutions to coordinate the scheduling of the review process so that it coincides with the needs of applicants.

At the completion of the review process the AGHE director (or designee) will send a letter indicating the Executive Committee’s decision and a summary of the review to the program applicant. This information can also be sent to a designated administrator should this be desired by the program applicant.

**Site Visit.** No site visits are conducted for the POM review process, however reviewers may confer with the Program of Merit Chair to request additional informal or clarify points in an application. The POM chair will correspond with the program applicant to relay such requests. If faculty or administrators of the program being evaluated desire a site visit and a more formal and integrated evaluation report, the AGHE Consultation Program would be the appropriate avenue for this additional work.

**Cost of POM Review.** The charge for a review is $600 for AGHE member institutions and $1,400 for non-member institutions. The cost of maintaining records, verification of program status, and distribution of lists of programs with the POM designation is included in the initial review fee. If an institution desires more than one program to undergo POM review (e.g., a nursing program and physician assistant program), an additional cost of $400 per program will
be charged. The POM review of two or more programs within the same institution will require distinct applications for each and the reviews will be conducted by separate Review Teams. It is suggested that one program application is submitted for review so that feedback from the review can be considered for the remaining applications. Conversation with the POM Chair will assist in setting up applications submissions.

**Length of POM Designation.** The POM designation is for a period of five years. At the end of four years, the program applicant will be notified that the POM designation is nearing its completion. If there are no significant changes to the program during the five-year period, the institution may choose to pursue a POM renewal that involves an addendum to the original application. If the program underwent substantive changes (i.e., changes in positions, number of faculty, curricular changes, etc.) then the applicant must submit a full POM application. The charge for renewal regardless of whether there is a full application or addendum is $600 for AGHE members and $1,400 for non-members.

**Benefits of POM Designation.** Once a program is recognized by the Program of Merit designation the following will occur: (1) A program representative will receive a framed POM certificate at the AGHE Annual Meeting; (2) the program will be listed on the AGHE Website, POM page, which can be linked to the institution’s website; (3) each year of the POM designation, program graduates will receive a personalized certificate (suitable for framing) stating that the student graduated from a health professions program (name of program and institution included) that is recognized as an Academy for Gerontology in Higher Education Program of Merit. Additional benefits include using the POM designation to increase marketing and enrollment, to highlight on grant applications, to garner support from administrators within the institution, and possible inclusion on students transcripts.

**Outcomes and Appeals Process.** The Review Team puts forth its recommendation to the POM Chair and Co-Chair. One of three recommendations can be made by the Review Team:

1. **POM Recommended Unconditionally**
2. **POM Recommended Conditionally**
   - Conditions are outlined and a timeline to address the conditions not to exceed 12 months from the time of the review decision. (Longer extensions must be approved by the POM Chair(s) and the AGHE director or designee).
   - A program’s application can be held up to 12 months to allow for the necessary improvements to be made.
   - Once required documentation has been received indicating that the deficiencies have been remedied, the Review Team will make a final recommendation to the POM Chair(s), who in turn will present the decision to the AGHE Executive Committee for ratification.
3. **POM Denied**
   - Communication and documentation of program deficiencies is shared with the applicant.

The AGHE Executive Committee must ratify the decision, regardless of the decision of the POM Review Team and POM Chair(s).
If the Program applicant disagrees with either decision 2 or 3 (above) the following course of action may be pursued.

1. The decision of the POM Review Team may be appealed. Appeals must be filed within three months of the decision. The AGHE director (or designee), the POM Chair or Co-Chair, and one member of the Review Team who conducted the review examine the reason for the appeal and its supporting documentation put forth by the program applicant. A decision on the appeal is made within three months of receipt of the appeal;

2. If the appeal is won the appropriate POM designation is awarded, effective immediately;

3. If the appeal fails, a program may submit a new application to apply for the POM designation after the programmatic deficiencies pointed out in the original review have been addressed.

Resource List

**AGHE Standards and Guidelines for Gerontology and Geriatrics Programs, Sixth Edition (2015).** This publication outlines standards and guidelines for the development of gerontology instruction in institutions of higher education. The document includes a set of recommendations for gerontology program development that applies to any program regardless of academic level or type of credential awarded, as well as curricular guidelines, gerontology/geriatrics competencies, and policy recommendations for gerontology or health professions programs.

Included in Appendices:

- *AGHE Gerontology Competencies for Undergraduate and Graduate Education*
- *Partnership for Health and Aging Health Professions Competencies*

**AGHE Consultation Program.** The Consultation Program was developed to assist community and four-year colleges and universities in developing new gerontology/geriatrics instruction and to expand or evaluate existing gerontology/geriatrics programs. The Consultation Program aids in pairing a skilled consultant to assist with objectively developing and/or evaluating any aspect of the program, including its placement within the institutional structure. A consultant also provides unbiased verification of the need for change in gerontology/geriatrics instruction and justification for proposals to modify a program’s offerings in aging.

Contact Gena Schoen, AGHE Program Manager, at (202) 289-9806 or visit the website [www.geron.org](http://www.geron.org) for ordering information.
FREQUENTLY ASKED QUESTIONS

What is the POM proposal all about?

The POM for Health Professions programs is intended to provide a system of review for a variety of programmatic levels within institutions of higher education. The POM currently reviews gerontology education programs and now has a process for reviewing any health professions program that applies the competencies in gerontology/geriatrics. AGHE is the organizational body established to evaluate and recognize health professions programs that abide by AGHE’s Standards and Guidelines (either Chapter 11 or Chapter 12) in higher education. The POM designation provides these programs with an AGHE “stamp of approval,” which can be used to verify program quality to administrators, to lobby for additional resources to maintain a quality program, to market the program, and to recruit prospective students into the program.

What costs are involved?

The fee for the evaluation process is kept to a minimum. Because the evaluation is based on a self-study report, this avoids costly site visits. There are other costs, however, which are rolled into the $600 fee to AGHE member institutions. These costs include printed materials, mailings, phone calls, and AGHE staff support. This is a valuable benefit for AGHE member institutions, because non-members are charged $1,400 for the same evaluation (Membership Information: www.geron.org).

Some smaller programs will be penalized if the institution has less of an ability to support the program. How will this be addressed?

The POM was designed to be a cost-effective method of evaluation that would be affordable for all institutions. The essential criteria are supplied by AGHE’s Standards and Guidelines (Chapters 11 or 12) regardless of the size of the program. The review process takes into consideration the local context (e.g., budgetary support, staff support, and local need for the program) of the program applying for the POM designation. These considerations should be emphasized in the self-study report.

Do we need specific courses in gerontology and/or geriatrics in order to be recognized as a Program of Merit?

Health professions programs have their own accreditation process, which may create curricular constraints due to credit hours and/or time. Creating courses dedicated to gerontology or geriatrics content may be possible for some programs but can be a challenge for other health professions programs. As such, the POM for Health Professions Programs is based on gerontology/geriatrics competencies (provided in Chapters 11 or 12 in the AGHE Standards and Guidelines, Sixth Edition, 2015). Existing courses within a health professions curriculum can be adjusted to include identifiable competencies (often stated as objectives) related to the field of aging and caring for older adults and their care partners. Many health professions programs have
already updated their curricula to include this important demographic because it is expected that each student who graduates from any health professions program will encounter older adults in his or her practice. Case in point, even if graduates plan to work with children, four in ten grandparents are the primary caregivers for their grandchildren, and this number is on the rise.

**Are we taking a risk by applying for a POM designation? What if we don’t get it?**

The POM process is designed to be **constructive** (recognizing the existing strengths of a program), **directive** (offering specific recommendations for the improvement of a program to bring it in line with AGHE’s *Standards and Guidelines*), and **protective** (providing results in such a way as not to put a program in jeopardy). The results of the evaluation process can be used for an internal review to examine areas for program improvement. Therefore, the results do not need to be sent or shared with higher administration. Whether or not the results of the evaluation are shared is left to the discretion of the program applicant. A letter can be sent to higher administration if the review process is favorable, or to only the program applicant if the results suggest areas for improvement before the POM designation can be awarded.

It should be kept in mind that packets for the self-study review and criteria the reviewers use are made available in advance as part of the application process. The program applicant may discuss his/her health professions program with the POM Chair(s) and review the POM criteria prior to deciding to apply for POM. The formal application process may begin at any time, allowing ample time for program applicants to address program deficiencies that may have been identified during the early stages of POM inquiry.

**What does it say about a program if it does not apply for the POM designation?**

Not applying for the POM designation could mean that the program is still in a period of development or transition, possibly the program is unclear about how to integrate gerontology/geriatrics competencies into its curriculum (See AGHE Resources: Consultation Program), or does not believe in the value of such recognition. If not applying suggests that the program is not addressing the field of aging adequately and is a concern, and the program is an AGHE member institution, the AGHE staff has always been willing to send supportive letters stating that a particular program is valued as an AGHE member and emphasizing the general importance and timeliness of including gerontology/geriatrics competencies given the demographic trends within our society.

**Can a program that is considering applying for the POM designation know ahead of time what its chances are of having a favorable outcome?**

AGHE periodically provides information about the POM through a variety of means – pre-conference workshops held in conjunction with the AGHE annual meeting, presentations during the annual meeting, and articles published in the *AGHEExchange* newsletter. The AGHE POM Chair(s) is/are historically quite forthcoming, and a time can be planned to discuss whether the program in question is ready for the POM review. Information is also posted on the GSA website ([www.geron.org](http://www.geron.org)).
HOW TO APPLY

General Guidelines for Program Applicants

The following guidelines will assist you in writing your self-study report for the POM. If you have questions about these guidelines or the POM Application Form, please contact Gena Schoen, AGHE Program Manager at (202) 289-9806 or membership@geron.org.

1. The self-study narrative (excluding Table of Contents, syllabi, and supportive materials) should be no more than 30 pages in length.

2. Include a Table of Contents (not included in the 30-page limit).

3. Type the document. Use normal 1” margins and 12-pt font.

4. Label appropriately all items included in the appendices, and cite each one in the text of the self-study narrative.

5. Use charts and tables when appropriate (e.g., budget, student enrollment rates, graduation rates) to help clarify or illustrate points discussed in the self-study.

6. Create one PDF file of main application materials, one PDF of Syllabus or Syllabi, and one PDF of all Curriculum Vitae to be submitted for review.

Supportive Materials Checklist

Required Documents

☐ College or university catalog (send separately or provide web link);

☐ Assessment plan for the health professions program as it relates to gerontology/geriatrics competencies;

☐ Syllabi for all courses or competency/outcome-based curricula included in the health professions program and how gerontology/geriatrics competencies are integrated within the program curriculum;

☐ Field (practitioner) supervisor’s evaluation form (or other forms to assess students’ performance in the field with regard to gerontology/geriatrics competence);

☐ Gerontology/geriatrics competency-based evaluation form – how identifiable
objectives are measured to assure student learning outcomes; and

☐ Curriculum vitae for faculty whose primary teaching duties are in the gerontology program.

**Recommended Documents (include in order to facilitate the review process)**

☐ Letters of support – one or two letters of support for the program from administrators (e.g., department head, dean, provost) and two or three letters from community agency representatives. If you are not submitting letters with your application materials, please explain why;

☐ Learning Matrix – a “map” of the relationship between the competencies and student learning outcomes in which various objectives or competencies are applied and assessed, the Program should provide a matrix outlining the timeline and assessment for student learning outcomes during each year of the assessment cycle;

☐ Advisement survey instrument (if one is used) and summary report.

Please save all materials as one PDF file except syllabus (or syllabi) and CVs should be saved in 2 separate pdf files; therefore submitting 3 pdf files for the POM review.

Submit application to Gena Schoen, AGHE Program Manager:

[membership@geron.org](mailto:membership@geron.org)

**Subject Line:** Program of Merit
Part I  Overview, History, and Description of the Program

Questions in this section are intended to give reviewers a clear sense of what your program is, how it operates, whom it serves, how it is administered, and so forth. Information from this section is essential for reviewers to have a sense of context as they read about your program goals, accomplishments, and challenges in your self-evaluation (Part II).

A. Title of the Health Professions Program

Provide the official level of the credential (i.e., associate, baccalaureate, masters, doctoral, other).

B. History of the Program in relation to Gerontology/Geriatrics Competencies Integration

Please discuss the evolution of your program. Address the following issues:

1. How long has the health profession program been in existence? How long have gerontology/geriatrics competencies been included?

2. Describe the evolution of gerontology/geriatrics competencies inclusion into the program? What obstacles and/or support contributed to including aging in the curriculum?

3. What have been the program’s significant achievements and did the integration of gerontology/geriatrics competencies contribute to these?

4. What have been ongoing problems or difficulties with the program?

5. What problems currently need to be addressed?

6. Describe how the program has changed over the years regarding leadership, content, college or university status, etc.
7. Discuss the size of the college/university, and changes in the college/university which have affected your program.

8. Briefly describe the community (geographic and demographic) your institution serves.

C. Program Mission

Describe the mission of the program as well as any stated mission or goal regarding the inclusion of gerontology/geriatrics content. How does this mission fit into the broader mission of the college/university?

D. Major Challenges and Opportunities

What are the challenges and opportunities confronting the program in the next five years regarding inclusion of gerontology/geriatrics content?

E. Organizational Structure and Administration

1. Is there a position dedicated to gerontology/geriatrics within your program? If so, how is this person selected or appointed and renewed, what is the term of the appointment? (Please include this person’s job description.)

2. Is there a person and/or committee who is responsible for designing, implementing, and managing the gerontology/geriatrics content for the program? If so, please describe the position or committee make up, how the person is selected or committee members appointed and to whom does the person or committee chair report? If there is a term of appointment please provide information about this.

3. Does the health professions program director have authority to do what needs to be done to assure inclusion of gerontology/geriatrics content in the program?

4. Is the level of administrative staffing appropriate?
   a. What types of clerical support is needed with regard to the inclusion of gerontology/geriatrics content?
   b. Is support staff available to assist with these responsibilities? Describe how this functions within the program?

5. Are there special budgetary needs associated with implementing the gerontology/geriatrics content such as funding for visiting lecturers?
   a. Describe how gerontology/geriatrics content integration is funded and if that funding is adequate to support continued integration.
   b. Who manages the budget for gerontology/geriatrics content integration (if applicable).
c. Describe institutional support and any other sources of income, including
grant activities. Is this support ongoing or temporary? Is the support
increasing, decreasing, or staying about the same?

F. Students

1. What is the average length of time (years) for program completion for enrolled
students? How many students completed your program in the past year? How
many are currently enrolled? What is the average enrollment over the past three
years? Is that number increasing, decreasing, or staying the same?

2. Are there accommodations for students to express an interest in the field of aging
and if so are there ways they can advance their education in
gerontology/geriatrics?

3. Do you actively recruit students that have an interest in gerontology/geriatrics? If
so, describe the process(es) that you apply to do this outreach and recruitment.

G. Faculty

1. How many full time faculty teach in your program?
2. How many part-time faculty, adjunct, and/or visiting lecturers teach in our
program?
3. How many of the faculty have training or expertise in gerontology/geriatrics?

H. Relationship with the Community

1. Describe current relationships with agencies and organizations within the
community and how they relate to the gerontology/geriatrics content within the
program. Discuss the extent to which such a connection contributes to supporting
the education of students in gerontology/geriatrics content in the program.

   a. What opportunities do students have to participate in a volunteer capacity?
      Provide examples and approximate hours in an academic year?
   b. Describe any aging related practicums or internships that are available to
      students. Provide number of hours committed to these experiences and
      provide examples.

2. Address if there have been changes over the years with regard to your relationship
   with and activity within the community in the field of aging.

3. Is there a community advisory committee to the gerontology/geriatrics content? If
   so, how are members appointed? What is the committee’s function?
4. Does your program provide or help to plan special events such as conferences, workshops, and lectures focused on aging? If so, provide details.
5. Are continuing education and/or community service programs offered on aging? If yes, provide information on this and address in what ways are those programs consistent with the goals of the program?

I. Innovation
If you have any innovative ways of working with gerontology/geriatrics content integration regarding programming, curriculum integration, funding, working with the community that has not been addressed above, please describe each innovation.

Part II Self-Evaluation
In this section you are asked to present your reflections on your program’s gerontology/geriatrics competencies in relation to the curriculum. Whenever appropriate, refer to local context to explain the ways in which the health professions program’s gerontology/geriatrics competencies adheres to or departs from the AGHE Standards and Guidelines for Gerontology and Geriatrics Programs, Sixth Edition (2015) Chapter 11 or 12 (depending on the program). For points of departure, a rationale must be stated ensuring that the health professions program is attending to key gerontology/geriatrics competencies.

A. Components of the Gerontology/Geriatrics Instructional Program

1. What are the gerontology/geriatrics goals of the program?
   a. What are the program’s gerontology/geriatrics learning outcome goals for students? What should students know and be able to do when they complete the program?
   b. In what ways are those goals consistent with the mission of your program and academic institution?
   c. Your gerontology/geriatrics program content goals should have an assessment plan for determining whether goals have been met. Do you assess by course or overall content on aging offered throughout the program? What criteria are used to assess geriatrics/gerontology content quality? What progress, if any, has been made in advancing gerontology/geriatrics education from using the results of past assessment(s)? Please attach the assessment plan and the evaluation tools used as an appendix to this application form.
   d. How successful has the gerontology/geriatrics content been in reaching those goals? Of the goals mentioned, which goals have been met? Which have not?
   e. In what way, if any, do the goals need to be changed?

Note: If the term “goals” is not common vernacular within the program, state the term or language that is applicable and describe or define this within the application.
2. Describe the gerontology/geriatrics competencies/curriculum (attach pertinent materials in the appendices to this application form).
   a. Describe how content is in line with AGHE Standards and Guidelines, Sixth Edition (2015). Refer to Chapter 11 (Health Professions) or Chapter 12 (Osteopathic Medicine).
   b. Does the gerontology/geriatrics content deviate from the recommendations within the AGHE Standards and Guidelines, Sixth Edition (2015)? If so, please explain how the content deviates and the rationale for doing so. How does this affect the quality of education received by students?
   c. For programs that have designed learning activities not reliant on course structure that are competency-based, provide the structure for the gerontology/geriatrics content and how it is assessed.

4. Is there a practicum, field placement, internship, clerkship or any similar educational experience in which students are in the community that has a focus on gerontology/geriatrics or has an aging related component? (If not, proceed to section B. Faculty).
   a. In what ways is the practicum (etc.) learning modality consistent with the gerontology/geriatrics content and learning outcomes of the program?
   b. How many contact hours are required?
   c. How are students supervised and evaluated?
   d. Have your practica (etc.) been successful in advancing attitudes, skills and knowledge in the field aging? How is this “success” measured?
   e. Describe the benefits for students? For community agencies? For older adults?

5. If a practicum, field placement, internship or clerkship is not required, why not?

6. Are there opportunities beyond the field placement or practicum for students to interact with older adults (e.g., service-learning, volunteerism) within the community? If so, please describe these opportunities and how they are important or contribute to your students learning about aging?

B. Faculty

1. Is the number of full-time faculty members adequate to teach gerontology/geriatrics competencies? Is the current mode of staffing (i.e., balance of full-time to part-time, tenure-line to adjunct, etc.) appropriate and desirable?

2. Does the faculty have the appropriate preparation to teach the gerontology/geriatrics competencies in your program?
   a. What types of faculty development opportunities/programs in aging are in place?
b. Who controls the resources used for faculty development?

C. Students and Student Services

1. Is there an organization on campus specifically for students in the field of aging (e.g., gerontology or geriatrics club) to socialize students into the field of aging, integrate them into the larger community, and give them a sense of cohesion?

   a. What type of organization is this (e.g., social, service)?
   b. In what activities does the organization participate on a regular basis?
   c. How do the activities of the organization relate to the overall objectives of the gerontology/geriatrics content within the program? Of the college/university?
   d. How is the organization supervised? Is there a faculty member assigned to advise the organization? Are there officers or a leadership structure within the organization?

2. How is student satisfaction with gerontology/geriatrics instruction measured?

   a. Describe any mechanisms used to elicit student feedback about the content related to aging in the program.
   b. In what areas are students satisfied? Dissatisfied?
   c. Have there been changes in the level of satisfaction over the years regarding gerontology/content?

3. Describe any opportunities for advising, mentorship, or research sponsorship that is available to students that directly relates to the field of aging.

   a. How does this contribute to advancing students interests in the field of aging or working with older adults?
   b. How are opportunities in aging shared with students?
   c. What avenues do students have to find out about opportunities in aging or working with older adults?

Please save all materials as one PDF file except syllabus (or syllabi) and CVs should be saved in 2 separate pdf files; therefore submitting 3 pdf files for the POM review.

Submit application to Gena Schoen, AGHE Program Manager:

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Subject Line: Program of Merit
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