

Table of Contents

[GENERAL INFORMATION 3](#_Toc132614951)

[Introduction 3](#_Toc132614952)

[Aim 3](#_Toc132614953)

[Content 3](#_Toc132614954)

[The Writing and Publication of the Report 4](#_Toc132614955)

[ANNEX. 1 INSTITUTIONAL SELF-EVALUATION REPORT TEMPLATE 9](#_Toc132614956)

[SUMMARY 9](#_Toc132614957)

[INFORMATION ON THE INSTITUTION 9](#_Toc132614958)

[1. Contact Information 9](#_Toc132614959)

[2. Institutional History 9](#_Toc132614960)

[3. Mission, Vision, Values and Objectives 9](#_Toc132614961)

[A. LEADERSHIP, GOVERNANCE AND QUALITY 9](#_Toc132614962)

[B. LEARNING AND TEACHING 9](#_Toc132614963)

[C. RESEARCH AND DEVELOPMENT 9](#_Toc132614964)

[D. SERVICE TO SOCIETY 9](#_Toc132614965)

[CONCLUSION 9](#_Toc132614966)

[ANNEX.2 PERFORMANCE INDICATORS 57](#_Toc132614967)

# GENERAL INFORMATION

Introduction

The Institutional Self-Evaluation Report (ISER) is annually written by the institution with the aim of following annual self-evaluation processes of the institution and presenting a point of reference for the Evaluation Programs (Institutional External Evaluation Program, Institutional Accreditation Program, Follow-up Program, and Mid-term Evaluation Program), and is submitted to the Turkish Higher Education Quality Council (THEQC). This guide sets forth the rules to be applied in writing a self-evaluation report in addition to a list of remarks and recommendations on the subject, the ISER report template (Annex-1) and the remarks on indicators (Annex-2).

Aim

The aim of the ISER is to help the institution recognize its strengths and areas for further improvement while contributing to the institution’s improvement steps. The ISER of the institution is the foremost output of the self-evaluation works of the institution. Attaining an ISER which has a high level of maturity is possible only by running the internal quality assurance system and internal evaluation works efficiently and effectively.

The drafting process of the report provides the institution with an opportunity to preeminently benefit from the Institutional External Evaluation Program, Institutional Accreditation Program, Follow-up Program, and Mid-term Evaluation Program processes. The ISER should be employed for establishing contact and cooperation among stakeholders, within self-evaluation activities, and for the dissemination and internalization of quality assurance culture. To enhance the contribution of the drafting process to the institution, inclusiveness and participation must be ensured in the activities, a process management approach must be adopted rather than bureaucratic data management, and transparency must be ensured in quality commission works as well as continuous training activities.

Content

The maturity level of the higher education institiution's internal quality assurance system should be examined in the ISER. Within this scope, the questions below are to be addressed, based on evidence:

* How to plan and manage the resources and competencies at hand within the processes of quality assurance system, learning and teaching, research and development, service to society, and governance system in accordance with the institution's values, mission and objectives;
* How an institution carries out the practices of follow-up and improvement as to the processes throughout the institution,
* How to provide stakeholder involvement and comprehensiveness in planning, implementing, follow-up and improvement processes,
* What an institution's strengths and areas for improvement in its internal quality assurance system are,
* The reasons for the improvements that could not be realized,
* How an institution ensures sustainability in its quality assurance system to maintain its competitive advantage within the scope of the rapidly changing agenda of higher education.

The ISER should be written on the Quality Assurance Management Information System (QAMIS) by considering the THEQC Evaluation Criteria, the Institutional Self-Evaluation Report Writing Guide, THEQC Rubric and the ISERs and external evaluation reports submitted in the previous years. The information given in the report should be supported by various documents and evidence.

The Writing and Publication of the Report

#### The ISERs are required to be uploaded on the Quality Assurance Management Information System (QAMIS) developed by THEQC. For the uploading process, the higher education institution’s quality commission chair or a person delegated by the commission chair will be authorized to log in to the web-based system as administrator. The person authorized to log in to the system as administrator can create user accounts and roles for the employees of the institution. After institutions upload their ISERs on the system, the ISERs will be published on the THEQC’s official website [www.yokak.gov.tr](http://www.yokak.gov.tr). Besides, higher education institutions are expected to publish their ISERs on their own websites.

The THEQC Rubric

* Institutional evaluation processes of THEQC are carried out with 14 criteria and 46 sub-criteria with a holistic perspective under the headings of *Leadership, Governance and Quality, Learning and Teaching, Research and Development, and Service to Society.* The basic tool used in evaluation processes is the THEQC Rubric. The THEQC Rubric is an assessment tool used in the internal evaluation works of higher education institutions and in writing institutional self-evaluation reports as well as in external evaluation processes. It has been developed to increase clarity, objectivity, comprehensibility, consistency and transparency in THEQC's external evaluation or decision-making processes.
* The quality assurance process or mechanisms for each sub-criterion in the THEQC Rubric have been defined considering the maturity levels of planning, doing, checking and acting (PDCA) steps, and rated on a scale of 1-5. The sub-criteria, whose maturity level is determined with this rubric, reveal the level of fulfillment of the relevant criteria.The maturity levels of the sub-criteria associated with the PDCA cycle are summarized in Figure 1.

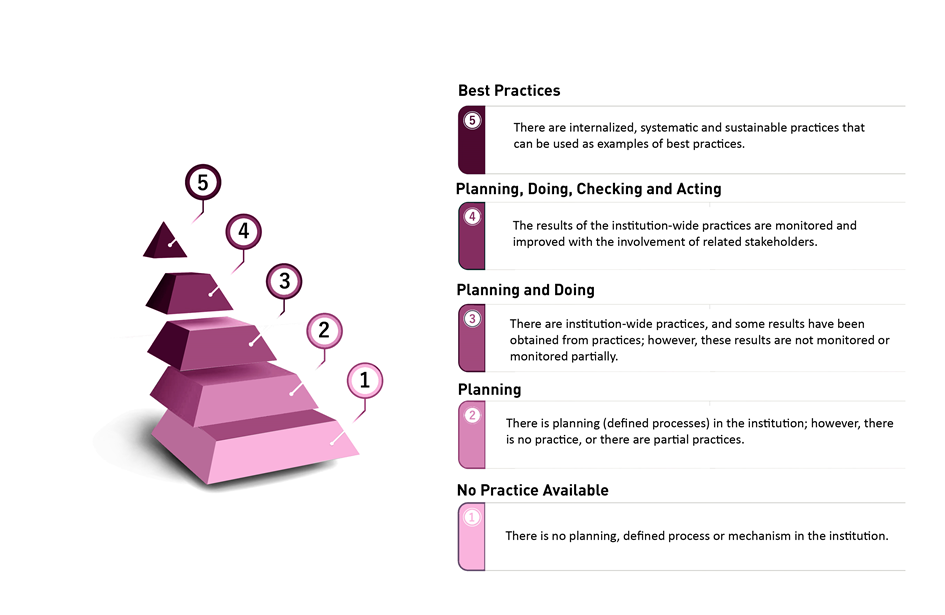


Diagram 1. Rating of the Maturity Levels of Sub-criteria via the THEQC Rubric

* While writing a report by means of QAMIS, remarks should be added for each criterion under the “headings” section, and the maturity levels of sub-criteria should be referred to while writing remarks on the related criteria. An example for organizing headings, criteria and sub-criteria is presented in Table 1.

Table 1. The organization of headings, criteria and sub-criteria in writing the ISERs

|  |  |  |
| --- | --- | --- |
| Title | B. Learning and Teaching | A set of criteria and sub-criteria are listed under the headings. |
| Criterion | B.1. Program Design, Evaluation and Update | The ISERs will be written on the basis of criteria. |
| Sub-criterion | B.1.5. Follow-up and updating of programs | Sub-criteria will be referred to in the writing of criteria and their maturity level will be supported with evidence and scaled via QAMIS. Any additional remarks for the subcriteria will not be written. |

* The THEQC Rubric used for the evaluation of maturity levels of sub-criteria consists of steps rated on a scale of 1-5. Prerequisite steps should be completed to be able to proceed to the next maturity level (Figure 2).

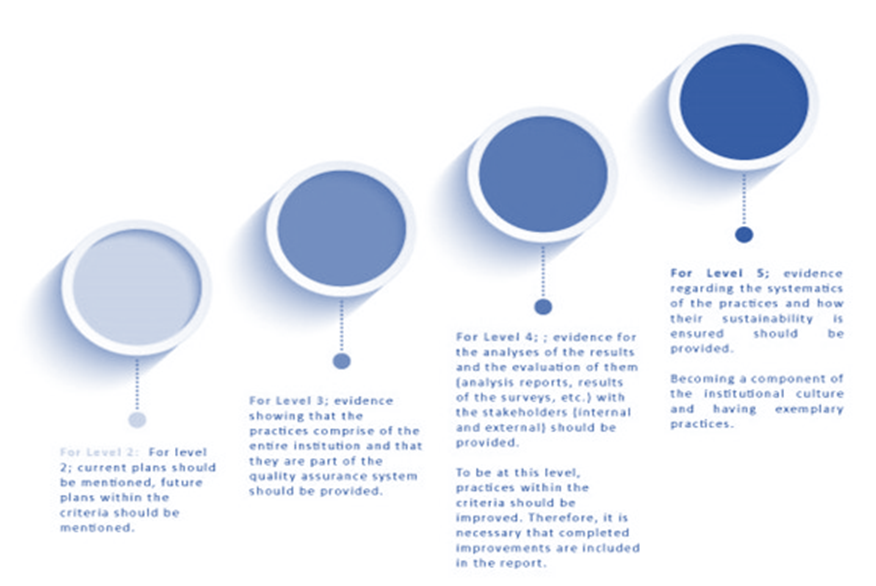


Diagram 2. Scaling Steps for Maturity Levels

* In order to decide on maturity level 4 in a sub-criterion;
  + Practices should be spread throughout the entire institution,
  + Results should have been attained from the practices,
  + These results should be followed up,
  + Practices should be improved by evaluating the results of the follow-up together with the relevant stakeholders,
  + All these need to be supported by evidence.
* In order to decide on maturity level 5 in a sub-criterion, in addition to the points above, the following should be evidenced:
* Systematics and sustainability of the practices (PDCA cycle to be completed a couple of times),
* Practices are internalized and contribute to the entire institution,
* Evidence for being an exemplary model sub-criterion is present (This should be confirmed by an independent institution or organization).
* In the guide, evidence that is expected regarding the level of meeting the criteria is included in the *“sample evidence”* section under each sub-criterion. Evidence presented should be consistent with the report content and selected maturity level; it should also be diversified to support the explanations made. In some cases, an information, record or document may be evidence of multiple criteria / sub-criteria. In this case, only the relevant parts of the information, record or document should be referred.

* After providing general information on the institution and its quality assurance system, learning and teaching, research and development, service to society, and governance system in the first annual report, these aspects are not required to be stated again in following reports. It is sufficient to provide statements on the changed and improved aspects and the areas that could not be improved. If the institution is included in the external evaluation program, the report must comprise the improvement activities carried out in line with the feedback provided in the Institutional Feedback Report (IFR)/Institutional Accreditation Report (IAR)/Institutional Follow-up Report (IFuR), the concrete improvement outcomes in this scope, the points that could not be improved, and the underlying reasons impeding improvement.
* Instead of giving short answers such as *“this aspect is present in our institution”*, *"implementation regarding this aspect is available"*, *"the mentioned system is available in our institution,"* a methodology that thoroughly illustrates how the relevant process operates and is managed in the institution should be adopted when writing the ISER report with consideration of the aspects stated in the guide. It should also be noted that any additional specific situation and/or data peculiar to the institution other than the ones stated in the guide can be included in the report.

# ANNEX. 1 INSTITUTIONAL SELF-EVALUATION REPORT TEMPLATE

# SUMMARY

In this section, brief information about the purpose, scope and drafting process of the report should be included. The key findings of the institution's self-evaluation work should be summarized.

# INFORMATION ON THE INSTITUTION

This section should include information on the institution’s history, mission, vision, values, objectives, organizational structure and areas for further development and should be organized in a way to encompass the following aspects.

1. Contact Information

The contact information (name, address, telephone, e-mail etc.) of the higher education institution’s quality commission chair (rector or relevant vice-rector), whom the evaluation team will contact during the report review and/or site visit process, should be provided.

2. Institutional History

Brief information on the institution’s history and current situation (total number of students, number of academic and administrative staff, infrastructural conditions etc.) should be provided .

3. Mission, Vision, Values and Objectives

The institution’s mission, vision, values and objectives should be summarized in this section to answer the question “What does the institution intend to achieve?” .

The THEQC Rubric will be used for writing the headings below.

1. LEADERSHIP, GOVERNANCE AND QUALITY
2. LEARNING AND TEACHING
3. RESEARCH AND DEVELOPMENT
4. SERVICE TO SOCIETY

# CONCLUSION

The strengths and areas for further development in the institution are required to be summarized under the headings of **Leadership, Governance and Quality, Learning and Teaching, Research and Development, and Service to Society**. If the institution has gone through an external evaluation process before and an *institutional feedback report* has already been presented to the institution, the measures taken to resolve the areas for further improvement stated in the report; the improvements achieved as a result of the activities conducted and the descriptions of the points that could not be further improved must be provided clearly along with a detailed evaluation of the institution’s current situation.

THEQC

RUBRIC

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| A. LEADERSHIP, GOVERNANCE AND QUALITY | | | | | |
| A.1. Leadership and Quality  The institution should have a governance model to enable institutional transformation, utilise leadership approaches, create internal quality assurance mechanisms and internalize the quality assurance culture. | | | | | |
|  | 1 | 2 | 3 | 4 | 5 |
| A.1.1. Governance model and administrative structure  The governance model and administrative structure (institutional approach within the legal framework, traditions, preferences); decision-making mechanisms, control and balance factors, independent operation ability of the boards, representation of stakeholders, comparison of the foreseen governance model and its realization, the institutionality and continuity of the model are established and adopted. The actions, authority and responsibilities, and communication with the institution's academic community of board of trustees in foundation higher education institutions, and vice-rectors and consultants in all higher education institutions (senior governing body); the alignment of the governance style of the senior governing body with the targeted institutional identity is established and adopted. There are processes regarding an organizational chart and affiliation/reporting relationships; job descriptions, and workflow, and these reflect the current state of the institution; also these are published, and it is ensured that they are recognized by the stakeholders. | The institution does not have a governance model and organizational structure that align with its mission and support the achievement of the strategic objectives. | The governance model and administrative structure, which ensure the achievement of the mission and strategic objectives of the institution and that align with its processes, are determined. | The governance model and organizational structure of the institution function in a manner that includes the entirety of units and areas. | The practices related to the governance and organizational structure of the institution are monitored and improved. | There are internalized, systematic and sustainable practices that can be used as examples of best practices. |
| Sample Evidence   * The governance model and organizational chart * Practices/evidence showing that the institution implements its policy and strategic objectives regarding the governance and administrative areas * Evidence showing follow-up and improvement regarding the governance and organizational structure practices * Evidence for the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| A. LEADERSHIP, GOVERNANCE AND QUALITY | | | | | |
| A.1. Leadership and Quality | | | | | |
|  | 1 | 2 | 3 | 4 | 5 |
| A.1.2. Leadership  The rector and process leaders in the institution have high ownership and motivation to create a quality assurance system and culture that takes into account the change, uncertainty and complexity in the higher education ecosystem. These processes are managed with an agile leadership approach.  An understanding of leadership and a coordination culture are established in units. In addition to their strategies in line with the values and goals of the institution, leaders also manage authority sharing, relations, time, institutional motivation and stress in an effective and balanced manner.  There is an efficient communication network between the academic and administrative units and the administration.  Leadership processes and internalization of the quality assurance culture are evaluated continuously. | There is no effective leadership approach that supports the management of the quality assurance system and the internalization of the quality culture in the institution. | Leaders in the organization have ownership and motivation to manage the quality assurance system and internalize its culture. | The institution has leadership practices that complement the development of quality assurance system and culture throughout the entire institution. | Leadership practices and their contribution to the development of quality assurance system and culture are monitored and relevant improvements are made. | There are internalized, systematic and sustainable practices that can be used as examples of best practices. |
| Sample Evidence   * Plans and practices for developing quality assurance culture * The methods employed to evaluate and follow up the leadership qualifications and competencies of the institution’s administrators, results of the follow-up processes and related improvements * The methods employed to evaluate and follow up the development of the quality culture in the institution, follow-up results and related improvements * Evidence concerning the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| A. LEADERSHIP, GOVERNANCE AND QUALITY | | | | | |
| A.1. Leadership and Quality | | | | | |
|  | 1 | 2 | 3 | 4 | 5 |
| A.1.3. Institutional transformation capacity  The institution has an agile management competence that makes it ready for the future by taking into account the changes in higher education ecosystem, global tendencies, national objectives, and stakeholders' expectations. It uses approaches such as change management, comparison, and innovation management to transform institution in line with the objectives, mission and targets for compliance to the future and strengthens institutional authenticity. | The institution does not have change management. | The need for change has been determined in the institution. | The change management approach is expanded throughout the institution and being carried out holistically. | Change management practices that are implemented in accordance with objectives, mission and targets are monitored and measures are taken. | There are internalized, systematic and sustainable practices that can be used as examples of best practices. |
| Sample Evidence   * Change management model * Change plans, roadmaps * Analysis reports for change in the higher education ecosystem regarding its primary functions * Future scenarios * Comparison reports * Innovation management system * Change teams' documents * Evidence for the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| A. LEADERSHIP, GOVERNANCE AND QUALITY | | | | | |
| A.1. Leadership and Quality | | | | | |
|  | 1 | 2 | 3 | 4 | 5 |
| A.1.4. Internal quality assurance mechanisms  The actions, processes and mechanisms are planned and flow charts are devised based on the calendar year regarding the PDCA cycles. Responsibilities and authorities are defined. Completed practices are evaluated.  Other quality cycles, which are not designed on a calendar year basis, are indicated with evidence that they include all layers, and the realized applications are evaluated.  The institution has an accessible and updated document that is similar to its quality assurance guide that contains the details of its policy.  The processes and practices of the Quality Commission in the institution are defined and recognized by the employees. The comission takes active part in the establishment and development of the internal quality assurance system and assists in the program accreditation processes. The commission evaluates the results of the performed activities. This has an effect on decision-making mechanisms. | The institution does not have a defined internal quality assurance system. | The institution has defined internal quality assurance processes and mechanisms. | A transparent and holistic internal quality assurance system is implemented throughout the entire institution. | The internal quality assurance system mechanisms are monitored and improved with the relevant stakeholders. | There are internalized, systematic and sustainable practices that can be used as examples of best practices. |
| Sample Evidence   * Defined process documents like a quality assurance guide, the working procedures and principles of the Quality Commission * Evidence demonstrating workflow charts, calendars, duties and responsibilities, and roles of the stakeholders * Information Management System * Feedback methods * Documents related to stakeholder involvement * Annual follow-up and improvement reports * Evidence for the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| A. LEADERSHIP, GOVERNANCE AND QUALITY | | | | | |
| A.1. Leadership and Quality | | | | | |
|  | 1 | 2 | 3 | 4 | 5 |
| A.1.5. Public disclosure and accountability  Public disclosure is adopted as a principle, the ways and how to use them are designed and announced in an accessible manner, and all steps about public disclosure are taken systematically. The website of the institution provides accurate, up-to-date, relevant and easily accessible information; a mechanism to ensure it is available. There are findings that the concepts of institutional autonomy and accountability complement each other. Internal and external accountability methods are designed and implemented. It is systematic, carried out within the framework of the announced calendar, and those in charge of this operation are clearly defined. Its effectiveness is evaluated with the received feedback. The relations of the institution with external stakeholders, associated local administrations, other universities, public institutions, non-governmental organizations, industrial organizations and local people in its region are assessed. | There are no mechanisms in the institution to inform the public and establish accountability. | The institution has defined processes to inform the public in line with the principles of transparency and accountability. | The institution operates public disclosure and accountability mechanisms in line with its defined processes. | Public disclosure and accountability mechanisms of the institution are monitored and improved based on stakeholder views. | There are internalized, systematic and sustainable practices that can be used as examples of best practices. |
| Sample Evidence   * The principles, rules and methods adopted in relation to public disclosure and accountability * Sample practices related to public disclosure and accountability * Satisfaction and feedback of internal and external stakeholders regarding public disclosure and accountability * Evidence for follow-up and improvement of public disclosure and accountability mechanisms * Evidence for the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| A. LEADERSHIP, GOVERNANCE AND QUALITY | | | | | |
| **A.2.**  **Mission and Strategic Goals**  The institution should plan and implement its strategic goals and objectives created in accordance with its policies to achieve its vision, mission and objective, monitor and evaluate its results in scope of performance management, and ensure public disclosure. | | | | | |
|  | 1 | 2 | 3 | 4 | 5 |
| A.2.1. Mission, vision and policies  Mission and vision statements are defined, recognized and shared by employees of the institution. They are specific to the institution and provide guidance in creating a sustainable future.  There is a quality assurance policy which has been developed, taking stakeholders' views into account. The policy is recognized and shared by the employees of the institution. The policy document is simple, concrete and realistic. It outlines the sustainable quality assurance system. The governance, structure, primary mechanisms, the relationship between units within the institution, and access to units are explained.  Similarly, there are learning and teaching (including distance education), research and development, service to society, governance system, and internationalization policies that bear the same characteristics as the quality assurance policy. These policy statements have tangible results, and effects on the implementation of activities, and examples of these can be presented. | There is no defined mission, vision and policies in the institution. | There are defined and authentic mission, vision and policies in the institution. | There are practices in compliance with mission, vision and policies throughout the institution. | The practices based on the mission, vision and policies are followed up and evaluated with stakeholders in order to take necessary precautions. | There are internalized, systematic and sustainable practices that can be used as examples of best practices. |
| Sample Evidence   * Mission and vision * Policy documents (the learning and teaching policy document should also include distance education) * Documents showing that the policy documents were developed with the involvement of related stakeholders * Expressions and practice examples that demonstrate a holistic relationship in the policy documents (mention of research in educational programs, mention of service to society in research processes, and mention of distance education) * Evidence for the follow-up and evaluation of the policies * Evidence concerning the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| A. LEADERSHIP, GOVERNANCE AND QUALITY | | | | | |
| **A.2.**  **Mission and Strategic Goals** | | | | | |
|  | 1 | 2 | 3 | 4 | 5 |
| A.2.2. Strategic goals and objectives  There is a mutual understanding and settled way of approaching the Strategic Plan\*; short/medium and long-term goals, objectives, sub-objectives, actions, timing and prioritizing, people in charge, and financial resources available for the current period, all of which are created, taking the stakeholders' opinion (particularly strategic stakeholders) into account. While preparing the current strategic plan, the previous plan has been evaluated and used, the annual progress has been monitored, discussed in relevant boards, and necessary actions are taken.    \* It is the document that defines the strategic goals and objectives and performance indicators for the foundation higher education institutions. | The institution does not have a strategic plan. | The institution has a declared strategic plan. | The institution has a holistic strategic plan adopted by all its units and recognized by its stakeholders, and practices agree with this plan. | The institution monitors the implementation of its strategic plan and evaluates it with the related stakeholders; the output is reflected in the institution's future plans. | There are internalized, systematic and sustainable practices that can be used as examples of best practices. |
| Sample Evidence   * The strategic plan and development process * Performance reports * Evidence showing the involvement of internal and external stakeholders in the planning, doing, checking and acting stages of the institution's strategic plan * Evidence for the alignment of the strategic plan and objectives with the United Nations Sustainable Development Goals * Evidence concerning the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| A. LEADERSHIP, GOVERNANCE AND QUALITY | | | | | |
| A.2. Mission and Strategic Goals | | | | | |
|  | 1 | 2 | 3 | 4 | 5 |
| A.2.3. Performance management  Performance management systems in the institution are administered with a holistic approach. They assist the institution in its continuous improvement and prepare it for the future based on the strategic goals of the institution. The accuracy and reliability of the performance management are ensured with support from information and technology systems. The performance management that reflects the strategic perspective of the institution is maintained with a focus on process and stakeholder involvement.  Performance indicators that encompass all main institutional activities (general, key, distance education etc.) are defined and shared .  How the performance indicators are related to the internal quality assurance system is defined and recorded. There are examples of how this is reflected in decisions.  The changes over the years are monitored, the results of the follow-up are recorded, and there is proof that they are used as required. | The institution does not have performance management. | Performance indicators and performance management mechanisms are defined in the institution. | There are performance management practices throughout the entire institution. | The institution follows up performance indicators and performance management mechanisms' efficiency and makes improvements based on the follow-up process results. | There are internalized, systematic and sustainable practices that can be used as examples of best practices. |
| Sample Evidence   * Performance indicators and key performance indicators * Mechanisms used in performance management * Performance program report * Evidence for improvement of the performance management mechanisms * Evidence for the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| A. LEADERSHIP, GOVERNANCE AND QUALITY | | | | | |
| A.3. Governance Systems  The institution should have a system to manage financial, human and information resources and processes to ensure the achievement of its strategic objectives in qualitative and quantitative manners. | | | | | |
|  | 1 | 2 | 3 | 4 | 5 |
| A.3.1. Information management system  Data on important activities and processes of the institution are collected, analysed, reported and used for strategic management. The Information Management System used by academic and administrative departments is integrated and feeds the quality management processes. The security, confidentiality and reliability of the Information Management System are provided. | The institution does not have an information management system. | The institution has information management systems to support the acquisition, storage, usage, processing and evaluation of institutional information. | The institution maintains an integrated information management system that supports the primary processes (learning and teaching, research and development, service to society, quality assurance). | The institution monitors and improves the integrated information management system. | There are internalized, systematic and sustainable practices that can be used as examples of best practices. |
| Sample Evidence   * The information management system and its functions * Defined processes for acquiring, saving, updating, processing, evaluating and sharing information * Evidence for the follow-up and improvement of the Information Management System * Processes and practices ensuring information security and reliability * Evidence concerning the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| A. LEADERSHIP, GOVERNANCE AND QUALITY | | | | | |
| A.3. Governance Systems | | | | | |
|  | 1 | 2 | 3 | 4 | 5 |
| A.3.2. Human resources management  The institution has rules and processes for the management of human resources. These processes are carried out transparently and recognized by everyone in the institution. Education and merit are the priority criteria, and the primary goal is to improve competencies.  Methods and mechanisms developed to identify and monitor employee (academic and administrative) satisfaction, complaints and suggestions are implemented, and the results are evaluated and improved. | The institution does not have a defined process for the management of human resources. | There are defined processes regarding human resources management in accordance with the strategic objectives of the institution. | The human resources management practices are maintained in line with the defined processes throughout the entire institution. | The institution monitors its human resources management practices and makes improvements with input from relevant internal stakeholders. | There are internalized, systematic and sustainable practices that can be used as examples of best practices. |
| Sample Evidence   * The human resources policy and objectives, and practices related to them (competencies, recruitment, in-service training, incentives and rewards, etc.) * Employee (academic and administrative) satisfaction surveys, practice systematics, and survey results * Evidence showing follow-up and improvement of the human resources management practices * Evidence concerning the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| A. LEADERSHIP, GOVERNANCE AND QUALITY | | | | | |
| A.3. Governance Systems | | | | | |
|  | 1 | 2 | 3 | 4 | 5 |
| A.3.3. Financial management  Primary income and expense items are defined and monitored over years.  The Total Current Budget (income) = State education contribution (all income that comes directly from the central budget and does not include the research and development category) + student income (all income that is obtained from students: Formal and evening education, non-thesis master's degree, summer school, services/fees, dining and accommodation fees, etc.) + research income (acquired from the central budget of the state + national allocation - non-competitive projects) + national competitor research funding + international research funding [private account, circulating capital, acquisition from the foundation, and other accounted amounts] + service to society income (medicine, dentistry, etc.) health service income of faculties [circulating capital or other accounted amounts] + engineering, architecture, etc. faculty income for knowledge and technology transfer/projects/practices [circulating capital or other accounted amounts] + adult education/lifelong learning income + rental income + laboratory/experiment/measurement, etc. income [private account, circulating capital, acquisition from the foundation, and other accounted amounts] + donations (non-state resources that are transferred to the university with or without conditions) are monitored in detail and associated with the institutional profile. | The institution does not have a defined process for the management of financial resources. | The institution has defined processes for the management of financial resources that are in alignment with its strategic objectives. | The financial resources management practices are maintained in line with the defined processes throughout the entire institution. | The institution monitors and improves its financial resources management processes. | There are internalized, systematic and sustainable practices that can be used as examples of best practices. |
| Sample Evidence   * Defined processes and practices related to the management of financial resources (Distribution and efficient use of resources, variety of resources) * Alignment of the planning, usage and follow up practices of financial resources to the strategic plan of the institution * Evidence for the follow up and improvement of the financial resources management practices * Evidence for the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| A. LEADERSHIP, GOVERNANCE AND QUALITY | | | | | |
| A.3. Governance Systems | | | | | |
|  | 1 | 2 | 3 | 4 | 5 |
| A.3.4. Process management  All processes and sub-processes of activities (including distance education) are defined. The accountable parties for processes, workflow, management and ownership are documented and internalised by the institution. There is evidence of successful process management. A continuous process improvement cycle is established. | The institution does not have defined processes for learning and teaching, research and development, service to society and governance system practices. | The institution has defined processes and sub-processes for its practices regarding learning and teaching, research and development, service to society and governance system. | Defined processes are managed throughout the entire institution. | The institution follows up its process management mechanisms and makes improvements with input from relevant stakeholders. | There are internalized, systematic and sustainable practices that can be used as examples of best practices. |
| Sample Evidence   * Process Management Handbook * The process management model and practices, related systems, governance mechanisms (including distance education) * Evidence showing involvement of stakeholders * Evidence for the follow up and improvement of process management mechanisms * Evidence concerning the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| A. LEADERSHIP, GOVERNANCE AND QUALITY | | | | | |
| A.4. Stakeholder Involvement  The institution should establish and manage the necessary systems to receive and respond to the feedback of its internal and external stakeholders in order to ensure their involvement in strategic decisions and processes, and to use them in their decisions. | | | | | |
|  | 1 | 2 | 3 | 4 | 5 |
| A.4.1. Internal and external stakeholder involvement  The mechanisms of involvement of internal and external stakeholders in decision-making, governance, and improvement processes are defined.  The efficiency, institutionalism, and continuity of the involvement are examined. Practice samples in the internal quality assurance system are available, particularly regarding the efficiency and involvement of students and external stakeholders. Results are evaluated, and relevant improvements are made. | The institution's internal quality assurance system does not have mechanisms that enable stakeholder involvement. | The institution has plans to involve stakeholders in the PDCA layers regarding processes about quality assurance, learning and teaching, research and development, service to society, governance system, and internationalization. | There are mechanisms for the involvement of stakeholders in the PDCA layers of all processes throughout the entire institution. | The operation of stakeholder involvement mechanisms is monitored and relevant improvements are made. | There are internalized, systematic and sustainable practices that can be used as examples of best practices. |
| Sample Evidence   * A list of internal and external stakeholders and evidence showing prioritization of them based on institutional processes * Data collection tools and methods employed in collecting stakeholder opinion (surveys, focus group meetings, workshops, the data management system etc.) * Documents demonstrating that stakeholder involvement in decision-making processes is ensured * Evidence for follow-up and improvement of the operation of stakeholder involvement mechanisms * Evidence concerning the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| A. LEADERSHIP, GOVERNANCE AND QUALITY | | | | | |
| A.4. Stakeholder Involvement | | | | | |
|  | 1 | 2 | 3 | 4 | 5 |
| A.4.2. Student Feedback  Student opinions (about courses, course instructors, the diploma program, the quality of services and general satisfaction level etc.) are collected systematically by various means, and the results are shared and utilized efficiently. It is ensured that the methods used are reliable and valid and that data are consistent and representative.  There are various channels for students' complaints and/or suggestions which are recognized by students, and the fair and efficient operation of these channels are monitored. | The institution does not have mechanisms to collect student feedback. | The institution has established principles and rules related to the collection of student feedback (about courses, lecturers, programs, student workload\* etc.) within its teaching processes. . | Student feedback is collected (at the end of each semester or academic year) in all programs. | Practices about collecting student feedback are monitored in all programs and they are improved with student involvement. Feedback results are reflected in decision-making processes. | There are internalized, systematic and sustainable practices that can be used as examples of best practices. |
| Sample Evidence   * Principles and rules about collecting student feedback * Evidence for the types, methods and diversity of the defined student feedback mechanisms (including distance/blended education) * Practices regarding the improvements made within the scope of student feedback * Examples showing the involvement of students in decision-making mechanisms * Evidence for the follow-up and improvement of student feedback mechanisms * Evidence concerning the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation   \*Should bear the key principles of the 2015 ECTS User Guide. | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| A. LEADERSHIP, GOVERNANCE AND QUALITY | | | | | |
| A.4. Stakeholder Involvement | | | | | |
|  | 1 | 2 | 3 | 4 | 5 |
| A.4.3. Alumni relations management  Alumni employment information like job placement, graduate education, income rate, and employer/alumni satisfaction is systematically and comprehensively collected, evaluated and used in the institutional development strategies. | The institution does not have an alumni tracking system. | The institution has plans for an alumni tracking system in order to evaluate whether the programs have reached their goals and objectives or not. | There are alumni tracking system practices throughout the programs in the entire institution. | The alumni tracking system practices are monitored and improvements on the programs are made based on needs. | There are internalized, systematic and sustainable practices that can be used as examples of best practices. |
| Sample Evidence   * Features of the alumni tracking system * Satisfaction level about the competencies of the alumni and the level of attainment of program goals and objectives * Updating works on the programs as part of the alumni tracking system * Evidence concerning the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| A. LEADERSHIP, GOVERNANCE AND QUALITY | | | | | |
| A.5. Internationalization  The institution should manage its processes, form the organizational structure and monitor and evaluate periodically its results in accordance with its internationalization strategy and objectives. | | | | | |
|  | 1 | 2 | 3 | 4 | 5 |
| A.5.1. Management of internationalization processes  The management and organizational structure of internationalization processes are institutionalized. They are aligned to the internationalization policy of the institution. The operation and efficiency of the governance and organizational structure are checked. | The institution does not have management and organizational structure for the internationalization processes. | The institution has plans regarding the management and organizational structure of the internationalization processes. | The institution has completed its organizational structure for the management of the internationalization processes, and functions in a transparent, inclusive, and participatory manner. | The governance and organizational structure of the internationalization processes are monitored and improved. | There are internalized, systematic and sustainable practices that can be used as examples of best practices. |
| Sample Evidence   * Governance and organizational structure of internationalization processes * Evidence for the follow-up and improvement of the governance and organizational structure * Evidence for the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| A. LEADERSHIP, GOVERNANCE AND QUALITY | | | | | |
| A.5. Internationalization | | | | | |
|  | 1 | 2 | 3 | 4 | 5 |
| A.5.2. Internationalization resources  Resources allocated to internationalization (financial, physical, human power) are determined, shared and institutionalized. These resources are monitored and assessed qualitatively and quantitatively. | The institution does not have sufficient resources to maintain its internationalization activities. | The institution has plans for creating physical, technical and financial resources that are suitable in quality and quantity to maintain its internationalization activities. | The internationalization resources of the institution are managed considering the balance between its units. | The distribution of internationalization resources in the institution is monitored and improved. | There are internalized, systematic and sustainable practices that can be used as examples of best practices. |
| Sample Evidence   * Documents on the management of the resources allocated for international activities (usage rates of budgets allocated to Erasmus and other international programs, documents on the management of budgets and resources allocated to EU projects and bilateral protocols etc.) * Evidence showing follow-up and improvement of the distribution of internationalization resources * Evidence concerning the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **A. LEADERSHIP, GOVERNANCE AND QUALITY** | | | | | |
| A.5. Internationalization | | | | | |
|  | 1 | 2 | 3 | 4 | 5 |
| A.5.3. Internationalization performance  The internationalization performance is monitored. The follow-up mechanisms and processes are constant and sustainable, and there is evidence of the steps taken for improvement. | The institution does not have internationalization activities. | The institution has plans about practices that are in line with its internationalization policy. | There are internationalization activities established throughout the entire institution. | Internationalization activities in the institution are followed up and improved. | There are internalized, systematic and sustainable practices that can be used as examples of best practices. |
| Sample Evidence   * Internationalization activities * Indicators employed by the institution to monitor its internationalization performance * Mechanisms established to monitor whether the internationalization goals are achieved or not * Annual self-evaluation reports and improvement works on the internationalization processes * Evidence concerning the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| LEARNING AND TEACHING | | | | | |
| B.1. Program Design, Evaluation and Update  The institution should design its teaching programs in line with the National Qualifications Framework for Higher Education in Türkiye (NQF-HETR) and the teaching objectives and learning outcomes; they should be evaluated and updated periodically to make sure that needs of students and the society are met. | | | | | |
|  | 1 | 2 | 3 | 4 | 5 |
| B.1.1. Design and approval of programs  The objectives and learning outcomes (objectives) of the programs are defined, their compatibility with the NQF-HETR is stated and shared with the public. The mission and vision of the institution are taken into account while determining the program competencies. Course information packages are created taking the national core program (if available), the criteria (e.g. accreditation criteria, etc., if available) into account . The expressions of objectives clearly state the foreseen cognitive, affective and psychomotor levels. The institution has plans about how to monitor the realization of program outcomes; particularly, the evaluation methods and processes of the shared (generic) outcomes of the institution are stated in detail. There are department-based principles and rules about the structuring of learning outcomes and necessary teaching processes. The program states with which activities (competence-course-teaching method matrices) the competencies may be acquired. The competencies to be acquired based on education modes (formal, blended, distance) are defined for different fields. Physical and technological facilities (access, social distance, etc.) are taken into account when designing the programs. | The institution does not have defined program design and approval processes. | The institution has defined processes related to the design and approval of programs including principles, methods, alignment with the NQF-HETR, and stakeholder involvement. | Programs that are designed and approved and are in alignment with the program objectives and learning outcomes, are implemented throughout the entire institution, in line with the defined processes. | The design and approval processes of the programs are systematically monitored and improved by evaluating them with relevant stakeholders. | There are internalized, systematic and sustainable practices that can be used as examples of best practices. |
| Sample Evidence   * Defined processes that are used for program design and approval (its compliance with the education policy, manuals, guides, procedures and principles, etc.) * The management and organizational structure of the program design and approval processes (Commissions, process managers, process flow, etc.) * Evidence for the alignment of the program objectives and outcomes with the NQF-HETR * Evidence for a variety of practices in department/field-specific programs in distance/blended program design (evidence for taking the different distance education demands of departments into account) * Evidence for stakeholder involvement in program design processes * Evidence for follow-up and improvement of the program design and approval processes * Evidence concerning the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| LEARNING AND TEACHING | | | | | |
| B.1. Program Design, Evaluation and Update | | | | | |
|  | 1 | 2 | 3 | 4 | 5 |
| B.1.2. Course distribution balance of the program  The principles, rules and methods about course distribution of the program are defined. Teaching staff's fields of expertise and workload are considered in the course distribution, and the course distribution between them is done in a participatory manner. The teaching program (curriculum) takes into account the balance between compulsory and elective courses, field-specific and non-field-specific courses, and allows for cultural competence and acquaintance with other disciplines. The number of courses and the weekly course load are organized in a manner that allows students to spend time in extracurricular activities. The alignment with the goals and the efficiency of the course information packages designed by these principles are monitored and relevant improvements are made. | Principles and methods related to course distribution are not defined. | There are defined processes for course distribution that include principles and methods about dimensions like the balance between courses about teaching staff's fields of expertise; the balance between the field of study/professional knowledge/general knowledge and compulsory and elective courses; gaining cultural competence, and familiarizing students with different disciplines. | There are practices throughout the institution in accordance with the defined processes regarding the course distribution balance. | The course distribution balance in the programs is monitored and improved. | There are internalized, systematic and sustainable practices that can be used as examples of best practices. |
| Sample Evidence   * Principles and methods related to course distribution and related evidence * Evidence showing that the balance of course distribution is taken into account in the announced course information packages * Decisions of the education commission, senate decisions, etc. * Evidence showing monitoring and improvement of the course distribution balance * Evidence concerning the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| LEARNING AND TEACHING | | | | | |
| B.1. Program Design, Evaluation and Update | | | | | |
|  | **1** | **2** | **3** | **4** | **5** |
| **B.1.3. The alignment of course objectives with program outcomes**  The learning objectives of the courses (including blended and distance education) are defined, and the program outcomes and course objectives are aligned and declared. The expressions of objectives clearly state the foreseen cognitive, affective and psychomotor levels.  There are plans about how to monitor the realization of the course learning objectives, particularly, the methods and processes of the evaluation of objectives not related to the area of study (general) are stated in detail. | Course objectives and program outcomes are not aligned. | There are defined processes that include principles, methods and classifications about the design of the course objectives and their alignment to the program outcomes. | Course objectives are aligned with the program outcomes throughout the entire program and the course information packages are shared. | The alignment of the course objectives with the program outcomes is monitored and improved. | There are internalized, systematic and sustainable practices that can be used as examples of best practices. |
| Sample Evidence   * Matching of program outcomes with the course objectives * Evidence for the compatibility of the courses taken outside the program (face-to-face or distance) with the program outcomes * Evidence for follow-up and improvement regarding the alignment of the course objectives with the program outcomes * Evidence concerning the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| LEARNING AND TEACHING | | | | | |
| B.1. Program Design, Evaluation and Update | | | | | |
|  | **1** | **2** | **3** | **4** | **5** |
| B.**1.4. Student workload-based course design**  All ECTS credit points are published on the website and verified by following student workload. There are internship and applied learning opportunities, and these are utilized through sufficient student workload and credits. The quality of completed practices is checked. Variations that arise from distance education are taken into consideration in the student workload-based design. | Courses are not designed based on student workload. | There are defined processes\* that include principles and methods that comprise dimensions like internship, professional practices, or mobility explaining how to calculate student workload. | Courses are designed, announced and implemented according to student workload. | Student workload in programs is monitored and course design is updated accordingly. | There are internalized, systematic and sustainable practices that can be used as examples of best practices. |
| Sample Evidence   * ECTS course information packages\* (Including distance and blended programs) * Evidence showing that student workload credits in professional practices, exchange programs, internships and projects are defined\* * Documents including defined processes about the transfer and recognition of workload-based credits * Documents and mechanisms showing that student involvement is enabled while determining student workload in programs * Diploma Supplement * Evidence showing that workload-based credits are updated in accordance with feedback * *Evidence for the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation*   \*Should bear the key principles of the 2015 ECTS User Guide. | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| LEARNING AND TEACHING | | | | | |
| B.1. Program Design, Evaluation and Update | | | | | |
|  | **1** | **2** | **3** | **4** | **5** |
| **B.1.5. Follow-up and updating of programs**  The follow-up of program objectives and learning outcomes is performed as planned for each program and course (face-to-face, distance, blended, open). The operation and results of this process are evaluated with the stakeholders. The statistical indicators about learning and teaching (courses offered each year, student numbers, grades, results of feedback, course diversity, lab applications, the balance of undergraduate/postgraduate programs, dropout numbers and reasons, etc.) are monitored periodically and systematically and are discussed, evaluated and compared to continue the development for quality education. There is a plan, incentive and practice for program accreditation; the accreditation strategy of the institution is stated, and its implications are discussed. The benefits of accreditation and its contribution to the internal quality assurance system are evaluated. | The institution does not have any mechanisms for the follow-up and updating of program outcomes. | Periods, principles, rules and indicators of the follow-up and updating of program outcomes are established. | Mechanisms about the follow-up and updating of the program outcomes are implemented in all programs. | The program outcomes are monitored with these mechanisms and are updated by including the opinion of relevant stakeholders. | There are internalized, systematic and sustainable practices that can be used as examples of best practices. |
| Sample Evidence   * Periods (annual and at the end of the program), principles, rules, indicators, plans and practices about the follow-up and updating of the programs * Examples of mechanisms the institution has established to update the programs in line with the institution’s mission, vision and objectives * Annual self-evaluation reports of programs (assessment with a focus on program outcomes) * Systems monitoring whether the program outcomes are achieved (the Information Management System) * Improvements made on the basis of yearly and duration based self-evaluation of programs * Practices ensuring that all stakeholders are informed on the latest improvements and changes * Feedback on whether the program has reached its goals or not * Evidence concerning the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| LEARNING AND TEACHING | | | | | |
| B.1. Program Design, Evaluation and Update | | | | | |
|  | **1** | **2** | **3** | **4** | **5** |
| **B.1.6. Management of learning and teaching processes**  The institution has an organizational structure (university learning and teaching commission, learning and teaching centers, etc.), information management system and expert human resources to manage the learning and teaching processes holistically. Learning and teaching processes are implemented under the coordination of the senior management and the duties and responsibilities in this respect are defined.  Principles, rules and the calendar regarding the design, implementation, evaluation and update activities of learning and teaching programs are specified throughout the entire institution.  The compatibility between learning objectives, the teaching program (curriculum), the modality of educational services (face-to-face, distance, blended, open), teaching methods and measurement and evaluation in programs, and the coordination of all these processes are monitored by senior management. | There is no system in the institution to manage the learning and teaching processes holistically. | There are systems, principles and rules in the institution to manage the learning and teaching processes holistically. | Learning and teaching processes are managed in accordance with the defined rules and principles throughout the entire institution. | Practices for learning and teaching management system are followed up and the results of follow-up are used for improvements. | There are internalized, systematic and sustainable practices that can be used as examples of best practices. |
| Sample Evidence   * Organizational structure and workflow charts regarding the management of learning and teaching processes * Rules, principles and the calendar regarding the processes of learning and teaching and measurement and evaluation * Information Management System * Evidence showing follow-up and improvement regarding the management of learning and teaching processes * Evidence concerning the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| LEARNING AND TEACHING | | | | | |
| **B.2. Implementation of Programs** (Student-Centered Learning, Teaching and Evaluation)  The institution should implement student-centered and competence-based teaching, measurement and evaluation methods to achieve the aimed qualified alumni competencies. The institution should set out explicit criteria for student admission, the recognition and certification of degrees, diplomas and other qualifications and consistently implement the pre-defined and announced rules. | | | | | |
|  | 1 | 2 | 3 | 4 | 5 |
| **B.2.1. Teaching methods and techniques**  The teaching method is focused on engaging and interactive learning. Student-centered, competence-based, process and performance-based, interdisciplinary, integral, case/practice-based approaches that prioritize learning are adopted in all educational modalities (face-to-face, distance, blended) and the nature of these modalities are taken into account. The focus is on deep learning, and the engagement, motivation and commitment of the students rather than the transfer of knowledge.  Formal education processes are enriched with technological opportunities and the approaches such as flipped learning, project-based learning, etc., including associate, bachelor's, and postgraduate students. The involvement of students in research processes is facilitated through the curriculum, methods and approaches. The implementation, follow-up, and preventive measures of all these practices are systematically evaluated. | The institution does not have student-centered approaches in its learning and teaching processes. | The institution has plans, rules and principles about the implementation of student-centered approaches for the learning and teaching processes. | Student-centered teaching techniques and methods are applied in line with defined processes in the entirety of the programs. | Student-centered practices are monitored and improved with the involvement of relevant internal stakeholders. | There are internalized, systematic and sustainable practices that can be used as examples of best practices. |
| Sample Evidence   * Presence of student-centered teaching approaches in the course information packages * Principles and mechanisms related to teaching methods and material development for distance education * Defined processes and practices about engaging and interactive teaching methods * Practices related to the student-centered learning and teaching approach in the training of trainers program content * Evidence concerning the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| LEARNING AND TEACHING | | | | | |
| **B.2. Implementation of Programs** (Student-Centered Learning, Teaching and Evaluation) | | | | | |
|  | **1** | **2** | **3** | **4** | **5** |
| **B.2.2. Measurement and Evaluation**  Student-centered measurement and evaluation are implemented based on competence and performance and the self-expression of students is facilitated as much as possible.  The continuity of measurement and evaluation is provided through methods like multiple exam possibilities and assignments, projects, and portfolios, some of which are process-based (formative). Exam methods aligned with and suitable to course objectives and education modalities (face-to-face, distance, blended) are planned and implemented. There are mechanisms for exam practices and exam security (face-to-face/online exams, exams for disadvantaged groups).  The time and rater reliability and validity of measurement and evaluation practices are established. The institution improves its measurement and evaluation approaches and opportunities based on the feedback of students and teaching staff. The announcement, implementation, control, alignment with objectives of these improvements and the measures taken are examined. | The programs do not have student-centered measurement and evaluation approaches. | There are principles, rules and plans about student-centered measurement and evaluation. | There are diversified student-centered measurement and evaluation practices throughout the entire programs. | Student-centered measurement and evaluation practices are monitored and improved with the involvement of relevant internal stakeholders. | There are internalized, systematic and sustainable practices that can be used as examples of best practices. |
| Sample Evidence   * Practice examples regarding the diversity of assessment and evaluation in programs * Exam specimens (of different measurement tools included in the program) used in the face-to-face/distance/blended courses * Course information package specimens demonstrating that the measurement and evaluation practices are related to the course objectives and program competencies, and that they are based on student workload\* * Mechanisms related to specific measurement modalities like exams for disadvantaged groups and online exams * Exam security mechanisms * Evidence showing that improvements are made based on the follow-up process and with the involvement of stakeholders * Evidence concerning the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation     \*Should bear the key principles of the 2015 ECTS User Guide. | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| LEARNING AND TEACHING | | | | | |
| **B.2. Implementation of Programs** (Student-Centered Learning, Teaching and Evaluation) | | | | | |
|  | **1** | **2** | **3** | **4** | **5** |
| **B.2.3. Student admission and the recognition and crediting of prior learning\***  The principles and rules for student admission (including the students admitted through ways other than those coming with central placement) are defined and announced. These principles and rules are consistent, and the practices are transparent. Document requests like diplomas, certificates and similar documents are tracked meticulously.  Prior learning (face-to-face, public, distance/blended education, knowledge and skills obtained through informal learning) is recognized and credited. There is mobility support parallel to the internationalization policy, practices encouraging and facilitating students as well as practices preventing credit loss during mobility. | The institution does not have defined processes for student admission and the recognition and crediting of prior learning. | The institution has principles, rules and related plans about student admission and the recognition and crediting of prior learning. | There are practices based on plans regarding student admission and the recognition and crediting of prior learning throughout the entire institution. | Student admission and the recognition and accrediting of prior learning processes are monitored and improved, and updates are declared. | There are internalized, systematic and sustainable practices that can be used as examples of best practices. |
| Sample Evidence   * Principles and rules regarding student admission and recognition and crediting of prior learning * Documents showing that student workload-based credits are used in the recognition of prior learning * Evidence showing the practices’ continuity and coherence with the defined processes * Mechanisms to inform stakeholders * Evidence concerning the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation   \*Should bear the key principles of the 2015 ECTS User Guide. | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| LEARNING AND TEACHING | | | | | |
| **B.2. Implementation of Programs** (Student-Centered Learning, Teaching and Evaluation) | | | | | |
|  | **1** | **2** | **3** | **4** | **5** |
| **B.2.4. The certification of qualifications and the diploma**  Approval of qualifications, conditions for graduation, and graduation decision-making processes are defined in a clear, understandable, comprehensive, and consistent manner and are shared with the public. Certification and diploma procedures are carried out and monitored in line with this defined process and necessary precautions are taken. | The institution does not have defined processes for diploma approval and the certification of other qualifications. | The institution has comprehensive, consistent and announced principles, rules, and processes about diploma approval and the certification of other qualifications. | Practices regarding diploma approval and certification of other qualifications are adopted throughout the entire institution. | Practices are monitored and defined processes are improved. | There are internalized, systematic and sustainable practices that can be used as examples of best practices. |
| Sample Evidence   * Defined processes and current practices about following up the academic and career development of students, the diploma approval, and the certification of qualifications * Criteria employed in student admissions other than centrally placed student groups, such as the entrance exam for international students (YOS) placements, transfers, and admissions in double major (DMP) or minor programs * Documents showing that student workload-based credits are recognized in exchange programs without any requirement of extra work\* * Evidence concerning the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation   \*Should bear the key principles of the 2015 ECTS User Guide. | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| LEARNING AND TEACHING | | | | | |
| B.3. Learning Resources and Academic Support Services  The institution should have the necessary resources, infrastructure and environment to implement its learning and teaching activities and achieve its aim of qualified alumni competencies and should ensure that the learning opportunities are sufficient and accessible for all students. The institution should provide assistance services for the academic development and career planning of students. | | | | | |
|  | **1** | **2** | **3** | **4** | **5** |
| **B.3.1. The learning environment and resources**  Classrooms, laboratories, libraries, studios, coursebooks, online books/documents/videos, etc. resources are suitable in quality and quantity, accessible and are recognized by and available for students. The utilization of the learning environment and resources are monitored and improved.  The institution has a learning management system that can fully fulfill learning and teaching needs, is user-friendly, ergonomic, and has synchronous, and asynchronous learning, enriched content development, and also measurement and evaluation, and in-service training opportunities.  The learning environment and resources foster student-student, student-teaching staff, student-material interaction. | The institution does not have sufficient resources to maintain its learning-teaching activities. | The institution has plans to create learning resources that are in suitable quality and quantity (classrooms, laboratories, studios, a learning management system, printed/e-resources, human resources, etc.) in order to maintain its learning and teaching activities. | The management of learning resources in the entire institution is performed by taking into consideration the field-specific conditions, accessibility, and the balance between units. | The usage and development of learning resources are followed up and improved. | There are internalized, systematic and sustainable practices that can be used as examples of best practices. |
| Sample Evidence   * Learning resources and their state of sufficiency, plans and practices about their improvement * Evidence for accessibility of learning resources (including distance education) * Examples about the learning management system practices * Student feedback tools about the learning resources provided to students (Surveys etc.) * Evidence showing that the learning resources are continuously improved * Evidence concerning the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| LEARNING AND TEACHING | | | | | |
| B.3. Learning Resources and Academic Support Services | | | | | |
|  | **1** | **2** | **3** | **4** | **5** |
| **B.3.2. Academic support services**  There are advisor teaching staff members who follow the academic development of students, lead them, help them solve their academic problems, and support their career planning. The advising system is monitored and improved through methods such as the student portfolio. Students can access support from their advisors easily and there are various ways of communication available (face-to-face, online).  There are psychological counseling and career center services, these are accessible (face-to-face and online) and students are informed about them. The sufficiency of the services is monitored. | There are no assistance services for the academic development and career planning of students in the institution. | The institution has defined principles and rules about the academic development and career planning processes of students. | Support services for the academic development and career planning of students are carried out in the institution within the scope of defined principles and rules. | Practices regarding the academic development and career planning of students are monitored and improved with the involvement of students in the institution. | There are internalized, systematic and sustainable practices that can be used as examples of best practices. |
| Sample Evidence   * Defined processes employed in the academic advising system for students * Mechanisms and defined processes employed in the academic and technical advising systems for students in distance education (if available) * Mechanisms for students' access to advisors * Plans and practices regarding guidance, psychological counseling and career services * Career center practices * Evidence for student involvement * Results obtained from student feedback tools (surveys etc.) about services provided to students * Evidence concerning the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| LEARNING AND TEACHING | | | | | |
| B.3. Learning Resources and Academic Support Services | | | | | |
|  | **1** | **2** | **3** | **4** | **5** |
| **B.3.3. Facilities and infrastructure**  Facilities and the infrastructure (dining hall, dormitory, technology-equipped study areas, health, transportation, IT services, infrastructure of distance education) are suitable in quantity and quality, accessible and recognized and utilized by students. The utilization of facilities and the infrastructure is checked. | The institution does not have facilities and the infrastructure of sufficient quality and quantity | There are plans in the institution to establish and use facilities and the infrastructure (dining hall, dormitory, health, library, transportation, information and communication infrastructure, infrastructure of distance education, etc.) of sufficient quality and quantity . | The facilities and the infrastructure are accessible throughout the entire institution and they are utilized based on equal opportunity. | The usage of facilities and the infrastructure is monitored and improved based on needs. | There are internalized, systematic and sustainable practices that can be used as examples of best practices. |
| Sample Evidence   * Principles and rules about usage of facilities and the infrastructure * Practices related to accessibility and usage * The state of improvement of facilities and the infrastructure in relation to institutional growth (e.g. the relationship between the increase in the number of units and the increase in physical spaces) * The status of infrastructure, facilities, hardware and software; in case there are distance education programs and practices in the institution * Evidence for the follow-up, diversification and improvement of the facilities and infrastructure services * Evidence concerning the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| LEARNING AND TEACHING | | | | | |
| B.3. Learning Resources and Academic Support Services | | | | | |
|  | 1 | 2 | 3 | 4 | 5 |
| B.3.4. Disadvantaged groups  Access to educational opportunities of the disadvantaged, vulnerable and under-represented groups (disabled, poor, minority, immigrant, etc.) is ensured by considering the principles of equality, equity, diversity and inclusion. The distance education infrastructure is established by considering the needs of these groups. There are accessible university practices on university campuses where needed. The access of these groups to learning opportunities is monitored and improved in line with the feedback. | The institution does not have plans for the access of disadvantaged groups to learning opportunities. | The institution has plans for the access of disadvantaged groups to learning opportunities in a quality and just manner. | Practices regarding the access of disadvantaged groups to learning opportunities are carried out. | Practices regarding the access of disadvantaged groups to learning opportunities are monitored and improved by collecting the opinions of disadvantaged groups. | There are internalized, systematic and sustainable practices that can be used as examples of best practices. |
| Sample Evidence   * Plans and practices related to services that will be provided to disadvantaged student groups (their representation in boards, accessible university practices, if available, practices in distance education processes, etc.) * Documents showing that the feedback is utilised in improvement mechanisms * Evidence for the follow-up and improvement of accessible university practices * Evidence for the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| LEARNING AND TEACHING | | | | | |
| B.3. Learning Resources and Academic Support Services | | | | | |
|  | **1** | **2** | **3** | **4** | **5** |
| **B.3.5. Social, cultural and sporting activities**  There is support for sites, budget, and guidance to students' societies and their social, cultural, or sporting activities.  Furthermore, there is an established administrative organization that manages and runs the social, cultural, and sporting activities. The activities carried out are monitored and improved in line with the needs. | The institution does not have social, cultural and sporting activities of sufficient quality and quantity. | The institution has plans to create opportunities for social, cultural and sporting activities. | The social, cultural, and sporting activities are accessible throughout the entire institution and they are utilized based on equal opportunity. | The social, cultural and sporting activity mechanisms are monitored,  activities are diversified and improved based on needs and requests. | There are internalized, systematic and sustainable practices that can be used as examples of best practices. |
| Sample Evidence   * Evidence for the planning and practice of social, cultural, and sporting activities * List of the annual sporting, cultural and social activities organized for the students (with information like the type and subject of activity, the number of participants, etc. ) * Evidence for the accessibility of activities and that equal opportunity is taken into consideration * Tools, follow-up reports, evidence for diversification and improvement regarding the follow-up of social, cultural, and sporting activities * Evidence for the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| LEARNING AND TEACHING | | | | | |
| B.4. Teaching Staff  The institution should be fair and transparent in all the processes pertaining to the recruitment, appointment, promotion and teaching assignments of the teaching staff. It should provide continuous development opportunities regarding the learning-teaching competencies of teaching staff to achieve the aim of qualified alumni competencies. | | | | | |
|  | **1** | **2** | **3** | **4** | **5** |
| **B.4.1. Recruitment, promotion and appointment criteria**  The recruitment, promotion, and appointment criteria and processes for teaching staff (including the international teaching staff) are defined and accessible to the public. The related processes and criteria take academic merit into account and ensure equal opportunity. There is evidence that the practice is compatible with the criteria. The course load and the balance of course distribution between teaching staff are shared transparently. Individuals are aware of what the institution expects from the teaching staff. Merit is considered in selecting those assigned to give lectures from outside the institution, and the evaluation of their performance at the end of the semester is transparent and effective. The institution complies with learning and teaching principles and culture. | Recruitment, promotion and appointment processes are not defined in the institution. | The institution has defined its criteria for the recruitment, appointment and promotion of teaching staff, but field-specific necessities have not been analyzed in the planning stage. | The institution implements the recruitment, promotion, and appointment criteria which are defined for all fields (recruitment, promotion, appointment, course assignment of teaching staff, etc.); these are recognized by stakeholders and included in decision-making. etc). | The results of the recruitment, promotion and appointment practices are monitored, evaluated, and necessary action is taken accordingly. | There are internalized, systematic and sustainable practices that can be used as examples of best practices. |
| Sample Evidence   * Recruitment, promotion and appointment criteria * Practices ensuring that academic staff is assigned in courses related to their fields of expertise * Evidence for follow-up and improvement * Evidence for the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| LEARNING AND TEACHING | | | | | |
| B.4. Teaching Staff | | | | | |
|  | **1** | **2** | **3** | **4** | **5** |
| **B.4.2. Teaching competencies and development**  Teaching competency development processes are planned based on need analyses, widely executed, and their effectiveness is periodically monitored. The institution provides systematic trainer-training activities (courses, workshops, seminars, etc.) for the teaching staff in order to assist them in learning and implementing interactive and active teaching methods, and distance teaching processes; there is also a teaching-learning center structure that undertakes/performs this task. The pedagogical and technological competencies of teaching staff are improved. The teaching competency development performance of the institution is evaluated. | The institution does not have any plans available to improve the teaching competence of its teaching staff. | The institution has plans regarding the development of competencies of teaching staff in areas like student-centered learning, distance learning, measurement and evaluation, material development and the quality assurance system. | There are practices aiming at developing the teaching competencies of teaching staff throughout the entire institution. | Findings obtained from practices aiming at developing the teaching competencies of teaching staff are monitored, evaluated together with teaching staff, and precautions are taken. | There are internalized, systematic and sustainable practices that can be used as examples of best practices. |
| Sample Evidence   * Evidence for plans (scope, methodology, attendance details, etc.) regarding practices for the training of trainers (including distance education practices) and the implementation thereof * Evidence for the practices related to the learning and teaching centers * Documents showing defined processes to monitor the performance of teaching staff in learning and teaching (appointment and promotion criteria etc.) * Evidence for the involvement of teaching staff in the follow-up and improvement of the processes * Evidence for follow-up and improvement of the teaching competency development processes * Evidence concerning the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| LEARNING AND TEACHING | | | | | |
| B.4. Teaching Staff | | | | | |
|  | **1** | **2** | **3** | **4** | **5** |
| **B.4.3. Incentives and rewards for educational activities**  The institution has processes about incentives and rewards such as "outstanding education award" to increase the creative/innovative education practices and competition among teaching staff. Creative educational activities are included in the recruitment and promotion criteria in order to prioritize teaching and learning. | The institution does not have any incentive or reward mechanism for its teaching staff. | The institution has plans for the development of competency-based, fair and transparent incentive and reward mechanisms. | Incentive and rewards practices are implemented throughout the entire institution. | Incentives and rewards practices are followed up and improved. | There are internalized, systematic and sustainable practices that can be used as examples of best practices. |
| Sample Evidence   * Evidence for plans, practices and improvement about the appreciation-recognition and rewarding of the teaching performance of teaching staff * Evidence concerning the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| RESEARCH AND DEVELOPMENT  Artistic activities are also evaluated within this scope under the Research and Development heading in the higher education institutions which offer art education degrees. | | | | | |
| C.1. Management of Research Processes and the Research Resources  The institution should manage its research activities in a way that is aligned with its academic priorities determined within the framework of its strategic plan as well as the local, regional and national development objectives, adds value, and can be transformed into a social benefit. The institution should provide the required physical infrastructure and financial resources for these activities and enable their effective use. | | | | | |
|  | **1** | **2** | **3** | **4** | **5** |
| **C.1.1. Management of research processes**  Approaches adopted about the management of research processes, how the motivation and guidance function is designed, how clearly and definitely the short- and long-term goals are defined, and the research management team and their job descriptions are established, and practices are developed in line with these institutional preferences. The efficiency and success of the management of scientific research and artistic processes are monitored and improved. | The institution does not have plans for the management and organizational structure of its research processes. | The institution has plans that take matters like guidance and motivation into account regarding the management and organizational structure of its research processes. | The management and organizational structure of the research processes are practised in line with the institutional preferences throughout the entire institution. | The institution monitors the results and takes precautions about the efficiency of its research processes' management and organizational structure. | There are internalized, systematic and sustainable practices that can be used as examples of best practices. |
| Sample Evidence   * Management of the research processes and its organizational structure * The research governance model and practices * Evidence showing that the efficiency of the research management and organizational structure is followed up and improved * Evidence concerning the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| RESEARCH AND DEVELOPMENT | | | | | |
| C.1. Management of Research Processes and the Research Resources | | | | | |
|  | **1** | **2** | **3** | **4** | **5** |
| **C.1.2. Internal and external resources**  The institution's physical, technical and financial research resources are in line with and sufficient for its mission, objectives and strategies. The variety and sufficiency of the resources are followed up and improved.  There are easily accessible core intra-university funds for novice researchers. Research potential is developed through projects, conference participation, travel, expert invitation funds, and personal funds; staff motivation is fostered through rewards and competitive promotion criteria. The yearly changes, the efficiency and sufficiency, areas for further improvement and the level of meeting expectations of intra-university resources are evaluated.  Access to resources outside the university that are compatible with the mission and objectives are supported. Support units and methods employed for this purpose are defined and recognized by researchers. | The institution does not have sufficient resources to maintain its research and development activities. | The institution has plans for creating physical, technical and financial resources that are suitable in quality and quantity to be able to maintain its research and development activities. | The institution manages its research and development resources by taking its research strategy and the balance between its units into account. | The institution monitors and improves the variety and sufficiency of its research resources. | There are internalized, systematic and sustainable practices that can be used as examples of best practices. |
| Sample Evidence   * The research and development budget and its distribution * Strategic partnerships formed in the scope of research activities (public or private) * Evidence showing that the research and development resources are managed in line with the research strategy * Evidence for the follow-up of and improvements in the variety and sufficiency of the research resources * Defined processes regarding internal resources and their utilization (the Scientific Research Project (SRP) Directive, the Internal Resource Usage Directive, etc.) * Distribution of internal resources among the units * Methods and units formed to support the use of external resources * Evidence showing the distribution of external resources * Changes in the external resources by years * Evidence concerning the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| RESEARCH AND DEVELOPMENT | | | | | |
| C.1. Management of Research Processes and the Research Resources | | | | | |
|  | **1** | **2** | **3** | **4** | **5** |
| **C.1.3. Doctoral programs and postdoctoral opportunities**  The application processes, registered students, and alumni numbers, as well as the development trends of doctorate programs, are monitored. There are postdoctoral opportunities in the institution, and the inbreeding policy of the institution is clear. | The institution does not have doctoral programs or postdoctoral opportunities. | The institution has plans for doctorate programs and postdoctoral opportunities that are in line with the research policy, goals, and strategies of the institution. | The institution has doctorate programs and postdoctoral opportunities that support and are in line with the research policy, goals, and strategies of the institution. | The institution monitors and improves the outputs of doctoral programs and postdoctoral opportunities regularly. | There are internalized, systematic and sustainable practices that can be used as examples of best practices. |
| **Sample Evidence**   * Evidence for doctoral programs and postdoctoral opportunities * The numbers and distribution across units of the students/researchers who benefit from these programs and opportunities * Evidence for follow-up and improvement of the doctorate programs and postdoctoral opportunities * Evidence concerning the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| RESEARCH AND DEVELOPMENT | | | | | |
| C.2. Research Competence, Collaborations, and Supports  The institution should give opportunities (training, collaborations, supports, etc.) to teaching staff and researchers to maintain and improve their scientific research and artistic competence . | | | | | |
|  | **1** | **2** | **3** | **4** | **5** |
| **C.2.1. Research competencies and their development**  The rate of researchers with a doctoral degree, the distribution of institutions from which they earned the doctoral degrees, clustering/expertise accumulation, analyses of compatibility with research objectives, and alignment with objectives are examined. The institution carries out systematic activities like trainings, workshops, project markets, etc. to develop the research and development competencies of the academic staff . | The institution does not have mechanisms for developing research competencies of the teaching staff. | The institution has plans for developing the research competencies of its teaching staff. | There are practices for developing the research competencies of the teaching staff throughout the entire institution. | The practices for developing research competencies of the teaching staff are monitored, and the results are evaluated with the teaching staff to take precautions in the institution. | There are internalized, systematic and sustainable practices that can be used as examples of best practices. |
| Sample Evidence   * Plans and practices (supportive training, international opportunities, project collaboration works, etc.) aiming at developing the research competencies of the teaching staff * Feedback from teaching staff * Evidence for the follow-up and improvement of the research competencies of teaching staff * Evidence concerning the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| RESEARCH AND DEVELOPMENT | | | | | |
| C.2. Research Competence, Collaborations, and Supports | | | | | |
|  | 1 | 2 | 3 | 4 | 5 |
| C.2.2. National and international joint programs and joint research units  There are efficient mechanisms that encourage inter-institutional collaboration, interdisciplinary initiatives, and joint initiatives that create synergy. Multiple research activities like joint research or postgraduate programs, involvement in research networks, presence of joint research units, and national and international collaboration are defined, supported and monitored systematically to make improvements that are aligned with the objectives of the institution. | The institution does not have any mechanisms for establishing joint programs or joint research units on national and international levels. | The institution has plans and mechanisms for multiple research activities like national and international joint programs and joint research units, participation in research networks, and establishing collaborations. | National and international joint programs and joint research activities are carried out throughout the institution. | The institution monitors intra- and inter-institutional joint programs and joint research activities on national and international levels and makes improvements based on assessment with relevant stakeholders. | There are internalized, systematic and sustainable practices that can be used as examples of best practices. |
| **Sample Evidence**   * Mechanisms for establishing joint programs or joint research units on national and international levels * Research networks to which the institution is a party, joint programs and research units of the institution, studies produced from joint researches * Stakeholder feedback * Evidence for the follow-up and improvement of joint programs and joint research activities * Evidence concerning the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| RESEARCH AND DEVELOPMENT | | | | | |
| C.3. Research Performance  The institution should periodically measure and evaluate its research activities based on data and publish their results. The obtained data should be employed for the periodic review and continuous improvement of the institution's research and development performance. | | | | | |
|  | **1** | **2** | **3** | **4** | **5** |
| **C.3.1. The follow-up and evaluation of research performance**  The institutional research activities are annually monitored, evaluated, and compared against objectives, and the reasons for deviations are examined. The level of internal and external awareness about the focus points of the university, international visibility, analysis of claimed expertise areas, and compatibility with objectives are systematically analyzed. Incentive and appreciation mechanisms based on performance are employed. Competition with competitors and benchmarking are monitored. The systematic and permanent practice of performance evaluation is ensured. | The institution does not have mechanisms for monitoring and evaluating research performance. | The institution has principles, rules, and indicators for the follow-up and evaluation of its research performance. | Mechanisms established for follow-up and evaluation of the research performance are used throughout the institution. | The institution monitors its research performance and makes improvements with input from relevant stakeholders. | There are internalized, systematic and sustainable practices that can be used as examples of best practices. |
| **Sample Evidence**   * Defined processes to monitor the research performance * Mechanisms established to monitor whether the research objectives have been achieved or not * Stakeholder feedback * Evidence for the follow-up and improvement of research performance * Evidence concerning the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| RESEARCH AND DEVELOPMENT | | | | | |
| C.3. Research Performance | | | | | |
|  | **1** | **2** | **3** | **4** | **5** |
| **C.3.2. Performance evaluation for the teaching staff/researchers**  Each teaching staff member is expected to share their research performance; there are defined processes that regulate this, and relevant stakeholders recognize these processes. Research performance is monitored and evaluated annually and used in line with institutional policies. Outcomes, group averages, and scattering are shared transparently. The systematic and permanent practice of performance evaluation is ensured. | The institution does not have mechanisms for monitoring and assessing the research performance of the teaching staff. | The institution has principles, rules and indicators for the follow-up and evaluation of research performance of its teaching staff. | Established mechanisms for follow-up and assessment of the research and development performance of teaching staff are used throughout the institution. | The research and development performance of the teaching staff is monitored, and improvements are made by assessing them with the teaching staff. | There are internalized, systematic and sustainable practices that can be used as examples of best practices. |
| **Sample Evidence**   * Defined and valid processes related to the follow-up of academic staff's research and development performance (Regulations, directives, process definitions, measurement tools, guide, manual, an appreciation-recognition system, incentive mechanisms, etc.) * Analysis reports of the research performance of teaching staff * Feedback from teaching staff * Evidence for follow-up and improvement records on research and development performance * Evidence for the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| SERVICE TO SOCIETY | | | | | |
| D.1. Management of Service to Society Processes and the Service to Society Resources  The institution should manage its service to society activities in accordance with its strategic objectives and goals. The institution should provide the required physical infrastructure and financial resources for these activities and enable their effective use. | | | | | |
|  | **1** | **2** | **3** | **4** | **5** |
| **D.1.1. Management of service to society processes**  The service to society policy, the management of the service to society processes, and their organizational structure are institutionalized. The management and organizational structure of the service to society processes are in alignment with the service to society policy of the institution, and job descriptions are determined. The functioning of the structure is monitored, and relevant improvements are made. | The institution does not have plans for the management and organizational structure of its service to society processes. | The institution has plans for the management and organizational structure of its service to society processes. | The management and organizational structure of the service to society processes are practised in line with the institutional preferences throughout the institution. | The institution monitors the results and takes precautions about the efficiency of the management and organizational structure of its service to society processes. | There are internalized, systematic and sustainable practices that can be used as examples of best practices. |
| **Sample Evidence**   * Management and organizational structure of service to society processes * The service to society governance model * Units conducting service to society activities and the example practices * Evidence for the follow-up and improvement regarding the efficiency of management and organizational structure of service to society processes * Evidence concerning the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| SERVICE TO SOCIETY | | | | | |
| D.1. Management of Service to Society Processes and the Service to Society Resources | | | | | |
|  | **1** | **2** | **3** | **4** | **5** |
| **D.1.2. Resources**  Resources allocated to service to society activities (financial, physical, human power) are determined, shared, and institutionalized; they are monitored and assessed. | The institution does not have sufficient resources to maintain its service to society activities. | The institution has plans for creating physical, technical and financial resources that are suitable in quality and quantity to be able to maintain its service to society activities. | The institution manages its service to society resources by taking the service to society strategy and the balance between units into account. | The institution monitors and improves the variety and sufficiency of its service to society resources. | There are internalized, systematic and sustainable practices that can be used as examples of best practices. |
| Sample Evidence   * Research and application centers and other units that conduct service to society activities * The budget allocated to service to society works and its yearly changes * Evidence showing that the service to society resources are managed in line with the service to society strategy * Evidence for the follow-up and improvements of the variety and sufficiency of the service to society resources * Evidence concerning the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| SERVICE TO SOCIETY | | | | | |
| D.2. Service to Society Performance  The institution should periodically monitor and continuously improve the activities it maintains in line with its service to society strategy and objectives. | | | | | |
|  | **1** | **2** | **3** | **4** | **5** |
| **D.2.1. The follow-up andevaluation of service to society performance**  The institution engages in service to society activities that align with the UN Sustainable Development Goals, can meet the needs of the society including the disadvantaged groups and the environment, and add value. Service to society activities such as institutional collaborations on national and international levels, appointments to various public institutions and organizations, as well as the training, service, research, advising, etc. conducted through the units of the institution are monitored. The follow-up mechanisms and processes are established and sustainable. There is evidence for steps taken for improvement. | The institution does not have any mechanisms for the follow-up and improvement of its service to society performance. | The institution has principles, rules and indicators for the follow-up and evaluation of its service to society performance. | Mechanisms established for the follow-up and evaluation of the service to society performance are used throughout the entire institution. | The institution monitors its service to society performance and makes improvements with input from relevant stakeholders. | There are internalized, systematic and sustainable practices that can be used as examples of best practices. |
| **Sample Evidence**   * Service to society activities in line with the objectives of the institution * Defined and valid processes to monitor the service to society performance * Mechanisms established to monitor whether the service to society objectives are achieved or not * Stakeholder feedback * Evidence for the follow-up and improvement of service to society performance * Evidence concerning the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation | | | | |

# ANNEX.2 PERFORMANCE INDICATORS

This document has been prepared in order to explain the questions in the "Indicators" module in the "Quality Assurance Management Information System" on the official website of the Turkish Higher Education Quality Council, www.yokak.gov.tr, and to facilitate the entering of data for the relevant indicators correctly.

Indicators marked with \* represent "THEQC Key Performance Indicators".

Data Sources

Data published on the Higher Education Information System (HEIS, YÖKSİS in Turkish) => istatistik.yok.gov.tr

Institution => Data filled out by the institution itself

Centre for Assessment, Placement and Selection (ÖSYM) => Data taken from ÖSYM

THEQC => Refers to data taken from different sources (calculated by URAP, THE, WOS or the Council)

Except as stated below; the data obtained from the Council of Higher Education (CoHE, YÖK in Turkish), ÖSYM and other institutions are taken collectively for 5 years from the sources mentioned above by THEQC.

**1. Under the heading of** "Information on the Institution" the followings are filled by the institutions before 2019 and are taken from the Higher Education Information System (HEIS, YÖKSİS in Turkish) for 2019 indicators.; 1- Number of Faculties, 2- Number of Graduate Schools, 3- Number of Schools, 4- Number of Vocational Schools, 5- Number of Research and Application Centers, 6- Number of Associate Degree Programs, 7- Number of Undergraduate Degree Programs, 8- Number of Master's Degree Programs, 9- Number of Doctoral Programs, 10- Number of Proficiency in Arts Programs. Among these data classified as Active, Passive and Semi-Passive, only ACTIVE ones are taken.

2. Under the heading of Quality Assurance System, the following addresses are used;

5- SCIMAGO => <https://www.scimagoir.com/> ,

6- Round University Ranking (RUR) => <https://roundranking.com/> ,

7- URAP World Ranking => <https://www.urapcenter.org/Rankings> ,

8- URAP Turkey Ranking => <http://tr.urapcenter.org/> ,

9- Webometrics => <http://www.webometrics.info/> ,

10- Times Higher Education (THE) => <https://www.timeshighereducation.com/> ,

11- QS => <https://www.topuniversities.com/> ,

12-QS Europe and Central Asia Ranking=><https://www.topuniversities.com/> ,

13- USNEWS => <https://www.usnews.com/> ,

14- NTU => <http://nturanking.lis.ntu.edu.tw/>,

15- ARWU => <http://www.shanghairanking.com/>.

**3. Since the following under Learning and Teaching heading are entered by the institutions including 2019 and will be taken from CoHE in the coming years, they are written under the heading of "Data obtained from "HEIS" ;** 7- Number of Interdisciplinary Master's Degree Programs with Thesis, 8- Number of Interdisciplinary Non-Thesis Master's Degree Programs, 9- Number of Interdisciplinary Doctoral Programs.

**4- Under the heading of Research and Development** the following are taken from WOS - InCites by THEQC; 1- Number of Annual Publications in SCI, SSCI and A&HCI Indexed Journals, 3- Number of Citations, 4- Citation Score, 5- Q1 Number of Publications, 6- Q1 Publication Rate. As stated in the explanations, "Article" and "Review" filters are applied while collecting the data.

The following are taken from the Scopus database by THEQC; 7- Total Number of Publications (Documents), 9- Field-Weighted Citation Index, 10- Number of Internationally Co-authored Publications 11- The Ratio of Number of Internationally Co-authored Publications to the Total Number of Publications , 12- Number of Publications Made with University-Industry Cooperation, 13- The Ratio of the Number of Publications Made in Cooperation with the University and Industry to the Total Number of Publications, 14- Number of Cited Publications in the First 10%, 15- The Ratio of the Number of Cited Publications in the First 10% to the Total Number of Publications, 16- The Number of Publications in Journals in the Top 10%, 17- The Ratio of the Number of Publications in Journals in the Top 10% to the Total Number of Publications.

Due to the general reporting structure of THEQC, the time interval given in the indicator statement is "as of December 31st ..." Even though written as (Calendar Year), since these data are kept on "Learning and Teaching Period" basis in HEIS system, which is the source of the data, the time interval is taken as the related "Learning and Teaching Year" in order to reach the common data.

Important Notices on Data Entries

The points to be considered while entering the indicator through the Quality Assurance Management Information System are listed below.

Important Notice 1

During Data Entry;

* **Use comma (,) for decimal separator**
* **Do not use period (.) for numbers with 4 or greater digits**

Sample Indicator

Total Amount of Education + Research Areas (m2)

|  |  |  |  |
| --- | --- | --- | --- |
| Actual Data | How Data is Entered | Data Generated in the System | Result |
| 97552 | 97.552 | 97,552 | C:\Users\serhat.dogan\Desktop\false-image-0163.jpg |
| 97552 | 97552 | 97552 | C:\Users\serhat.dogan\Desktop\confirm-679245_960_720.png |
| 97552,53 | 97552.53 | 97552,53 | C:\Users\serhat.dogan\Desktop\confirm-679245_960_720.png |
| 97552,53 | 97552,53 | 97552,53 | C:\Users\serhat.dogan\Desktop\confirm-679245_960_720.png |
| 1754698 | 1.754.698 | 0 | C:\Users\serhat.dogan\Desktop\false-image-0163.jpg |
| 1754698 | 1754698 | 1754698 | C:\Users\serhat.dogan\Desktop\confirm-679245_960_720.png |
| 87,98 | 87,98 | 87,98 | C:\Users\serhat.dogan\Desktop\confirm-679245_960_720.png |

Important Notice 2

Some indicators take place as ... rate.

* If it is not stated **(as %) in the sentence,** proportion the numerator and denominator of the value in the related indicator.
* If it is stated in the sentence **(as %) ,** write it in percentage after proportioning the value in the related indicator.

Sample Indicator

Academic Staff Satisfaction Rate **(as %)**

|  |  |  |  |
| --- | --- | --- | --- |
| Actual Data | How Data is Entered | Data Generated in the System | Result |
| 95,58 | 95,58 | 95,58 | C:\Users\serhat.dogan\Desktop\confirm-679245_960_720.png |
| 0,567 | 0,567 | 0,567 | C:\Users\serhat.dogan\Desktop\false-image-0163.jpg |
| **Attention**: As in this example, if your satisfaction rate is 56/100, that is 56%, but if you calculated it as 0.56 while formulating it, please convert the figure you calculated into a percentage (%) and then write it. In this case, the number to be entered will be 0.567 \* 100 = 56.7. | | | |
| 56.7 | 56,7 | 56,7 | C:\Users\serhat.dogan\Desktop\confirm-679245_960_720.png |

The Ratio of the Number of Associate + Bachelor's + Master's + Doctoral Programs to the Total Number of Programs of which Program Information Package is complete and can be viewed on the website of the institution

|  |  |  |  |
| --- | --- | --- | --- |
| Actual Data | How Data is Entered | Data Generated in the System | Conclusion |
| 0,57 | 0,57 | 0,57 | C:\Users\serhat.dogan\Desktop\confirm-679245_960_720.png |
| 0,57 | 57 | 57 | C:\Users\serhat.dogan\Desktop\false-image-0163.jpg |

Important Notice 3

No indicator value can be less than 0 (zero). Enter minimum 0 (zero) data for the relevant indicator values ​​or leave it blank. If you do not have a measurement related to the indicator, you can leave the indicator blank or enter "0". There is no difference between not entering data and entering 0 during data entry and the indicator values ​​in both cases will be displayed as blank during reporting.

Important Notice 4

Upload the indicators by changing the names of the files. If you upload a file with the same name, it will overwrite the previously uploaded file.

Important Notice 5

When uploading evidence on the indicators, instead of uploading the whole report for the related indicator, add the required section/s of the related report.

Important Notice 6

Make sure that the data uploaded on the evidence is uploaded in accordance with the "Personal Data Protection Law" and other legislative provisions.

Important Notice 7

While calculating the data regarding the indicators, the calendar year will generally be taken as a basis. The data should cover the dates from January 1 to December 31. (It will be given in detail in the table below.)

Important Notice 8

Regarding the financial values ​​under the heading of Governance System; Foundation Universities may enter their data for the last audit period in order to be compatible with CoHE audits, as required by their own systems. State universities should enter the relevant Financial Year information.

|  |  |  |
| --- | --- | --- |
| The THEQC Performance Indicators | From | Descriptions |
| 1. Information on the Institution |  |  |
| 1- Number of Faculties | HEIS | Refers to the number of Active Faculties as of December 31. |
| 2- Number of Graduate Schools | HEIS | Refers to the number of Active Graduate Schools as of December 31. |
| 3- Number of Schools | HEIS | Refers to the number of Active Schools as of December 31. |
| 4- Number of Vocational Schools | HEIS | Refers to the number of Active Vocational Schools as of December 31. |
| 5- Number of Research and Application Centers | HEIS | Refers to the number of Active Research and Application Centers as of December 31. |
| 6- Number of Associate Degree Programs | HEIS | Refers to the number of Active Associate Degree Programs as of December 31. |
| 7- Number of Undergraduate Degree Programs | HEIS | Refers to the number of Active Undergraduate Degree Programs as of December 31. |
| 8- Number of Master's Degree Programs | HEIS | Refers to the number of Active Master's Degree Programs as of December 31. |
| 9- Number of Doctoral Programs | HEIS | Refers to the number of Active Doctoral Programs as of December 31. |
| 10- Number of Proficiency in Arts Programs | HEIS | Refers to the number of Active Proficiency in Arts Programs as of December 31. |
| 11- Total Amount of Education + Research Areas (m2) | INSTITUTION | Refers to the total of Education + Research areas (m2) as of December 31. Education and Research areas differ on an institutional basis, and data entry will be provided on the classification to be created by the institutions themselves. |
| 12- Number of Associate Degree Program Students | HEIS | Refers to the number of Associate Degree Program students as of December 31. Data entry will be made regardless of student's nationality. |
| 13- Number of Undergraduate Degree Program Students | HEIS | Refers to the number of Undergraduate Degree Program active students as of December 31. Data entry will be made regardless of student's nationality. |
| 14- Number of Associate Degree Students Enrolled in your Open Education Programs | HEIS | Refers to the number of active students in Associate Degree Programs of institutions providing education at Open Education level as of December 31. Data entry will be made regardless of student's nationality. |
| 15- Number of Undergraduate Degree Students Enrolled in your Open Education Programs | HEIS | Refers to the number of active students in Undergraduate Degree Programs of institutions providing education at Open Education level as of December 31. Data entry will be made regardless of student's nationality. |
| \*16- Number of International Students | INSTITUTION | Refers to the number of international students as of December 31. This indicator will not affect the indicator value of "Total Number of Students" in order to avoid duplicate record. |
| 17- Number of Students Enrolled in Master's Degree Programs with Thesis | HEIS | Refers to the number of active students enrolled in Master's Degree Programs with Thesis as of December 31. Data entry will be made regardless of student's nationality. |
| 18- Number of Students Enrolled in Non-Thesis Master's Degree Programs | HEIS | Refers to the number of active students enrolled in Non-Thesis Master's Degree Programs as of December 31. Data entry will be made regardless of student's nationality. |
| \*19- Total Number of Master's Degree Program Students | CALCULATION (1.17+1.18) |  |
| \*20- Number of Doctoral Students | HEIS | Refers to the number of active Doctoral Students as of December 31. Data entry will be made regardless of student's nationality. |
| \*21- Total Number of Students | CALCULATION (1.12+1.13+1.19+1.20) |  |
| 22- Number of Associate Degree Graduates | HEIS | Refers to the number of students who graduated from Associate Degree Programs in the related year between January 1 - December 31. |
| 23- Number of Undergraduate Degree Graduates | HEIS | Refers to the number of students who graduated from Undergraduate Degree Programs in the related year between January 1 - December 31. |
| 24- Number of Master's Degree Graduates | HEIS | Refers to the number of students who graduated from the Master's Degree Programs in the related year between January 1 - December 31. |
| 25- Number of Doctoral Program Graduates | HEIS | Refers to the number of students who graduated from Doctoral Programs in the related year between January 1 - December 31. |
| 26- Total Number of Graduates | CALCULATION (1.22+1.23+1.24+1.25) |  |
| \*27- Number of Students who Left the University (Excluding Graduates) | INSTITUTION | Refers to the number of students who dropped out of school, cancelled their enrollment or are dismissed for any reason, excluding those who graduated in the related year, between January 1 and December 31. |
| 28- Number of International Teaching Staff | INSTITUTION | Refers to the number of International Teaching Staff as of December 31. |
| \*29- Number of Faculty Members | HEIS | Refers to the number of Faculty Members regardless of their nationalities as of December 31. |
| \*30- Number of Teaching Staff | HEIS | Refers to the number of Teaching Staff regardless of their nationalities as of December 31. |
| 31- Number of Administrative Staff | INSTITUTION | Refers to the number of Administrative Staff as of December 31. The number of personnel tenured while working under contract will also be included in the related indicator. |
| 32- (Total Amount of Education + Research Areas) / (Total Number of Students) Ratio | CALCULATION (1.11/1.21) |  |
| 2. Quality Assurance System |  |  |
| \*1- Percentage of Achieved Goals Regarding Learning and Teaching Activities Included in the Strategic Plan of the Institution (as %) | INSTITUTION | The percentage of realization for the indicator in the related year between January 1 - December 31 will be entered.  The related indicator is asked as %, so:  -> Enter the indicator value of 4.15 out of 5 as 4.15x20=83.  -> If the Achieved Percentage is 64 out of 100, enter the related data as 64, not 0.64.  -> If the Achieved Percentage is greater than 100, you can enter the relevant value.  -> If the Achieved Percentage is less than 0, enter 0. |
| \*2- Percentage of Achieved Goals Regarding Research Activities Included in the Strategic Plan of the Institution (as %) | INSTITUTION |
| \*3- Percentage of Achieved Goals Regarding Administrative Activities Included in the Strategic Plan of the Institution (as %) | INSTITUTION |
| \*4- Percentage of Achieved Goals Regarding Service to Society Activities Included in the Strategic Plan of the Institution (as %) | INSTITUTION |
| \*5- SCIMAGO | THEQC |  |
| \*6- Round University Ranking (RUR) | THEQC |  |
| \*7- URAP World Ranking | THEQC |  |
| \*8- URAP Turkey Ranking | THEQC |  |
| \*9- Webometrics | THEQC |  |
| \*10- Times Higher Education (THE) | THEQC |  |
| \*11- QS | THEQC |  |
| \*12-QS Europe and Central Asia Ranking | THEQC |  |
| \*13- USNEWS | THEQC |  |
| \*14- NTU | THEQC |  |
| \*15- ARWU | THEQC |  |
| \*16-TÜBİTAK Entrepreneurial and Innovative University Index | THEQC |  |
| 17- Number of Activities Organized by Your Institution to Spread the Culture of Quality (Meeting, Workshop, etc. Number | INSTITUTION | Refers to the number of meetings held in the relevant year between January 1 - December 31 regarding the indicator.  These activities should be of institutional nature.  The meetings that can be called “unit quality commissions” and held on single- unit basis are not referred. |
| \*18- Number of Feedback and Evaluation Meetings Held by the Institution with its Internal Stakeholders within the Scope of Quality Processes | INSTITUTION |
| \* 19- Number of Feedback and Evaluation Meetings Held by the Institution with its External Stakeholders within the Scope of Quality Processes | INSTITUTION |
| \* 20- Academic Staff Satisfaction Rate (as %) | INSTITUTION | Information regarding the Satisfaction Surveys specified in the indicator, which is made to cover the dates January 1 - December 31 of the related year, will be entered.  The related indicator is asked as %, so:  -> Enter the indicator value of 4.15 out of 5 as 4.15x20=83.  -> Enter Min. 0 and max. 100 values.  -> For example, if you are conducting an evaluation survey for 2018 in January 2019, include the result information in this indicator calculation.  -> For example, if you have conducted 2 Academic Staff satisfaction surveys covering the related year, write the arithmetic average of the relevant satisfaction rates. (If the result of the first is 87 and the result of the second is 92, the value you need to write => 89.5) |
| \* 21- Administrative Staff Satisfaction Rate (as %) | INSTITUTION |
| \* 22- Student General Satisfaction Rate (as %) | INSTITUTION |
| \* 23- Number of Incoming Students via Student Exchange Program | HEIS | Refers to the Number of Incoming or Outgoing Students with the Student Exchange Programs in the related year for the indicator between January 1 and December 31. |
| \* 24- Number of Outgoing Students via Student Exchange Programs | HEIS |
| \* 25- Number of Incoming Teaching Staff via Teaching Staff Exchange Programs | INSTITUTION | Refers to the Number of Incoming or Outgoing Teaching Staff with the Teaching Staff Exchange Programs in the related year for the indicator between January 1 - December 31. |
| \* 26- Number of Outgoing Teaching Staff via Teaching Staff Exchange Programs | INSTITUTION |
| 3. Learning and Teaching |  |  |
| \*1- The ratio of the Number of Associate + Undergraduate + Master's + Doctoral Programs, whose Program Information Package is Complete, to the Total Number of Programs can be viewed on the Institution's Website | INSTITUTION | The ratio of the number of active programs whose information package has been completed (Bologna Process has been completed, ECTS has been defined, Course contents have been entered etc.), which can be shared with the public (published on the website of the institution) as of December 31, to the total number of active programs, is requested.  -> This number should be between 0 and 1. |
| \* 2- Students' Satisfaction Rate with the Program They are Enrolled in (as %) | INSTITUTION | Information regarding the Satisfaction Survey specified in the indicator, which is made to cover the dates January 1 - December 31 of the related year, will be entered.  The related indicator is asked as %, so:  -> Enter the indicator value of 4.15 out of 5 as 4.15x20=83.  -> Enter Min. 0 and max. 100 values.  -> For example, if you are conducting an evaluation survey for 2018 in January 2019, include the result information in this indicator calculation.  -> For example, if you have conducted 2 satisfaction surveys covering the related year, write the arithmetic average of the relevant satisfaction rates. (If the result of the first is 87 and the result of the second is 92, the value you need to write => 89.5) |
| 3- Number of Undergraduate Students with Double Major | INSTITUTION | Refers to the number of Undergraduate Students who have Double Major as of December 31. |
| 4- Number of Undergraduate Students with a Minor | INSTITUTION | Refers to the number of Undergraduate Students who have a Minor as of December 31. |
| \*5- Rate of Undergraduate Students with a Double Major | CALCULATION (3.3/1.13) |  |
| \*6- Rate of Undergraduate Students with a Minor | CALCULATION (3.4/1.13) |  |
| \*7- Number of Interdisciplinary Master's Programs with Thesis | HEIS | Refers to the number of Active Interdisciplinary Master's Programs with Thesis as of December 31. |
| \*8- Number of Interdisciplinary Non-Thesis Master's Degree Programs | HEIS | Refers to the number of Active Interdisciplinary Non-Thesis Master's Degree Programs as of December 31. |
| \*9- Number of Interdisciplinary Doctoral Programs | HEIS | Refers to the number of Active Interdisciplinary Doctoral Programs as of December 31. |
| \*10- Number of Teaching Staff Receiving Training Under the Training of Trainers Program | INSTITUTION | Refers to the number of Teaching Staff who received training within the scope of the relevant indicator between January 1 - December 31.  The entered number cannot exceed the "Total Number of Teaching Staff".  Enter the number of events organized by your institution for the training of trainers between January 1 and December 31, either at your institution or at another institution or jointly with another institution (It refers to activities for which you are principally responsible or jointly responsible. Events organized by another institution to which your institution participated only as an attendee do not count. ) |
| \*11- The Average of the Number of Course Hours per Week for Teaching Staff for Two Semesters | INSTITUTION | The weekly average of the courses between January 1 and December 31 per tenured teaching staff is asked.  An example, for the 2019 year (report) data entry:  If a total of 80,000 hours of theoretical + practical lessons were given in 2018-2019 Spring and 2019-2020 fall semesters, the training was given for 27 weeks out of which 13 weeks in the Spring semester and 14 weeks in the Fall semester; it means that an average of 80000/27=2962 hours of training was given in 1 week. If the total number of tenured teaching staff is 210, the required result is 2962/210=14.10. |
| \*12- Number of Available (Printed) Resources in the Institution's Library | INSTITUTION | Refers to the printed resources in the library of the institution (the total number of resources your institution has in categories Textbook, Source Book, Reference Book, Printed Periodical Publication, etc.) as of December 31 . |
| 13- Number of E-Resources | INSTITUTION | Refers to the number of e-resources such as videos, magazines, and books, etc. purchased and subscribed to by your institution as of December 31. |
| \*14- Number of Undergraduate Programs Indicated as Accredited in the HEIE (YKS in Turkish) Higher Education Programs and Quotas Guide | THEQC | Refers to the number of Undergraduate Programs accredited in the last term HEIE guide as of December 31. |
| \*15- Number of Peer Evaluation Programs (Among Non-Accredited Programs) | INSTITUTION | Refers to the Number of Peer Evaluation Programs Among Non-Accredited Programs between January 1 - December 31.  With the exception of accredited programs, enter the number of programs that are evaluated by evaluation teams that can be formed within the institution (evaluators may also be invited from outside the institution) or evaluation teams formed from different institutions' personnel upon invitation or an independent organization outside the institution. |
| \*16- Number of Programs with Self-Evaluation | INSTITUTION | Refers to the Number of Self-Evaluated Programs between January 1 - December 31. |
| \*17- Satisfaction Rate of the Business World Regarding the Qualifications of Alumni (as %) | INSTITUTION | Information regarding the Satisfaction Surveys specified in the indicator that covers the dates January 1 - December 31 of the relevant year, will be entered.  The related indicator is asked as %, so:  -> Enter the indicator value of 4.15 out of 5 as 4.15x20=83.  -> Enter Min. 0 and max. 100 values.  -> For example, if you are conducting an evaluation survey for 2018 in January 2019, include the result information in this indicator calculation.  -> For example, if you have conducted 2 satisfaction surveys covering the related year, write the arithmetic average of the relevant satisfaction rates. (If the result of the first is 87 and the result of the second is 92, the value you need to write => 89.5) |
| \*18- (Number of Graduates Placed based on SME (TUS in Turkish) Examination scores) / (Number of Graduates Entering SME Examination) Ratio | ÖSYM |  |
| \*19- (Number of Graduates Placed in SDE (DUS in Turkish) Examination) / (Number of Graduates Entering SDE Examination) Ratio | ÖSYM |  |
| \*20- (Number of Graduates Placed in SPE (EUS in Turkish) Examination) / (Number of Graduates Entering SPE Examination) Ratio | ÖSYM |  |
| \*21- Number of Employed Graduates | INSTITUTION | Refers to the number of employed graduates obtained through structures such as Alumni information system, association, portal, etc. as of December 31. Data will be entered cumulatively.  For example, according to the information obtained through portal / association, etc., if you have 2300 employed alumni in 2018 and 2400 in 2019, enter 2300 in 2018 and 4700 in 2019. |
| \*22- (Number of Available (Printed) Resources in the Library of the Institution) / (Total Number of Students) Ratio | CALCULATION (3.12/1.21) |  |
| 23- (E-Resource) / (Total Number of Students) Ratio | CALCULATION (3.13/1.21) |  |
| \*24- (Total Number of Students in Undergraduate and Graduate Programs) / (Total Number of Teaching Staff) Ratio | CALCULATION ((1.13+1.19+1.20)/1.30)) |  |
| \*25- (Total Number of Students in Undergraduate and Graduate Programs) / (Total Number of Teaching Staff) Ratio | CALCULATION ((1.13 + 1.19 + 1.20)/1.29)) |  |
| 26- (Number of Students in Associate Degree Programs) / (Number of Teaching Staff) Ratio | CALCULATION ((1.12 + 1.14)/1.30)) |  |
| \* 27- (Total Number of Students) / (Number of Teaching Staff) Ratio | CALCULATION (1.21 / 1.30) |  |
| \*28- (Number of International Students) / (Total Number of Students) Ratio | CALCULATION (1.16 / 1.21) |  |
| \*29- (Number of Doctoral Students) / (Total Number of Students) Ratio | CALCULATION (1.20 / 1.21) |  |
| \*30- (Number of International Teaching Staff) / (Total Number of Teaching Staff) Ratio | CALCULATION (1.28 / 1.30) |  |
| \*31- (Number of Administrative Staff) / (Total Number of Students) Ratio | CALCULATION (1.31 / 1.21) |  |
| \*32- (Number of Administrative Staff) / (Number of Teaching Staff) Ratio | CALCULATION (1.31 / 1.30) |  |
| 4- Research and Development |  |  |
| \*1- Annual Number of Publications in SCI, SSCI and A & HCI Indexed Journals (WOS) | THEQC | Refers to the number of publications in the related indexed journals between January 1 - December 31 (Taken from WOS - InCites and "Article" and "Review" filters were applied while collecting the data). |
| \*2- Annual Number of Publications in SCI, SSCI and A & HCI Indexed Journals per Teaching Staff | CALCULATION (4.1 / 1.29) |  |
| \* 3- Number of Citations (WOS) | THEQC | Refers to the arithmetic average of the number of citations made to the related indexed journals in the last 3 years. (Taken from WOS - InCites.)  For example:  Number of Citations in 2020:  (Number of Citations in 2020 + Number of Citations in 2019 + Number of Citations in 2018)/3 |
| \* 4- Citation Score (WOS) | THEQC | Refers to the citation score calculated by dividing the arithmetic average of the number of citations made to the related indexed journals in the last 3 years by the number of faculty members.    For example:  Citation Score in 2020:  ((Number of Citations in 2020 + Number of Citations in 2019 + Number of Citations in 2018)/3) / (Number of Teaching Staff for 2020) |
| \* 5- Number of Q1 Publications (WOS) | THEQC | Refers to the number of Q1 publications in the related indexed journals between January 1 - December 31 (taken from WOS - InCites and "Article" and "Review" filters were applied while collecting the data). |
| \*6- Q1 Publications (WOS) Ratio | THEQC | Refers to the ratio of Q1 publications in the related indexed journals between January 1 - December 31 (taken from WOS - InCites and "Article" and "Review" filters were applied while collecting the data). |
| \*7- Total Number of Publications (Documents) (Scopus) | THEQC | Refers to the number of all publications (articles, reviews, letters, books, book chapters, conferences, etc.) between January 1 - December 31 . (Taken from Scopus data source). |
| \*8- Ratio of Total Number of Publications (Documents) to Number of Teaching Staff | CALCULATION (4.7 / 1.29) |  |
| \*9- Field-Weighted Citation Index (Scopus) | THEQC | Expressed as the ratio of the average number of citations received to the institution's publications in a specific field between January 1 and December 31, to the average number of citations received to an article in the same field in the world (Taken from Scopus data source and self-attribution is included). ) |
| \*10- Number of Publications Created with International Cooperation (Scopus) | THEQC | Refers to the number of publications (in international indexes) created with international cooperation between January 1 - December 31. (Taken from Scopus data source). |
| \*11- The Ratio of the Number of Publications Created with International Cooperation to the Total Number of Publications (Scopus) | THEQC | Refers to the ratio of the number of publications (journal indexed by international indexes) to the total number of publications created with international cooperation between January 1 and December 31. (Taken from Scopus data source). |
| \* 12- Number of Publications Created with University-Industry Cooperation (Scopus) | THEQC | Refers to the number of publications (in journals indexed by international indexes) created in cooperation with the University-Industry between January 1 - December 31. (Taken from Scopus data source). |
| \*13- The Ratio of the Number of Publications Created in Cooperation with the University-Industry and the Total Number of Publications (Scopus) | THEQC | Refers to the ratio of the number of publications (in journals indexed by international indexes) created in cooperation with the University-Industry between January 1 and December 31, to the total number of publications. (Taken from Scopus data source). |
| \*14- Number of Publications Cited in the Top 10% (Scopus) | THEQC | Refers to the number of publications cited in the top 10% (in international indexes) between January 1 - December 31 (taken from Scopus data source). |
| \*15- The Ratio of the Number of Publications Cited in the Top 10% to the Total Number of Publications (Scopus) | THEQC | Refers to the ratio of the number of publications cited in the top 10% (in international indexes) to the total number of publications between January 1 - December 31 (taken from Scopus data source). |
| \*16- Number of Publications in Journals Placed in the Top 10% (Scopus) | THEQC | Refers to the number of publications in journals in the top 10% (included in international indexes) between January 1 - December 31 (taken from Scopus data source.) |
| \*17- The Ratio of the Number of Publications in the Journals in the Top 10% to the Total Number of Publications (Scopus) | THEQC | Refers to the ratio of the number of publications in the journals in the top 10% (included in international indexes) to the total number of publications between January 1 - December 31 (taken from Scopus data source.) |
| \*18- Number of Completed Externally Supported Projects | THEQC | Refers to the number of externally supported projects (supported by national or international organizations outside the institution) completed between January 1 and December 31. (Refers to the numbers of projects, for example, SRP and, if any, TÜBİTAK, SANTEZ, EU, etc. that are out of a project's scope and funded by the intitution itself). |
| \*19- Number of Completed Externally Supported Projects per Teaching Staff | CALCULATION (4.18 / 1.29) |  |
| \*20- Total Budget of Completed Externally Supported Projects | INSTITUTION | 18. Refers to the total budget of Completed Externally Supported Projects specified in Article 18. |
| \*21- Number of concluded Patents, Utility Models or Designs | INSTITUTION | Refers to a Patent, Utility Model or Design that is concluded between January 1 - December 31, regardless of whether it is at national or international level.  Number of patents, utility models or designs whose applications were made by students, teaching staff or employees employed at the university and were approved in the related year  Personal applications not addressed to the university but made by students, researchers or teaching staff are included in the evaluation. |
| \*22- Number of Active Technology Companies of Teaching Staff | INSTITUTION | Represents the number of Technology Companies of Teaching Staff that are in Operation as of December 31.  If there is a techno park, etc. belonging to your institution, the number of technology companies belonging to the teaching staff of the companies within the related structures (regardless of whether they work at your or another university) are requested. |
| \*23- Number of TÜBA and TÜBİTAK Awarded Teaching Staff (Excluding TÜBA Translation Award) | INSTITUTION | Refers to the number of faculty members who received TÜBA and TÜBİTAK Awards between January 1 - December 31 (Excluding TÜBA Translation Award). |
| \*24- International Awards | INSTITUTION | Refers to the International Awards Received as Institution, on behalf of the Institution, or Officially in Affiliation to the Institution between January 1 - December 31. |
| \*25- Number of Students at Master's Degree Programs with Thesis per Teaching Staff | CALCULATION (1.17 / 1.29) |  |
| \*26- Number of Doctoral Students per Teaching Staff | CALCULATION (1.20 / 1.29) |  |
| 5- Service to Society |  |  |
| \*1- Number of Service to Society Projects Carried out by the Institution Itself | INSTITUTION | Refers to the number of Service to Society Projects Carried Out by the Institution itself, with or without a Budget, as of December 31. |
| \*2- Annual Training Hours of Continuous Education Center (CEC), Lifelong Learning Center, etc. | INSTITUTION | Refers to the annual training hours given by CEC, Lifelong Learning Center and similar structures in the related year as of December 31. |
| \*3- Number of People Receiving Annual Training from CEC, Lifelong Learning Center, etc. | INSTITUTION | 2. The number of people receiving trainings provided by the centers specified in Article 2. |
| 6- Governance System |  |  |
| 1- Central Budget | INSTITUTION | It will be filled in by the State Universities and it is required to enter the initial grant amount allocated to the institution within the framework of the related financial year's central budget law. Foundation Universities will not fill in any data. |
| 2- Student Incomes | INSTITUTION | State Universities will enter the income and expense information in the indicators over the last education term data for the relevant year, as stated in Important Notice 8, and the Foundation Universities will enter the income and expense etc. information in the indicators for the relevant financial year between January 1 and December 31. Some indicators are data that can be taken directly within the accounting system (such as Personnel income/expenses, Student income/expenses) and some indicators are data that can be accessed as a result of more detailed investigation due to institutional policies and the classification they make.  For example, an institution's activities of the Continuing Education Center are considered as Service to Society and the income and expenses are calculated accordingly, while the public pools, cafeterias and hotels for another institution can be considered as service to society, it is up to the institution to make a classification and enter data related to this classification. |
| 3- Research Incomes | INSTITUTION |
| 4- Service to Society Incomes | INSTITUTION |
| 5- Donations | INSTITUTION |
| 6- Staff Expenses | INSTITUTION |
| 7- Education Expenses | INSTITUTION |
| 8- Research Expenses | INSTITUTION |
| 9- Service to Society Expenses | INSTITUTION |
| 10- Administration Expenses | INSTITUTION |
| 11- Investment Expenses | INSTITUTION |

