

INSTITUTIONAL SELF EVALUATION REPORT(ISER) WRITING GUIDE

Version 3.0

To be used in accordance with Institutional External Evaluation and Accreditation Criteria (Version 3.0)

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GENERAL INFORMATION

Introduction

The Institutional Self-Evaluation Report (ISER) is annually prepared by the institution with the aim of following annual self-evaluation processes of the institution and presenting a point of reference for the Institutional External Evaluation Program/Institutional Accreditation Program/Follow-up Program processes. 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 and Follow-up Program processes. The ISER should be employed for establishing contact and cooperation among stakeholders, within selfevaluation 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 institution'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 competences 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 to carry out the practices of monitoring and improvement as to the processes within the scope of the institution,
- How to provide stakeholder involvement and comprehensiveness in planning, implementing, follow-up and improvement processes,
- What the institution's strengths and areas for further development in the institution's internal quality assurance system are,
- The reasons for the improvements that could not be realized,
- How to ensure sustainability in the quality assurance system in order for the institution to maintain its competitive advantage within the scope of the rapidly changing agenda of higher education.

The ISER should be prepared on the Quality Assurance Management Information System (QAMIS) by considering Institutional External Evaluation and Accreditation Criteria (IEEAC), 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.

Preparation 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 <u>www.yokak.gov.tr</u>. 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 selfevaluation reports as well as in external evaluation processes. It has been developed to increase clarity, objectivity, comprehensibility, consistency and transparency in institutional 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.

Best Practices



Figure 1. Evaluation of Maturity Levels of Sub-criteria via the THEQC Rubric

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 The report will be written on QAMIS system and explanations will be entered for each criterion under the "*headings*". Explanations should be entered considering the maturity levels of the sub-criteria. An example of the relationship between headings, criteria, and sub-criteria in ISER writing is presented in Table 1 below.

| Heading | B. Learning and Teaching | There are criteria and sub-criteria under headings. |
|---------------|---|---|
| Criterion | B.1 Program Design, Evaluation and Update | The report should be written based on the criteria. |
| Sub-criterion | B.1.5. Follow-up and updating of programs | The sub-criteria will be based in writing explanations for the criteria and their maturity levels supported with evidence will be graded through QAMIS. No further explanation will be made for the sub-criteria. |

Table 1. An example of the relationship between headings, criteria, and subcriteria in ISER writing

• 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).

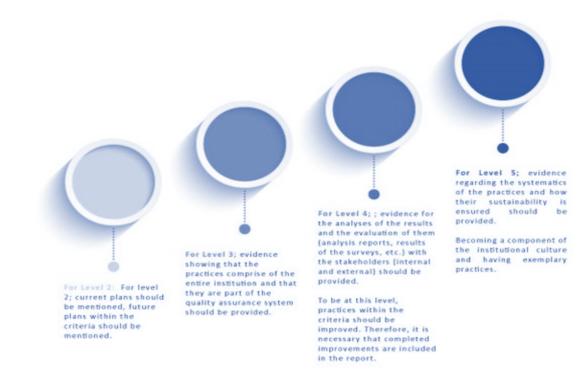


Figure 2. Scaling Steps for Maturity Levels

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- 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 followup 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)/ Follow-up Report (FuR), 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.

SELF-EVALUATION REPORT

ANNEX. 1 INSTITUTIONAL 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.

- A. LEADERSHIP, GOVERNANCE AND QUALITY
- **B. LEARNING AND TEACHING**
- C. RESEARCH AND DEVELOPMENT
- D. 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. THE THEQC

RUBRIC

A.1. Leadership and Quality

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 should have a governance model to enable institutional transformation, apply leadership approaches, create internal quality assurance mechanisms and internalize the quality assurance culture.

| | 1 | 2 | 3 | 4 | 5 |
|--|-----------------------|----------------------|------------------------|----------------------|----------------------|
| | The institution does | The governance | The governance | The practices | There are |
| A.1.1. The governance model and administrative structure | not have a | model and | model and | related to the | internalized, |
| | governance model | administrative | organizational | governance and | systematic and |
| The governance model and administrative structure | and organizational | structure, which | structure of the | organizational | sustainable |
| (institutional approach within the legal framework, traditions, | structure that are in | ensure the | institution function | structure of the | practices that can |
| preferences); decision-making mechanisms, control and balance | alignment with its | achievement of | in a manner that | institution are | be used as |
| factors, independent operation ability of the boards, | mission and are | the mission and | includes the | monitored and | examples of best |
| representation of stakeholders, comparison of the foreseen | supporting the | strategical | entirety of units | improved. | practices. |
| governance model and its realization, the institutionality and | achievement of the | objectives of the | and areas. | | |
| continuity of the model; are established and adopted. The | strategic objectives. | institution and | | | |
| actions, authority and responsibilities, and communication with | | align with its | | | |
| the institution's academic community of board of trustees in | | processes, are | | | |
| foundation higher education institutions, and vice-rectors and | | determined. | | | |
| consultants in all higher education institutions (senior governing | | | | | |
| body); the alignment of the governance style of the senior | Sample Evidence | | | | |
| governing body with the targeted institutional identity is | The governa | nce model and organi | zational chart | | |
| established and adopted. There are processes regarding an | Practices/evi | idence showing that | the institution impler | ments its policy and | strategic objectives |
| organizational chart and affiliation/reporting relationships; job | regarding the | e governance and adn | ninistrative areas | | |

- Evidence for the follow-up and improvement regarding 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

| | 1 | 2 | 3 | 4 | 5 | |
|--|--|-------------------|---------------------|---------------------------|--------------------|--|
| | There is no effective | Leaders in the | The institution has | Leadership practices and | There are | |
| | leadership approach | organization have | leadership | their contribution to the | internalized, | |
| A.1.2. Leadership | that supports the | ownership and | practices that | development of quality | systematic and | |
| | management of the | motivation to | complement the | assurance system and | sustainable | |
| The rector and process leaders in the institution have high | quality assurance | manage the | development of | culture are monitored | practices that can | |
| ownership and motivation to create a quality assurance | system and the | quality assurance | quality assurance | and relevant | be used as | |
| system and culture that takes into account the change, | internalization of the | system and | system and culture | improvements are | examples of best | |
| uncertainty and complexity in the higher education | quality culture in the | internalize its | throughout the | made. | practices. | |
| ecosystem. These processes are managed with an agile | institution. | culture. | entire institution. | | | |
| eadership 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. | Sample Evidence Plans and practices for developing quality assurance culture The methods employed to evaluate and follow up the leadership qualifications and competencies institution's administrators, results of the follow-up processes and related improvements | | | | | |

| | 1 | 2 | 3 | 4 | 5 |
|--|--|-------------------|------------------------|--------------------------|----------------------|
| | The institution does | The need for | The change | Change management | There are |
| | not have change | change has been | management | practices that are | internalized, |
| A.1.3. Institutional transformation capacity | management. | determined in the | approach is | implemented in | systematic and |
| | | institution. | expanded | accordance with | sustainable |
| The institution has an agile management competence that | | | throughout the | objectives, mission | practices that can |
| makes it ready for the future by taking into account the | | | institution and | and targets are | be used as |
| changes in higher education ecosystem, global tendencies, | | | being carried out | monitored and | examples of best |
| national objectives, and stakeholders' expectations. It uses | | | holistically. | measures are taken. | practices. |
| 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. | | | | | |
| | | | | | |
| | ~ · - · · | | | | |
| | Sample Evidence | | | | |
| | Change mana Change plans, | gement model | | | |
| | | l analysis report | | | |
| | Future scenari | | | | |
| | Comparison re | | | | |
| | | anagement system | | | |
| | Change teams | | | | |
| | - | | ches and practices de | eveloped by the institut | ion in line with the |
| | - | | ndard practices and le | | |
| | | | | | |

| | | | | - | |
|--|----------------------------------|------------------------|-------------------------|------------------------------|-----------------------|
| | 1 | 2 | 3 | 4 | 5 |
| | The institution does | The institution has | A transparent and | The internal quality | There are |
| A.1.4. Internal quality assurance mechanisms | not have a defined | defined internal | holistic internal | assurance system | internalized, |
| | internal quality | quality assurance | quality assurance | mechanisms are | systematic and |
| The actions, processes and mechanisms are planned and flow | assurance system. | processes and | system is | followed up and | sustainable |
| charts are devised based on the calendar year regarding the | | mechanisms. | established | improved together | practices that can |
| PDCA cycles. Responsibilities and authorities are defined. | | | throughout the | with the relevant | be used as |
| Completed practices are evaluated. | | | entire institution. | stakeholders. | examples of best |
| Other quality cycles, which are not designed on a calendar year | | | | | practices. |
| 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. | Sample Evidence | | | | |
| | • | ess documents like the | quality assurance quid | 'e | |
| | - · · | | | - ties and responsibiliti | es, and roles of the |
| | stakeholders | ionoticiting ironyion | | | |
| | | Aanagement System | | | |
| | Feedback met | - , | | | |
| | | lated to the involveme | ont of stakeholders | | |
| | | -up and improvement | | | |
| | - | | | alanad by the institut | tion in line with the |
| | | | | eloped by the institut | tion in the with the |
| | mstitutionarn | eeus along with stand | ard practices and legis | | |
| | | | | | |

| | 1 | 2 | 3 | 4 | 5 |
|---|-----------------------|------------------------|--------------------------|---------------------------|----------------------|
| | There are no | There are defined | The institution | Public disclosure | There are |
| A.1.5. Public disclosure and accountability | mechanisms in the | processes in the | operates public | and accountability | internalized, |
| | institution to inform | institution to | disclosure and | mechanisms of the | systematic and |
| Informing the public is adopted as a principle, the ways and how | the public and | inform the public | accountability | institution are | sustainable |
| to use them are designed, announced in an accessible manner, | establish | in line with the | mechanisms in line | monitored and | practices that can |
| and all information steps are taken systematically. The website | accountability. | principles of | with its defined | improved based on | be used as |
| of the institution provides accurate, up-to-date, relevant and | | transparency and | processes. | stakeholder views. | examples of best |
| easily accessible information; a mechanism to ensure it is | | accountability. | | | practices. |
| available. There are findings that the concepts of institutional | | | | | |
| autonomy and accountability complement each other. Internal | | | | | |
| and external accountability methods are designed and | | | | | |
| mplemented. It is systematic, carried out within the framework | | | | | |
| of the announced calendar, and those in charge of this operation | Sample Evidence | | | | |
| are clearly defined. Its effectiveness is evaluated with the | | rules and methods an | lonted in relation to nu | blic disclosure and acc | ountability |
| received feedback. The relations of the institution with external | • • • | | g the public and accou | | Sancabinty |
| stakeholders, associated local administrations, other | | - | | eholders regarding p | ublic disclosure and |
| universities, public institutions, non-governmental | accountability | | | | |
| organizations, industrial organizations and local people in its | Evidence for for | ollow-up and improven | nent of public disclosur | e and accountability m | nechanisms |
| region are assessed. | - | | • | cloped by the institution | ion in line with the |
| | institutional ne | eeds along with stando | ard practices and legisl | ation | |

A.2. Mission and Strategic Objectives

governance, structure, basic mechanisms, the relationship

between units within the institution, and access to units are

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.

Perceptible results, effects on the implementation of activities,

and examples of these policy statements can be presented.

explained.

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 disclose these to the public.

| | 1 | 2 | 3 | 4 | 5 |
|--|---------------------|---------------------|---------------------|------------------------|--------------------|
| | There is no | There are defined | There are practices | The practices based | There are |
| A.2.1. Mission, vision and policies | defined mission, | and authentic | in compliance with | on the mission, vision | internalized, |
| | vision and policies | mission, vision and | mission, vision and | and policies are | systematic and |
| Mission and vision statements are defined, recognized and | in the institution. | policies in the | policies throughout | followed up and | sustainable |
| shared by employees of the institution. They are specific to the | | institution. | the institution. | evaluated with | practices that can |
| institution and provide guidance in creating a sustainable | | | | stakeholders in order | be used as |
| future. | | | | to take necessary | examples of best |
| | | | | precautions. | practices. |
| There exists 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, perceptible and realistic. It | | I | | | |
| outlines the sustainable quality assurance system. The | The Sample Evidence | | | | |

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 ٠ (mention of research in educational programs, mention of service to society and distance education in research processes)
- Evidence for the follow-up and evaluation of the policies .
- Evidence for the specific approaches and practices developed by the institution in line with the . institutional needs along with standard practices and legislation

A.2. Mission and Strategic Objectives

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 objectives, goals, sub-goals, 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 then necessary actions are taken.

* It is the document that defines the strategic goals and objectives and performance indicators for the foundation higher education institutions.

| 1 | 2 | 3 | 4 | 5 |
|----------------------|---------------------|----------------------|--------------------------|--------------------|
| The institution does | The institution has | The institution has | The institution monitors | There are |
| not have a strategic | a declared | a holistic strategic | the strategic plan | internalized, |
| plan. | strategic plan. | plan adopted by all | implemented by it and | systematic and |
| | | its units and known | evaluates it with the | sustainable |
| | | by its stakeholders | related stakeholders, | practices that can |
| | | and practices in | then the output is | be used as |
| | | conformity with | reflected in the | examples of best |
| | | this plan. | institution's future | practices. |
| | | | plans. | |
| | | | | |

Sample Evidence

- The strategic plan and development process
- Performance reports
- Evidence for the involvement of internal and external stakeholders in the planning, doing, checking and acting stages of the strategic plan of the institution
- Evidence for the alignment of the strategic plan and objectives with the United Nations Sustainable Development Goals
- Evidence for the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation

A.2. Mission and Strategic Objectives

A.2.3. Performance management

Performance management systems in the institution are administered with a holistic approach. They assist continuous improvement and prepare the institution for the future based on the strategic objectives 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 involvement of stakeholders.

Performance indicators that encompass all institutional main 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 followed up, the results of the follow-up are recorded and there is proof that they are used as required.

| 1 | 2 | 3 | 4 | 5 |
|--|--|--|---|---|
| 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
- The 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.3. Governance systems

The institution should have a system to manage its processes as well as financial, human and information resources to guarantee the achievement of its strategic objectives in qualitative and quantitative manners.

| | 1 | 2 | 3 | 4 | 5 |
|--|--|---|---|--|---|
| A.3.1. The 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 institution does not have any 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 basic 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. |
| | Defined Evidend Evidend | ation management sys d processes for obtainin ce for the follow-up and | ng, saving, updating, p d improvement of Info proaches and practices | processing, evaluating and s rmation Management Syst s developed by the institut ad legislation | em |

A.3. Governance systems

| | 1 | 2 | 3 | 4 | 5 |
|---|--|--|--|--|--------------------------------------|
| | The institution does | There are | The human | The institution monitors | There are |
| | not have a defined | defined | resources | its human resources | internalized, |
| A.3.2. Human resources management | process for the | processes | management | management practices | systematic and |
| | management of | regarding | practices are maintained in line | and makes | sustainable |
| he institution has rules and processes for the management of | human resources. | human | with the defined | improvements with input from relevant | practices that car |
| numan resources. These processes are carried out transparently | | resources | processes | internal stakeholders. | be used as |
| and recognized by everyone in the institution. Education and | | management in | , throughout the | | examples of best |
| nerit are the priority criteria and the main goal is to improve | | accordance with | entire institution. | | practices. |
| competencies. | | the strategic | | | |
| Nethods and mechanisms developed to identify and follow up | | objectives of | | | |
| mployee (academic and administrative) satisfaction, | | the institution. | | | |
| complaints and suggestions are implemented and the results | | | | | |
| are evaluated and improved. | | | | | |
| | recruitment, i • Employee (ac • Evidence for t • Evidence for t | in-service training, i ademic and adminis the follow-up and in the specific approac | ncentives and reward strative) satisfaction s nprovement of the hu | urveys, practice systematic man resources managemer eloped by the institution in | s, and survey result at practices |

A.3. Governance systems

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.

| | 1 | 2 | 3 | 4 | 5 |
|--|---|---|---|--|---|
| A.3.3. Financial management Basic income and expense items are defined and followed up 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 | 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. |
| 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 | efficient use • Alignment o the institution | cesses and practice of resources, variet of the planning, usag on | ty of resources) ge and follow-up practi | gement of financial resourd ces of financial resources to ancial resources manageme | the strategic plan o |

- Evidence for the follow-up and improvement of the financial resources management practices ٠
- Evidence for the specific approaches and practices developed by the institution in line with the • institutional needs along with standard practices and legislation

A.3. Governance systems

| | 1 | 2 | 3 | 4 | 5 | | |
|---|--------------------|-------------------|---------------------|--------------------------------------|--------------------|--|--|
| | The institution | The institution | Defined processes | The institution follows | There are | | |
| A.3.4. Process management | does not have | has defined | are managed | up its process | internalized, | | |
| All processes and sub-processes of activities (including distance | defined processes | processes and | throughout the | management | systematic and | | |
| education) are defined. The accountable parties for processes, | for learning and | sub-processes | entire institution. | mechanisms and makes | sustainable | | |
| workflow, management and ownership are documented and | teaching, research | for its practices | | improvements with | practices that can | | |
| adopted by the institution. There is evidence of a successful | and development, | regarding | | input from relevant stakeholders. | be used as | | |
| process management. The continuous process improvement | service to society | learning and | | Stakenolders. | examples of best | | |
| cycle is established. | and governance | teaching, | | | practices. | | |
| | system practices. | research and | | | | | |
| | | development, | | | | | |
| | | service to | | | | | |
| | | society and | | | | | |
| | | governance | | | | | |
| | | system. | | | | | |
| | | | | | | | |

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 participation in strategic decisions and processes, and to use them in their decisions.

| | 1 | 2 | 3 | 4 | 5 |
|--|-----------------------------------|--------------------------------------|------------------------------|-------------------|-----------------------|
| | The institution's | The institution has plans to | There are mechanisms | The | There are |
| | internal quality | involve stakeholders in the | for the involvement of | functioning | internalized, |
| A.4.1. Internal and external stakeholder involvement | assurance system | PDCA layers regarding | stakeholders in the | of | systematic and |
| | does not have | processes about quality | PDCA layers of all | stakeholder | sustainable |
| The mechanisms of involvement of internal and external | mechanisms that | assurance, learning and | processes throughout | involvement | practices that can |
| stakeholders in decision-making, governance, and | enable stakeholder | teaching, research and | the entire institution. | mechanisms | be used as |
| improvement processes are defined. | involvement. | development, service to | | is monitored | examples of best |
| The efficiency, institutionalism and continuity of | | society, the governance | | and relevant | practices. |
| involvement is examined. Practice samples in the internal | | system, and | | improvemen | |
| quality assurance system particularly about the efficiency | | internationalization. | | ts are made. | |
| and involvement of student and external stakeholder are | | | | | |
| available. Results are evaluated, and relevant | | | | | |
| improvements are made. | Sample Evidence | | | | |
| | Evidence of | a list of internal and external stak | eholders and the prioritize | ation of them be | ased on institutional |
| | processes | | | | |
| | Data collecti | on tools and methods employed in | collecting stakeholder opi | nion (surveys, fo | ocus group meetings, |
| | workshops, t | the data management system etc.) |) | | |
| | Documents of | demonstrating that the involvement | nt of stakeholders in decisi | ion-making proc | cesses is ensured |
| | | follow-up and improvement of the | - | | |
| | - | the specific approaches and pract | | | |
| | | with standard practices and legisle | | | |
| | needs along | | | | |

A.4. Stakeholder involvement

| | 1 | 2 | 3 | 4 | 5 |
|---|----------------------|-------------------------|--------------------------|--------------------------|-----------------------|
| | The institution does | The institution has | Student feedback is | Practices about | There are |
| | not have any | established | collected (at the | collecting student | internalized, |
| A.4.2. Student feedback | mechanisms to | principles and | end of each | feedback are | systematic and |
| | collect student | rules related to the | semester or | monitored in all | sustainable |
| Student opinions (about courses, course instructors, the diploma | feedback. | collection of | academic year) in | programs and they | practices that can |
| program, the quality of services and general satisfaction level | | student feedback | all programs. | are improved with | be used as |
| etc.) are collected systematically by various means, and the | | (about courses, | | student participation. | examples of best |
| results are shared and utilized efficiently. It is ensured that the | | lecturers, | | Feedback results are | practices. |
| methods used are reliable and valid and that data are consistent | | programs, student | | reflected in decision- | |
| and representative. | | workload* etc.) | | making processes. | |
| There are various channels for students' complaints and/or | | within its teaching | | | |
| suggestions which are recognized by students, and the fair and | | processes . | | | |
| efficient functioning of these channels are followed up. | | - | | | |
| | Sample Evidence | | | | |
| | Principles a | nd rules about collecti | ng student feedback | | |
| | Evidence for | r the types, methods a | and diversity of the def | fined student feedback m | echanisms (including |
| | • | ended education) | ,,,, | , | , , |
| | - | | provements within the | scope of student feedbac | k |
| | | | | on-making mechanisms | |
| | | J , , , | provement of student | • | |
| | - | | | eveloped by the institut | tion in line with the |
| | | | ndard practices and leg | | |
| | mstrutionu | inceus diong with stu | | gioración | |
| | | | the 2015 ECTS User G | | |

A.4. Stakeholder involvement

| | | 1 | | | | | |
|---|---|---------------------|---------------------|----------------------|--------------------|--|--|
| | 1 | 2 | 3 | 4 | 5 | | |
| | The institution does | The institution has | There are alumni | The alumni tracking | There are | | |
| | not have an alumni | plans for an alumni | tracking system | system practices are | internalized, | | |
| A.4.3. Alumni relations management | tracking system. | tracking system in | practices | monitored and | systematic and | | |
| | | order to evaluate | throughout the | improvements on the | sustainable | | |
| Alumni employment information like job placement, graduate | | whether the | programs in the | programs are made | practices that can | | |
| education, income rate, and employer/alumni satisfaction is | | programs have | entire institution. | depending on | be used as | | |
| systematically and comprehensively collected, assessed and | | reached their goals | | requirements. | examples of best | | |
| used in the institutional development strategies. | | and objectives or | | | practices. | | |
| | | not. | | | | | |
| | not. not. Sample Evidence | | | | | | |

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 |
|---|---|---|---|---|--------------------|
| | The institution does | The institution has | The institution has | The governance | There are |
| A.5.1. Management of internationalization processes | not have a | plans regarding the | completed its | and organizational | internalized, |
| | governance and | structure of the | organizational | structure of the | systematic and |
| The management of the internationalization processes, and its | organizational | governance and | structure about the | internationalization | sustainable |
| organizational structure is institutionalized. It is aligned to the | structure about the | organization of | management of the | processes are | practices that can |
| internationalization policy of the institution. The functioning and | internationalization | internationalization | internationalization | monitored and | be used as |
| efficiency of the governance and organizational structure are examined. | processes. | processes. | processes and | improved. | examples of best |
| | | | functions in a | | practices. |
| | | | transparent, | | |
| | | | inclusive, and | | |
| | | | participatory | | |
| | | | manner. | | |
| | Evidence for tEvidence for | he follow-up and impro the specific approach | cture of internationaliz ovement of the govern nes and practices dev ard practices and legis | ance and organization eloped by the institut | |

A.5. Internationalization

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

A.5. Internationalization

| | 1 | 2 | 3 | 4 | 5 |
|---|--|--|---|--|---|
| <u>A.5.3. Internationalization performance</u> The internationalization performance is followed up. 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 any internationalization activities. | The institution has plans about practices that are in line with its internationalizatio n 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. |
| | Indicators e Mechanism Annual self Evidence for | ns established to monit evaluation reports an or the specific approa | or whether the interno d improvement works | ternationalization perfo ationalization goals are on the internationalizat eveloped by the institu gislation | ormance achieved tion processes |

B.1. Program Design, Evaluation and Update

defined for different fields. Physical and technological facilities (access, social distance, etc.) are taken into account when designing the programs.

The institution should design its teaching programs in line with Turkish Higher Education Qualifications Framework (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 |
|---|---------------------------------|-------------------------|------------------------------|--------------------------|--------------------------|
| | The institution does | The institution has | Programs that are | The design and | There are internalized, |
| B.1.1. Design and approval of programs | not have defined | defined processes | designed and approved | approval processes of | systematic and |
| | program design and | related to the design | and are in alignment with | the programs are | sustainable practices |
| The objectives and learning outcomes (objectives) of the programs are | approval processes. | and approval of | the program objectives | systematically | that can be used as |
| formed, their compatibility with the NQF-HETR is stated and shared with | | programs including | and learning outcomes, | monitored and | examples of best |
| the public. The mission and vision of the institution is taken into account | | principles, methods, | are implemented | improved by | practices. |
| while determining the program competencies. Course information | | alignment with the | throughout the entire | evaluating them with | |
| packages are created taking the national core program (if available), the | | NQF-HETR, and | institution, in line with | relevant stakeholders. | |
| criteria (e.g. accreditation criteria, etc., if available) into account . The | | stakeholder | the defined processes. | | |
| expressions of objectives clearly state the foreseen cognitive, affective and | | involvement. | | | |
| psychomotor levels. The institution has plans about how to monitor the | | | | | |
| realization of program outcomes, particularly, the evaluation methods and | Sample Evidence | | | | |
| processes of the shared (generic) outcomes of the institution are stated in | Defined pro | cesses that are used fo | or program design and app | roval (its compliance wi | th the education policy. |
| detail. There are department-based principles and rules about the | | uides, procedures and | | | |
| structuring of learning outcomes and necessary teaching processes. The | - | | | decian and annroual n | raaasaa (Cammissians |
| program states with which activities (competence-course-teaching | 2 | - | nal structure of the program | i design and approval pl | ocesses (commissions, |
| method matrices) the competencies will be acquired. The competencies to | process ma | nagers, process flow, | etc.) | | |
| be acquired based on education modes (formal, blended, distance) are | Evidence fo | r the alignment of the | e program objectives and o | utcomes to the NQF-HE | TR |

- 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 for the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation

B.1. Program Design, Evaluation and Update

| | 1 | 2 | 3 | 4 | 5 |
|---|--|---|--|---|---|
| B.1.2. The course distribution balance of the program The principles, rules and methods about the course distribution of the program are defined. 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 about course distribution that include principles and methods about layers like the balance between courses about the study field and profession and general knowledge courses, the balance between compulsory and elective courses, gaining cultural competence, and familiarizing students with different disciplines. | Course information packages are designed in line with the defined processes and announced for the entire program. | 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. |
| | Evidence show information p Decisions of the state of the | wing that the balance ackage he education commission | rse distribution and relate of course distribution is n, senate decisions, etc. | taken into account in | the announced course |

- Evidence for follow-up and improvement of the course distribution balance
- Evidence for the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation

| | | | | LEARNIN | G AND TEACHING |
|---|--|--|--|---|---|
| B.1. Program Design, Evaluation and Update | | | | | |
| | 1 | 2 | 3 | 4 | 5 |
| A.1.3. The alignment of course objectives with program outcomes the learning objectives of the courses (including blended and istance education) are defined and the program outcomes nd course objectives are paired. The expressions of bjectives clearly state the foreseen cognitive, affective and sychomotor levels. here are plans about how to monitor the realization of the ourse learning objectives, particularly, the methods and rocesses of the assessment of objectives not related to the rea 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. |
| | Evidence distance Evidence with the Evidence | e for the compatibil e) with the program e for follow-up and i e program outcomes e for the specific app | mprovement regardiı | en outside the progr ng the alignment of t rs developed by the in | he course objectives |

B.1. Program Design, Evaluation and Update

| | 1 | 2 | 3 | 4 | 5 |
|---|---|---|---|---|---|
| | Courses are not | There are defined | Courses are | Student workload | There are |
| B.1.4. Student workload-based course design | designed based on | processes* that | designed | in programs are | internalized, |
| 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 are examined. Variations that arise from distance education are taken into consideration in the student workload-based design. | student workload. | include principles and methods that comprise dimensions like internship, professional practices, or mobility explaining how to calculate student workload. | according to student workload, and they are announced, and implemented. | followed up and course design is updated accordingly. | systematic and sustainable practices that can be used as examples of best practices. |
| | Evidence show projects are de Documents in Documents ar in programs Diploma Supp Evidence show Evidence for the along with state | cluding defined processes a ad mechanisms showing the | l credits in professiona bout the transfer and a at student involvemen redits are updated in a practices developed by tion | Il practices, exchange prog recognition of workload-bo t is enabled while determi accordance with feedback | ased credits ning student workload |

B.1. Program Design, Evaluation and Update

B.1.5. Follow-up and updating of programs

The follow-up of program goals and learning outcomes is performed as planned for each program and course (face-toface, distance, blended, open). The functioning 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, drop out numbers and reasons, etc.) are followed up periodically and systematically and are discussed, evaluated and compared in order to continue the development towards 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.

| 1 | 2 | 3 | 4 | 5 |
|---|--|---|---|---|
| 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 followed up with these mechanisms and updated by also 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 for the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation

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 senior management and the duties | 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. | |
| and responsibilities in this respect are defined. Principles, rules and 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 followed up by senior management. | Sample Evidence Organizational structure and workflow charts regarding the management of learning and teaching processes Rules, principles and calendars regarding the processes of learning and teaching and measurement and evaluation Information Management System Follow-up and improvement evidence regarding the management of learning and teaching processes | | | | | |

B.2. Implementation of Programs (Student-Centered Learning, Teaching and Evaluation)

The institution should implement the 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.

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.

The face-to-face learning processes include associate, undergraduate, and postgraduate students and are enriched with technological opportunities and approaches like flipped and project-based learning. The involvement of students into research processes is facilitated through the curriculum, methods and approaches. The implementation, follow-up and preventive measures of all these practices are systematically evaluated.

| 1 | 2 | 3 | 4 | 5 |
|---------------------|---------------------|------------------|-------------------|------------------|
| The institution | The institution has | Student- | Student-centered | There are |
| does not have | plans, rules and | centered | practices are | internalized, |
| student-centered | principles about | teaching | monitored and | systematic and |
| approaches in its | the | techniques and | improved with the | sustainable |
| learning and | implementation of | methods are | involvement of | practices that |
| teaching processes. | student-centered | applied in line | relevant internal | can be used as |
| | approaches for the | with defined | stakeholders. | examples of best |
| | learning and | processes in the | | practices. |
| | teaching processes. | entirety of the | | |
| | | programs. | | |

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 for the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation

| B.2. Implementation of Programs (Student-Centered Learn | ning, 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 | 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. | |
| (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. | Sample Evidence Example practices in the 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 | | | | | |

B.2. Implementation of Programs (Student-Centered Learning, Teaching and Evaluation)

| | 1 | 2 | 3 | 4 | 5 | |
|--|---|---------------------|---------------------|---------------------|------------------|--|
| | | | | | | |
| | The institution | The institution has | There are | Student admission | There are | |
| B.2.3. Student admission and the recognition and | does not have | principles, rules | practices based | and the recognition | internalized, | |
| crediting of prior learning* | defined processes | and related plans | on plans | and crediting of | systematic and | |
| | for student | about student | throughout the | previous learning | sustainable | |
| The principles and rules for student admission are | admission and the | admission and the | entire institution. | processes are | practices that | |
| defined and announced. These principles and rules are | recognition and | recognition and | | monitored and | can be used as | |
| consistent, and the practices are transparent. Document | crediting of prior | crediting of prior | | improved and the | examples of best | |
| requests like diplomas, certificates and similar | learning. | learning. | | updates are | practices. | |
| documents are tracked meticulously. | | | | announced. | | |
| Prior learning (face-to-face, public, distance/blended education, knowledge and skills obtained through free learning) is recognized and credited. There are mobility support parallel to the internationalization policy; practices encouraging and facilitating students as well as practices preventing credit loss during mobility. | Sample Evidence Principles and rules regarding student admission and the recognition and crediting of prior learning | | | | | |

B.2. Implementation of Programs (Student-Centered Learning, Teaching and Evaluation)

| | 1 | 2 | 3 | 4 | 5 | |
|--|--|---------------------|----------------------|-------------------|--------------------|--|
| | The institution does | The institution has | Practices regarding | Practices are | There are | |
| B.2.4. The certification of qualifications and the diploma | not have defined | comprehensive, | diploma approval | monitored and | internalized, | |
| | processes for diploma | consistent and | and certification of | defined processes | systematic and | |
| Approval of qualifications, conditions for graduation, and | approval and the | announced | other qualifications | are improved. | sustainable | |
| graduation decision-making processes are defined in a clear, | certification of other | principles, rules, | are adopted | | practices that can | |
| understandable, comprehensive, and consistent manner and | qualifications. | and processes | throughout the | | be used as | |
| are shared with the public. Certification and diploma | | about diploma | entire institution. | | examples of best | |
| procedures are carried out and monitored in line with this | | approval and the | | | practices. | |
| defined process and necessary precautions are taken. | | certification of | | | | |
| | | other | | | | |
| | | qualifications. | | | | |
| | qualifications. Sample Evidence • Defined processes and current practices about following up the academic and career developm students, the diploma approval, and the certification of qualifications • Criteria employed in student admissions other than centrally-placed student groups, such as the existinternational students (FSE) placements, transfers, and admissions in double major (DMP) or programs • Documents showing that student workload-based credits are recognized in exchange programs we any requirement of extra work* • Evidence for the specific approaches and practices developed by the institution in line with the institut needs along with standard practices and legislation *Should bear the key principles of the 2015 ECTS User Guide. | | | | | |

B.3. Learning Resources and Academic Support Services

The institution should have the necessary resources, infrastructure and environments to maintain its educational 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.

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 followed up and improved.

The institution has a learning management system that can fully fulfill learning and teaching needs, is userfriendly, 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 tend to foster student-student, student-teaching staff, studentmaterial interaction.

| 1 | 2 | 3 | 4 | 5 |
|---------------|---|---------------------------|-----------------|-----------------|
| The | The institution has plans | The management of | The usage and | There are |
| institution | to create learning | learning resources in | development of | internalized, |
| does not have | resources that are in | the entire institution is | learning | systematic and |
| sufficient | suitable quality and | performed by taking | resources are | sustainable |
| resources to | quantity (classrooms, laboratories, studios, a | into consideration the | followed up and | practices that |
| maintain its | learning management | field-specific | improved. | can be used as |
| learning- | system, printed/e- | conditions, | | examples of |
| teaching | resources, human | accessibility, and the | | best practices. |
| activities. | resources, etc.) in order | balance between | | |
| | to maintain its | units. | | |
| | educational and | | | |
| | teaching activities. | | | |

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 for the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation

I FARNING AND TEACHING B.3. Learning Resources and Academic Support Services 2 4 5 1 3 Practices regarding There are no The institution Support services for There are B.3.2. Academic support services has defined the academic the academic internalized, assistance services for the academic principles and development and development and systematic and There are advisor teaching staff members who follow the rules about the career planning of career planning of sustainable development and academic development, lead and answer the questions, and career planning of academic students are carried students are practices that can students in the monitored and be used as support the career planning of the students. The advising system development and out in the institution is followed and improved through methods such as the student examples of best institution. career planning within the scope of improved with the portfolio. Students can access support from their advisors easily processes of defined principles involvement of practices. and there are various ways of communication available (face-tostudents. and rules. students in the face, online). institution. There are psychological counselling and career center services, these are accessible (face-to-face and online) and students are Sample Evidence informed about them. The sufficiency of the services is Defined processes employed in the academic student advising system monitored. 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 ٠ Plans and practices regarding guidance, psychological counseling and career services Career center practices Evidence for student participation Results obtained from student feedback tools (surveys etc.) about services provided to students 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 TEAC | HING |
|-------------------|------|
|-------------------|------|

| B.3. Learning Resources and Academic Support Services | | | | | | | | |
|--|---|--|---|---|---|--|--|--|
| | 1 | 2 | 3 | 4 | 5 | | | |
| <u>B.3.3. Facilities and infrastructure</u> 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 introduced to and utilized by students. The utilization of facilities and the infrastructure is examined. | 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, 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 depending 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.e. 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 for the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation | | | | | | | |

B.3. Learning Resources and Academic Support Services

| | 1 | 2 | 3 | 4 | 5 |
|---|----------------------|-----------------------|---------------------------|--------------------------------|-----------------------|
| | The institution does | The institution | Practices regarding | Practices regarding | There are |
| B.3.4. Disadvantaged groups | not have plans | has plans about | the access of the | the access of the | internalized, |
| | about the access of | the access of the | disadvantaged | disadvantaged | systematic and |
| Access to educational opportunities of the disadvantaged, | the disadvantaged | disadvantaged | groups to learning | groups to learning | sustainable |
| vulnerable and under-represented groups (the disabled, the | groups to learning | groups to | opportunities are | opportunities are | practices that can |
| poor, the minority, the immigrant, etc.) is ensured by | opportunities. | learning | carried out. | monitored and | be used as |
| considering the principles of equality, equity, diversity and | | opportunities in | | improved by also | examples of best |
| inclusion. The distance education infrastructure is established | | a quality and just | | collecting the | practices. |
| by considering the needs of these groups. There are accessible | | manner. | | opinions of the | |
| university practices in university campuses where needed. The | | | | disadvantaged | |
| access of these groups to learning opportunities is monitored | | | | groups. | |
| and improved in line with the feedback. | | | | | |
| | Sample Evidence | | | | |
| | Plans and | practices related to | services that will be p | rovided to disadvantag | ged students groups |
| | (their repre | esentation in boards, | . accessible university p | practices, if available, p | practices in distance |
| | education p | processes, etc.) | | | |
| | Documents | showing that the fe | edback is employed in i | mprovement mechanis | ms |
| | | | • • | · ible 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

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

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 |
|------------------|--|--|--|---|
| Recruitment, | The institution has | The institution implements | The results of the | There are |
| promotion and | defined its criteria for | the recruitment, promotion, | recruitment, | internalized, |
| appointment | the recruitment, | and appointment criteria | promotion and | systematic and |
| processes are | •• | which are defined for all fields | appointment practices | sustainable |
| not defined in | • | (recruitment, promotion, | are monitored, | practices that can |
| the institution. | - | appointment, course | evaluated and | be used as |
| | necessities have not | assignment of teaching staff, | precautions are taken | examples of best |
| | been analyzed in the | etc.); these are recognized by | accordingly. | practices. |
| | planning stage. | stakeholders and included in | | |
| | | decision-making . | | |
| | | | | |
| Sample Evidence | e | | | |
| Recruitm | nent, promotion and app | ointment criteria | | |
| Practice | s ensuring that academic | c staff is assigned in courses relate | ed to their fields of experti | se |
| Evidence | e for follow-up and impro | ovement | | |
| Evidence | e for the specific approad | ches and practices developed by t | the institution in line with | the institutional needs |
| along w | ith standard practices an | d legislation | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | promotion and appointment processes are not defined in the institution. Sample Evidence • Recruitm • Practice • Evidence • Evidence | promotion and appointment processes are not defined in the institution. Sample Evidence Recruitment, appointment and promotion of teaching staff, but field-specific necessities have not been analyzed in the planning stage. Sample Evidence Evidence for follow-up and impro- Evidence for the specific approace | 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 .Sample Evidence • Recruitment, promotion and appointment criteria • Practices ensuring that academic staff is assigned in courses relat • Evidence for follow-up and improvement | 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 .The results of the recruitment, promotion and appointment practices are monitored, evaluated and precautions are taken accordingly.Sample Evidence • • Evidence for follow-up and improvement • Evidence for the specific approaches and practices developed by the institution in line with the institution in line with the <b< td=""></b<> |

B.4. Teaching Staff

| | 1 | 2 | 3 | 4 | 5 | |
|---|--|---|---|---|---|--|
| <u>B.4.2. Teaching competencies and development</u> 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 | 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. | |
| performance of the institution is evaluated. | Sample Evidence Evidence for plans (scope, methodology, attendance details, etc.) regarding practices for the training of trainers (including distance teaching practices); and the implementation thereof and the evidence of practice Evidence for the practices related to the learning and teaching centers Documents showing defined processes to follow up the teaching performance of teaching staff (appointment and promotion criteria etc.) Evidence for the involvement of teaching staff in the monitoring and improvement of the processes Evidence for monitoring and improvement of the development of teaching competency processes Evidence for the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation | | | | | |

B.4. Teaching Staff

| | 1 | 2 | 3 | 4 | 5 | |
|---|---|--|--|---|---|--|
| B.4.3. Incentives and rewards for educational activities The institution has practices about incentives like "the creative/innovative education fund", and an "outstanding education reward" to increase competition among teaching staff. Creative educational activities are included in the promotion criteria in order to prioritize teaching and learning. | | The institution has plans for the development of competency-based, fair and transparent incentive and rewards mechanisms. | Incentive and rewards practices are implemented throughout the entire institution. | Incentives and rewards practices are monitored 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 for the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation | | | | | |

Artistic activities are also evaluated within this scope under the heading of Research and Development in the higher education institutions where art fields are present.

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 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 | |
|--|---|---|---|--|---|--|
| <u>C.1.1. Management of research processes</u> Adopted approaches to 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, practices are developed in line with these institutional preferences. The efficiency and success of management of the scientific research and artistic processes are monitored and | 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 practiced in line with the institutional preferences throughout the entire institution. | The institution follows up the results and takes precautions about the efficiency of the management and organizational structure of its research processes. | There are internalized, systematic and sustainable practices that can be used as examples of best practices. | |
| improved. | 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 for the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation | | | | | |

| C.1. Management of Research Processes and the Research Resources | | | | | | | | |
|---|---|---|--|--|---|--|--|--|
| | 1 | 2 | 3 | 4 | 5 | | | |
| <u>C.1.2. Internal and external resources</u> The physical, technical and financial research resources of the institution 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, | 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 taking its research strategy and the balance between its units into account. | The institution follows up 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. | | | |
| personal funds, rewards for fostering motivation 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 that are employed for this purpose are defined and recognized by researchers. | ts, activities. account. ds, activities. account. ds, account. account. ds, account. account. activities. account. account. Sample Evidence and development budget and its distribution activities. Strategic partnerships made in the scope of research activities (public or private) bevidence showing that the research and development resources are managed in line with the research research activities (public or private) bevidence for the follow-up and improvements of the variety and sufficiency of the research research research | | | | | | | |

| 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 doctoral programs and postdoctoral opportunities that are in line with the research policy, objectives, and strategies of the institution. | The institution carries out doctoral programs and postdoctoral opportunities that support and are in line with the research policy, objectives, 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 the follow-up and improvement of the doctoral programs and postdoctora opportunities Evidence for the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation | | | | | | |

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 |
|---|--|---------------------|-----------------|----------------------------|-------------------|
| | The institution | The institution | There are | The practices for | There are |
| C.2.1. Research competencies and their development | does not have | has plans for | practices for | developing research | internalized, |
| | mechanisms | developing the | developing | competencies of the | systematic and |
| The rate of researchers with a doctoral degree, the | towards | research | the research | teaching staff in the | sustainable |
| distribution of institutions from which the doctoral degrees | developing | competencies | competenci | institution are | practices that |
| - | | | es of the | monitored and results | can be used as |
| are earned, clustering/expertise accumulation, analyses of | research and | of its teaching | | | |
| compatibility with research goals, and alignment with goals | development | staff. | teaching | are evaluated with | examples of |
| are examined. The institution carries out systematic activities | competencies of | | staff | the teaching staff to | best practices. |
| like trainings, workshops, project markets, etc. to develop the | the teaching | | throughout | take precautions. | |
| research and development competencies of the academic | staff. | | the entire | | |
| staff . | | | institution. | | |
| | | | | | |
| | Sample Evidence | | | | |
| | Plans and | l practices (sup) | oortive trainin | g, international oppor | tunities, project |
| | | | | loping the research com | |
| | teaching st | · · · · · · | ining at actes | oping the research con | |
| | - | •• | ç | | |
| | Feedback from teaching staff Evidence for the follow-up and improvement of the research competencies of teaching staff Evidence for the specific approaches and practices developed by the institution in line | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | with the in | stitutional needs a | long with stand | dard practices and legisla | ition |
| | | | | | |

| | | | | 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 level. | 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 collaboration. | National and international joint programs and joint research activities are carried out throughout the entire institution. | The institution follows up joint programs and joint research activities in and out of the institution 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. |
| | Research net institution, sti Stakeholder for Evidence for t Evidence for | works to which the udies produced from eedback he follow-up and imp the specific approac | institution is a party, joint researches provement of joint prog | arch units on national and joint programs and res grams and joint research veloped by the institution | search units of the activities |

C.3. Research Performance

The institution should periodically measure and evaluate its research activities on the basis of 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.

| 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.

| 1 2 3 4 5 | | | | | | | |
|--|-----------------|--|--|--|--|--|--|
| The institution does not have mechanisms for monitoring and assessing performance.The institution indicators for the follow-up and research performance are used throughout the entire institution.The institution monitors its research with input from relevant stakeholders.The institution internalized systematic a systematic a performance and with input from relevant stakeholders.The institutionThere are internalized systematic a systematic a | ind at as | | | | | | |

Sample Evidence

- Defined processes to monitor current research performance
- Mechanisms established to monitor whether the research goals have been achieved
- Stakeholder feedback
- Evidence for the follow-up and improvement of research performance
- Evidence for 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 The research Established The institution The institution There are C.3.2. Performance evaluation of the teaching does not have has principles, mechanisms for and internalized. development mechanisms for rules and follow-up and systematic and staff/researchers performance of monitoring and indicators for the evaluation of the sustainable the teaching monitoring and practices that assessing the research and Each teaching staff member is expected to share their staff is research can be used as development evaluation of the research performance; there are defined processes that monitored and performance of performance of examples of best research regulate this and these processes are recognized by relevant improvements teaching staff are the teaching performance of practices. stakeholders. Research performance is monitored and are made by used throughout its teaching staff. staff. evaluated annually and used in line with institutional policies. evaluating them the entire Outcomes, group averages, and scattering are shared with the institution. transparently. The systematic and permanent practice of teaching staff. performance evaluation is ensured. Sample Evidence Defined and valid processes related to the follow-up of the research and development performance of academic staff (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 the organizational structure of the institution 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. | 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 practiced in line with the institutional preferences. | 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. |
| | The service i Units condu Evidence for organization Evidence for organization | nal structure of service | nodel activities and the exan improvement regard to society processes hes and practices dev | nple practices ling the efficiency of reloped by the institutio | |

| SERV | /ICF ⁻ | TO S | | FTY |
|------|-------------------|------|-----|---------|
| JLIN | ICL | 10.5 | UCI | |

| | 1 | 2 | 3 | 4 | 5 |
|--|---|---|---|---|---|
| <u>D.1.2. Resources</u> 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. |
| | The budget a Evidence sho strategy Evidence for resources Evidence for | llocated to service to wing that the service the follow-up and im the specific approa | society works and its ye to society resources are provements of the vari | e managed in line with th ety and sufficiency of th veloped by the institutio | ne service to society e service to society |

SERVICE TO SOCIETY

D.2. Service to Society Performance

The institution should periodically monitor and continuously improve the activities it conducts in line with its service to society strategy and objectives.

| | 1 | 2 | 3 | 4 | 5 |
|--|---|--|---|--|---|
| D.2.1. The follow-up and improvement of service to society performance The institution engages in service to society activities that align with the 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 | 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 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. |
| 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. | Defined and | ciety activities in line w valid processes to moni s established to monitor | itor current service | to society performa | |

- Stakeholder feedback
- Evidence for the follow-up and improvement of service to society performance
- Evidence for 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.trInstitution=> Data filled out by the institution itself=> Data filled out by the institution (ÖSYM)=> Data taken from ÖSYMTHEQC=> 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), Student Selection and Placement Center, and other institutions are taken collectively for 5 years from the sources mentioned above by THEQC.

<u>1. Under the heading of "Information on the Institution</u>" the followings are filled by the institutions before 2019 and are taken from the Higher Education Information System for <u>2019 indicators</u>: 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) => <u>https://roundranking.com/</u>,
- 7- URAP World Ranking => <u>https://www.urapcenter.org/Rankings</u> ,
- 8- URAP Turkey Ranking => <u>http://tr.urapcenter.org/</u>,
- 9- Webometrics => <u>http://www.webometrics.info/</u>,
- 10- Times Higher Education (THE) => <u>https://www.timeshighereducation.com/</u>,
- 11- QS => <u>https://www.topuniversities.com/</u>,
- 12-QS Europe and Central Asia Ranking=><u>https://www.topuniversities.com/</u>,
- 13- USNEWS => <u>https://www.usnews.com/</u>,

3. Since the following 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.

<u>4- Under the heading of Research and Development</u> 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 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 | × |
| 97552 | 97552 | 97552 | ✓ |
| 97552,53 | 97552.53 | 97552,53 | ✓ |
| 97552,53 | 97552,53 | 97552,53 | ✓ |
| 1754698 | 1.754.698 | 0 | × |
| 1754698 | 1754698 | 1754698 | × |
| 87,98 | 87,98 | 87,98 | × |

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 | | | |
| 0,567 | 0,567 | 0,567 | × | | |
| 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 🖌 | | | | | |

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 | Result |
|-------------|------------------------|------------------------------|--------|
| 0,57 | 0,57 | 0,57 | ✓ |
| 0,57 | 57 | 57 | × |

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 | Explanation |
|--|-------------|--|
| 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: |
| *2- Percentage of Achieved Goals Regarding Research Activities Included in the Strategic Plan of the Institution (as %) | INSTITUTION | -> 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. |
| *3- Percentage of Achieved Goals Regarding Administrative Activities Included in the Strategic Plan of the Institution (as %) | INSTITUTION | -> If the Achieved Percentage is greater than 100, you can enter the relevant value. -> If the Achieved Percentage is less than 0, enter 0. |

| *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.) | INSTITUTION | Refers to the number of meetings held in the relevant year between January 1 - December 31 regarding the indicator. |
| *18- Number of Feedback and Evaluation Meetings Held by the Institution with its Internal Stakeholders within the Scope of Quality Processes | INSTITUTION | 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. |

| * 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 |
| * 21- Administrative Staff Satisfaction Rate (as %) | INSTITUTION | 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. |
| * 22- Student General Satisfaction Rate (as %) | INSTITUTION | -> 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) |
| * 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 |
| * 24- Number of Outgoing Students via Student Exchange Programs | HEIS | between January 1 and December 31. |
| * 25- Number of Incoming Teaching Staff via Teaching Staff Exchange Programs | INSTITUTION | Refers to the Number of Incoming or Outgoing Teaching Staff with |
| * 26- Number of Outgoing Teaching Staff via Teaching Staff Exchange Programs | INSTITUTION | the Teaching Staff Exchange Programs in the related year for the indicator between January 1 - December 31. |
| 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, 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) |
|---|--|---|
| *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 - Decembe 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 institution 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 application were made by students, teaching staff or employees employed the university and were approved in the related year Personal applications not addressed to the university but made b 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 staf 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 |
| 3- Research Incomes | INSTITUTION | year, as stated in <u>Important Notice 8</u> , and the Foundation Universities will enter the income and expense etc. information in |
| 4- Service to Society Incomes | INSTITUTION | 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 |
| 5- Donations | INSTITUTION | income/expenses, Student income/expenses) and some indicators are data that can be accessed as a result of more |
| 6- Staff Expenses | INSTITUTION | detailed investigation due to institutional policies and the classification they make. |

| 7- Education Expenses | INSTITUTION | 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. |
|--------------------------------|-------------|--|
| 8- Research Expenses | INSTITUTION | |
| 9- Service to Society Expenses | INSTITUTION | |
| 10- Administration Expenses | INSTITUTION | |
| 11- Investment Expenses | INSTITUTION | |



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