

جامعة الملك فهد للبترول والمعادن King Fahd University of Petroleum & Minerals

Deanship of Academic Development Academic Assessment Center

A Manual of Academic Quality Assurance Framework (AQAF)

September 2021

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Acronyms

AAAC Academic Assessment & Accreditation Committee

AAC Academic Assessment Center

AACSB Association to Advance Collegiate Schools of Business ABET Accreditation Board for Engineering and Technology

ACF Annual College File
AT Accreditation Team
APF Annual Program File

AQAF Academic Quality Assurance Framework

AW Assessment Week
ACF Annual College File
CC College Council
CF Course File

CLO Course-level student Learning Outcomes
CQAO College Quality and Accreditation Office
DAD Deanship of Academic Development

DAAC Department Assessment and Accreditation Committee

DC Department Council

DQAC Department Quality Assurance Committee

IAASC Institutional Assessment & Accreditation Steering Committee

IQAR Institutional Quality Assurance Report

ISC Institutional Support Committee

IRDC Institutional Report and Documentation Committee

MEET Mock External Evaluation Team

NCAAA National Center for Academic Accreditation and evaluation

PAAC Program Assessment and Accreditation Committee

PASC Programs Assessment Steering Committee
PLO Program-level student Learning Outcomes
PRDC Program Repot and Documentation Committee

PQAC Program Quality Assurance Committee

QAC Quality Assurance Committee

RW Reporting Week

SESI Self-Evaluation Scales of the Institution
SESP Self-Evaluation Scales of the Program
SSRI Self-Study Report for the Institution
SSRP Self-Study Report for the Program
SSSC Standards Self-Study Committees
VPAA Vice President of Academic Affairs

1. Introduction

Academic quality assurance is a critical process for any educational institution to maintain the highest international standards and meet the national expectations and requirements. It focuses on student learning by enhancing the academic programs quality and continuously improving the quality of teaching and learning process.

In this context, King Fahd University of Petroleum and Minerals (KFUPM) strives to achieve its mission and goals, as well as meeting the highest international and national educational standards. The Academic Quality Assurance Framework (AQAF) plays a vital role in this regard. AQAF is developed mainly in order to monitor and assess the student learning and teaching processes, and consequently enhance their quality. It supports the academic programs at the University to successfully achieve their missions. Furthermore, AQAF gives a feedback on whether the curriculum as a whole provides students with the knowledge, skills and competences that they should possess in accordance with the program educational objectives and intended students' outcomes.

AQAF manages and monitors all academic quality aspects in the University throughout different integrated quality assurance processes. In annual basis, a self-assessment process is conducted involving assessment at all levels: course, program, college, and institution. A number of documents need to be reported at each level by the concerned entities using specific templates. The documents should be completed, discussed with relevant people and submitted to the upper administrative level in timely manner according to a predefined assessment calendar for review and/or evaluation. For clarity, each template is associated with guidelines that describe each item in the template in details and examples if necessary. To ensure the continuous improvement, the assessment loop is closed within each level. For example, the submissions from the course level should be reviewed and evaluated at the program level, and the feedback is sent back to the course level to be addressed, and so on. AQAF also has identified the responsible person or unit for each task in the framework.

Accreditation at the level of the institution and its academic programs is a national requirement and KFUPM is known to be the first Saudi university that acquired accreditation for both its programs and the institution as a whole. In each accreditation cycle, KFUPM gets an independent verification of its quality as an institution as well as its academic programs, including Dammam Community College (DCC), by conducting a rigorous self-assessment and accreditation processes that include external evaluators visits and reports review. For the institution level, accreditation is implemented at national level through the National Center for Academic Accreditation and EvAluation (NCAAA) with a review cycle of seven years. For the program level, it is done through different accrediting bodies. For the Engineering and Computing Programs the accreditation is provided by the Accreditation Board for Engineering and Technology (ABET) with a revision cycle of 6 years, for the KFUPM Business School (KBS) programs, it is provided by Association to Advance Collegiate Schools of Business (AACSB) with a review cycle of 5 years and for all the Programs at National level, the accreditation is provided by NCAAA with a review cycle of 7 years.

This manual describes AQAF and its objectives, organizational structure and components. In addition, the annual self-assessment and the accreditation processes are described along with their relevant procedures and supporting templates and guidelines.

2. AQAF Objectives

The Academic Quality Assurance Framework aims to:

- 1- To ensure that the University and its academic programs are meeting national/international standards.
- 2- To provide feedback on academic quality assurance of the University and its academic programs.
- 3- To ensure that the University and its academic programs have clearly defined mission, educational objectives and learning outcomes and is meeting them.
- 4- To continuously improve the quality of the academic programs and act as an auditing mechanism to the University educational system.

3. AQAF Organizational Structure

AQAF organizational structure manages and monitors the implementation of academic quality processes in the University. It is composed of different entities including committees, Council, and College Quality and Accreditation Offices (CQAOs). These entities are responsible for implementing AQAF effectively and efficiently. Figure 1 depicts the structure of AQAF.

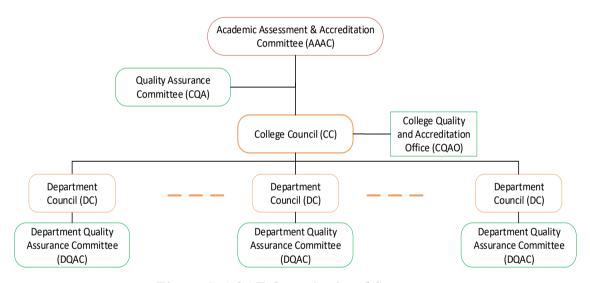


Figure 1: AQAF Organizational Structure

The charges associated with AQAF of the associated committees, councils, and COAOs and their the memberships are presented in the following sections.

3.1 Academic Assessment and Accreditation Committee

The Academic Assessment and Accreditation Committee (AAAC) is an Institutional-level standing committee that oversights AQAF implementation. The committee shall advise the President on the policy and institutional matters pertaining to academic quality including the assessment & accreditation of the institution as well as the academic programs. It should also approve the implementation plan on assessment team findings or recommendations. More specifically, the charges of the committee will be as follows:

The committee shall:

- 1- evaluates the Institutional Academic Quality Report (IAQR).
- 2- give feedback and recommendations to all concerned units in AQAF.
- 3- approve and supervise the implementation of a comprehensive accreditation & assessment plan for academic programs at the University.
- 4- initiate, revises and approves policies and procedures to enhance and assure quality of academic programs.
- 5- approve corrective actions and developmental plans, based on self-assessment and accreditation findings and monitor its implementation.
- 6- advise the President on all matters related to academic quality including accreditation of the institution and its academic programs
- 7- submit reports to the President after accreditation or self-assessment visits documenting strengths, weakness of the concerned department or college based on the assessment team findings or recommendations.

AAAC Members

- 1- Vice President of Academic Affairs Chairman
- 2- Dean of Academic Development
- 3- All college deans and Dean of DCC
- 4- Director, Academic Assessment Center
- 5- Two experienced Faculty members

By Invitation

- 1- Vice President of Research and Innovation
- 2- General Supervisor, Services
- 3- Dean of Faculty and Personnel Affairs
- 4- Dean of Student Affairs
- 5- Dean of Admission and Registration
- 6- Dean of graduate studies
- 7- Director of Office of Planning & Quality

3.2 Quality Assurance Committee

The Quality Assurance Committee (QAC) is a *standing committee* working under the Academic Assessment Center (AAC) at the Deanship of Academic Development (DAD). The main charge of this committee is to review and evaluate all academic quality reports related to assessment and accreditation during the accreditation cycle as well as the annual assessment of the colleges and programs. More specifically, the charges of the committee will be as follows.

The committee shall:

- 1- advise the AAAC on all matters related to AQAF, pertaining to Quality, accreditation and assessment of academic programs with the objective of continuously improving the quality in accordance to local needs and national and international quality standards;
- 2- review and evaluate the Annual College Files
- 3- advise the College Quality and Accreditation Office (CQAC) for necessary actions or corrections.
- 4- prepare the Institutional Academic Quality Report (IAQR), which include an annual academic assessment of the University and all of its colleges and programs
- 5- adhere and follow up on the assessment and accreditation plan

- 6- review the Self-Study Report for Program (SSRP) and the Self-Study Report for the Institution (SSRI).
- 7- provide feedback on the quality of the documents.
- 8- ensure compliance of the submitted documents with the accrediting agency standards.
- 9- provide recommendations for program improvements
- 10- review academic departments implementation plans
- 11- monitor the progress towards implementing corrective actions and developmental plans as approved in the implementation plan on annual bases.

OAC Members

- 1- Director of Academic Assessment Center Chairman
- 2- College Quality Coordinators (CQCs) of all colleges
- 3- Two experienced faculty members in accreditation and assessment

3.3 College Quality and Accreditation Office

The College Quality and Accreditation Office (CQAO) is the responsible entity in the college that collects, reviews and evaluates the Annual Program Reports (APRs). In addition, the office is responsible for preparing the Annual College Report (ACR). The CQAO shall perform the following tasks in coordination with AAC and concerned program quality coordinators.

The office shall:

- 1- advise the college Dean on all matters related to AQAF;
- 2- review and evaluate the Program Files and related documents of all the college's programs;
- 3- advise the Department Quality Assurance Committee (DQAC) for necessary actions or corrections;
- 4- prepare the College Annual File and send it to College Council;
- 5- develop and monitor an accreditation & assessment plan for academic programs at the college;
- 6- plan and implement training and awareness programs in relation to the standards and requirement of the accrediting agency;
- 7- coordinate and facilitate the activities for academic programs self-assessment and National / International Accreditation;
- 8- ensure compliance of submitted documents to accrediting body standards and requirements;
- 9- archiving all documents relating to quality, assessment and accreditation of all programs in the college;
- 10-provide Academic Assessment Center with all required data related to quality, assessment and accreditation, including ACF;
- 11- present and discuss ACF in the college council;
- 12-review and monitor the implementation plan for academic programs within the college based on the self-assessment and accreditation findings;
- 13-provide recommendations for program/college improvements.

COAO Members

- 1- College Quality Coordinator
- 2- One supporting staff.

3.4 Department Quality Assurance Committee

The Department Quality Assurance Committee (DQAC) or Program Quality Assurance Committee (DQAC) is the committee that will execute the implementation of AQAF at the level of the department or the program with the objectives of adhering to quality standards and ensuring that the academic programs are subject to effective continuous improvement processes.

Committee Charges

The committee shall:

- 1. advise the department Chairman on all matters related to AQAF;
- 2. review and evaluate the Course Files and related documents:
- 3. advise the courses' instructors for necessary actions or corrections;
- 4. prepare the Annual Program File (APF);
- 5. ensure adherence to quality standards of accrediting bodies;
- 6. prepare self-study report meeting the accrediting body standards;
- 7. ensure availability of needed documents and review course files based on accrediting body requirements;
- 8. collect, review and interpret department assessment or accreditation findings;
- 9. recommend improvements for department programs and suggest modifications as appropriate;
- 10. prepare departmental implementation plan based on recommendations or findings of assessment/accreditation activities;
- 11. prepare an annual report highlighting achievements towards actions in the implementation plan and propose corrective actions if needed.

DQAC Members

- 1- DQAC/PQAC Chairman
- 2- Faculty members appointed by the Chairman of the Dept.

DQAC/PQAC chairman shall lead the DQAC/PQAC efforts in reviewing course files and reports according to AQAF requirements and providing continuous feedback or recommendations for improvements to the department chairman.

3.5 College Council

College Council main task in relation to AQAF is to ensure that the programs in the college are of expected quality level and following the standards. It is required to discuss and approve the Annual College File (ACF) and recommend necessary actions if needed. If the ACF is approved, it is then forwarded to DAD for evaluation and further actions.

The main tasks of College Council related to AQAF are

- 1. discuss and Approve ACF,
- 2. take or recommend necessary actions based on ACF findings, and

3. forward ACF to DAD for evaluation and further actions.

3.6 Department Council

Department Council (DC) main objective in relation to AQAF is to ensure that the programs in the department are meeting the standards and their continuous improvement cycle is working effectively. Thus, it is required that DC discusses and approves the annual documentations related to programs quality, namely the Annual Program File (APF) and recommends necessary actions if needed. If the APF is approved it is then forwarded to College Quality and Accreditation Office (CQAO) for review and further actions.

The main tasks of Department Council related to AQAF are

- 1. discuss and Approve APF,
- 2. take or recommend necessary actions based on APF findings, and
- 3. forward APF to CQAO for evaluation and further actions.

4. AQAF Components

Documentation is an integral part in the processes of quality assurance. It provides means for self-assessment, analysis, evaluation, and monitoring. AQAF encapsulated the needed documents at each level in what is referred to as component. Thus, AQAF identifies four main components, which are, Course File (CF), Annual Program File (APF), Annual Collage File (ACF), and Institutional Academic Quality Report (IAQR). These components shall document the processes of assessing and monitoring the academic quality at respective levels throughout the whole academic year.

4.1 Course File

The Course File (CF) is the fundamental component of AQAF. It provides all information needed at the level of the course to ensure its quality. The instructor/coordinator of the course shall complete the CF according to the templates in Appendix A. The main items of the CF are as follows:

- 1- Course Specifications, which includes:
 - a. Course identifications & general information
 - b. Course description, objectives, and learning outcomes
 - c. Course contents
 - d. Office hours
 - e. Learning resources
 - f. Course evaluation
- 2- Course Report, which includes:
 - a. Course identification & general information
 - b. Course delivery (topics, and course-level student learning outcomes assessment)
 - c. Course results
 - d. Course evaluation
 - e. Quality improvement
- 3- Syllabus
- 4- The assessment materials including assignments, quizzes, project, major exams, and final exams

- 5- Marked samples from the student work for each assessment method mentioned in point 4, these samples shall include the best, average, and worst cases;
- 6- CLOs assessment report
- 7- Instructional materials, e.g. slides, lecture notes, etc. (as appropriate)
- 8- Student evaluation of the course and textbook (survey results)

In case the course is a coop or summer training course, the course file should include the following:

- 1. Field experience specifications, which includes:
 - a. Field Experience Course identification & general information
 - b. Student Learning Outcomes
 - c. Description of field experience activity
 - d. Planning and preparation
 - e. Evaluation of the field experience
- 2. Field experience report, which includes:
 - a. Field Experience Course identification & general information
 - b. Field Experience Modifications or Adaptations from Planned Field Experience Specifications
 - c. Results
 - d. Student outcomes assessment
 - e. administrative issues
 - f. Evaluation of field experience activities
 - g. Planning of Improvement
- 3. Student outcome assessment report
- 4. Sample of student final report for best, average and worst cases
- 5. Filed Experience Evaluation Surveys
- 6. Visitation report

4.2 Annual Program File

The Annual Program File (APF) contains documentations needed to ensure the quality of the program. It stipulates annual reports of key information associated with the overall performance of the program. APF helps the program to reflect on itself on an annual bases to ensure that the students, faculty, staff, and program administrator are engaging positively towards achieving program's mission, and identify any gaps and accordingly suggesting any remedial action plans. It will also follow up on the implementation of pervious action plans.

The Department Assessment & Accreditation Committee (DAAC)/Program Assessment & Accreditation Committee (PAAC) shall complete the Annual Program File (APF) according to the templates and guidelines in Appendix B. The main items of the APF are as follows:

- 1- Program Specifications, which includes the following:
 - a. Program identification & general information
 - b. Mission, Goals, and Learning Outcomes
 - c. Curriculum
 - d. Student admission and support
 - e. Teaching and Administration staff

- f. Learning resources, Facilities, and Equipment
- g. Program Management & Regulations
- h. Program Quality Assurance
- i. Specification Approval Date
- 2- The Annual Program Report (APR); which includes the following:
 - a. Implementation of previous action plans
 - b. Program statistics
 - c. Program learning outcomes assessment
 - d. Summary of course reports
 - e. Program activities
 - f. Program evaluation
 - g. Difficulties and challenges faced program management
 - h. Program improvement plan
 - i. Report approving authority
- 3- Course Files' Summary Report;
- 4- Assessment Plan for Program Learning Outcomes;
- 5- Progress Report on Accreditation-Related Recommendations and Action Recommendations
- 6- Status Report on
 - a. Program Revision;
 - b. Program Accreditation;
 - c. Industrial Advisory Committee.

4.3 Annual College File

The Annual College File contains documents needed to report the status of the quality of all programs within the college. It will provide an annual comparative report of the performance of the programs and departments on various aspects related to the academic quality.

The CQAO shall prepare the Annual College Report (ACF) according to the templates in Appendix C. The main Templates of the ACF are as follows:

- 1- ACF1. College File Cover Page, which is a checklist for the ACF items
- 2- ACF2. Annual College Report, which contains the following
 - a. College goals & objectives
 - b. College management & administration
 - c. Statistical information
 - d. Status reports summary
 - e. Course files summary
 - f. Student outcomes assessment summary
 - g. College evaluation summary
 - h. College KPIs
 - i. Recommendations and action plans
- 3- ACF3. Status report on accreditation recommendations and action recommendations
- 4- ACF4. Ten-Years projected plan for assessment & accreditation
- 5- ACF5. Program learning outcomes (student outcomes) assessment plan

4.4 Institutional Academic Quality Report

The Institutional Academic Quality Report (IAQR) should provide a comprehensive report about the academic quality status in the Institution. It will summarize the major findings of the previous three components, i.e. CFs, APFs, and ACF. The IAQR shall be completed according to the templates and guidelines in Appendix D. The main contents of the IAQR are as follows:

- 1- Institution identification and statistical information
- 2- Institution-Level Summary of the ACRs and APRs
- 3- Status Report on the institutional Accreditation-Related Recommendations and Action Recommendations
- 4- Annual Self-Study Report
- 5- Institution-Level KPIs

5. AQAF Workflow

This section describes AQAF workflow along with its detailed procedure. It also identifies a timeline for the preparation and submission of AQAF documents, which is referred to as assessment calendar.

5.1 Workflow

This workflow is a two dimensional flowchart that illustrates the process of preparing, reviewing and evaluating the components of AQAF. The columns represent the process timeline in terms of semesters, which starts from preparing the Course Files (CFs) at the beginning of each semester all the way until submitting the IAQR. The rows represent the unit/person who is responsible for carrying out the corresponding tasks mentioned in the same row. Figure 2 shows AQAF workflow.

It should be noted that in each level (course, program, college, or institution) there will be a feedback to the lower entity to close the assessment loop and thus enabling the continuous improvement. However, for the sake of clarity and simplicity of the flowchart appearance, this loop is illustrated only at the course level.

5.2 Procedure

The following procedure describes what each responsible person/committee shall do and when, according to the assessment calendar in section 5.3.

- 1- The instructor/coordinator of the course shall
 - a. prepare the Course File (CF) according to CF templates in appendix A, starting at the beginning of each semester, including summer session;
 - b. submit the CF to DQAC/PQAC. The CFs submission deadline is as follows:
 - i. CFs of the first semester: 2nd week of the second semester,
 - ii. CFs of the second semester: 18th week (Assessment week),
 - iii. CFs of the summer session: 9th week of the summer session;
 - c. in case there is an input from DQAC/PQAC, the instructor shall revise and resubmit the CF within two days.
- 2- The DQAC/PQAC shall

- a. review and evaluate the CFs within one week after receiving Them. In this step, the DQAC/PQAC may send back the Course File to the instructor/coordinator to address their comments, if any;
- b. prepare the report of Program-level student Learning Outcomes (PLOs) assessment within one week after grade submission deadline of each semester;
- c. prepare the Annual Program File (APF) at the end of the academic year, within the assessment week (the 18th week), according to the templates in Appendix B. This includes the program-level KPIs;
- d. submit and present the APF to the department council.

3- Department Council

- a. Discuss and approve the APF.
- b. Submit the APF to the College Quality and Accreditation Office (CQAO) in the 1st week of the first semester (next academic year).
- c. in case there is an input from CQAO, DQAC/PQAC shall revise and resubmit the APF within one week through the department council.

4- The CQAO shall

- a. review and evaluate the APFs;
- b. prepare the Annual College File (ACF) according to the templates in Appendix C. This includes the college-level KPIs;
- c. suggest action recommendations if needed;
- d. submit and present the ACF to the College Council;
- e. in case there is an input from College Council, CQAO shall revise and resubmit the ACF within one week.

5- The College Council shall

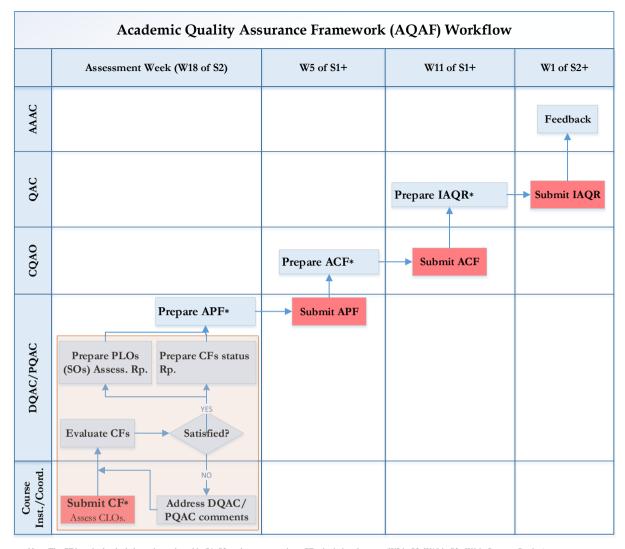
- a. discuss and approve the ACF;
- b. submit the ACF along with the APFs as attachments to DAD/QAC in the 7th week of the first semester (next academic year).

6- The QAC shall

- a. review and evaluate the ACFs. In this step, the QAC may send back the ACF to the CQAO in order to address their comments, if any;
- b. prepare the Institutional Academic Quality Report (IAQR) according to the templates in Appendix D. This includes the Institution-level KPIs;
- c. submit the IAQR along with the ACFs as attachments to the Academic Assessment and Accreditation Committee (AAAC) in the 13th week of the first semester (next academic year).

7- The AAAC shall

- a. Discuss and approve the IAQR.
- b. Recommend actions for improvements if needed.



Note: The CF loop in the shaded area is conducted in S1, S2, and summer session.. CF submission dates are (W2 in S2, W18 in S2, W9 in Summer Session)

* Main contents of each submission

CF: course specifications & report, syllabus, assignments, quizzes, exams, instructional material, CLOs assessment, and student evaluation

APF: course statistics/results/analysis of significant results, program's KPIs, PLOs assessment, progress on Rs & ARs, and status of program revision/accreditation/IAC

ACF: course statistics and major findings, college's KPIs, College SOs if any, statistics of Rs & ARs, and statistics of program revision/accreditation/IAC

IAQR: major findings from ACF, institution's KPIs, institution SOs assessment, and college-level statistics of Rs & ARs, program revision/accreditation/IAC

Closing the loop: in each level (Course, Program, College, and institution) there will be a feedback (if necessary) to close the assessment loop in order to ensure the continuous improvement, however, for the sake of clarity and simplicity of the flowchart appearance, this loop was illustrated only in the Course level.

Abbreviations

CF: Course File

APF: Program File ACF: Annual College File

IAQR: Institutional Academic Quality Report PAAC: Program Quality Assurance Committee DAAC: Department Quality Assurance Committee

CAAC: College Quality Assurance Committee
QAC: Quality Assurance Committee
AAAC: Academic Assessment & Accreditation Committee

Inst: Instructor

Coord: Coordinator
CLOs: Course-level student Learning Outcomes
SOs: Student Outcomes

PLOs: Program-level student Learning Outcomes Rp.: Report S1: First Semester

S2: Second Semester S1⁺ first semester of the following academic year

Assess.: Assessment R: Recommendations

AR: Action Recommendations

IAC: Industrial Advisory Committee

- Notes:
 CF should be approved by Course Instructor/Coordinator
 APR should be discussed & approved by Department Council
 ACR should be discussed & approved by College Council
 IAQR should be approved by Dean of DAD

Figure 2: AQAF Workflow

5.3 Timeline (Assessment Calendar)

AQAF assessment calendar is a weekly breakdown of the whole academic year including the summer session, shown in Figure 3. It identifies the main tasks of AQAF, the responsible person/unit, and the due week for conducting the corresponding task. In order to specify the due week (s) for conducting the task, we used two colors, dark green and light green. The dark green specify the exact due for conducting the task, whereas the light green indicates that the task can be conducted partially during this period. At the end of each academic year, there will be a fully dedicated week for assessment, which is called the *Assessment Week (AW)*, the 18th week of the second semester, as shown in the calendar below. It is expected in this week from the departments/programs to finalize the program files, with all its contents as described in section 4.2, including the student outcomes assessments and program level KPIs.

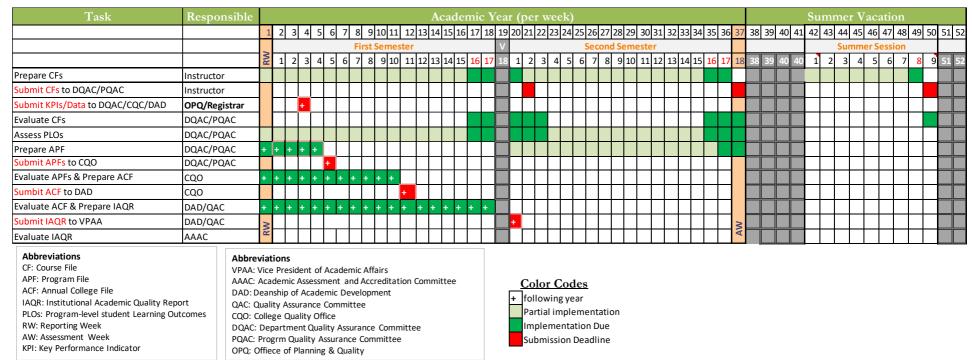


Figure 3: AQAF Assessment Calendar

6. Accreditation Process

Accreditation is a system for recognizing educational institutions and professional programs affiliated with those institutions for a level of performance, integrity, and quality, which entitles them to the confidence of the educational community and the public they serve. Since accreditation status is reviewed on a periodic basis, recognized institutions and professional programs are encouraged to maintain continuous self-assessment and improvement mechanisms, which is the main objective of the KFUPM AQAF. The accrediting process requires institutions and programs to examine their goals, activities, and achievements; to consider the expert criticism and suggestions of a visiting team; and to determine corrective actions based on recommendations or suggestions from the accrediting agency.

At KFUPM, self-assessment and accreditation are conducted by a number of committees most of which are Ad hoc. Those committees are formed such that the concerned personal such as faculty, staff, and administrators are truly engaged in the self-assessment process identifying areas of strength and weaknesses, and recommending correction plans if needed. The following sections present the formation of relevant committees and the procedures for both institutional accreditation as well as program accreditation.

6.1 Institutional Accreditation

This section details the committee formation and the process of institutional self-assessment and accreditation. All academic and administrative units are in fact involved in this process. There information regarding strategic planning, quality assurance, performance monitoring, KPI reporting, and action plans for improvements are the main components of institutional self-assessment and accreditation reports. The institutional accreditation process should result in producing documents needed by the national accrediting agency NCAAA. The main document will be the Self-Study Report for the Institution (SSRI) along with other reports that need to be attached such as KPI reports, Self-Evaluation Scales for Institutions (SESI) and supporting evidences. The following sections provide describes the institutional accreditation committee formation and the detailed procedure for conducting such accreditation process.

6.1.1 Institutional Accreditation Committees

Upon the initiation of the institutional self-assessment and accreditation process, relevant committees are formed, in addition to the existing committees. Figure 4 shows the organizational chart of the institutional assessment & accreditation committees. These committees include the following standing committees:

- Academic Assessment & Accreditation Committee (AAAC)
- Quality Assurance Committee (QAC)

And the following ad-hoc committees:

- Institutional Assessment & Accreditation Steering Committee (IAASC),
- Institutional Report & Documentation Committee (IRDC),

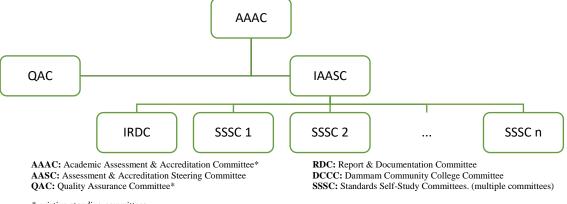
 Standards Self-Study Committees (SSSCs). Each SSSC shall be responsible for one or more NCAAA Institutional Quality Standards.

The charges of the standing committees AAAC and QAC, have been mentioned in section 3. The following are the charges of the ad-hoc committees:

Institutional Assessment & Accreditation Steering Committee (IAASC)

This committee is chaired by Dean of Academic Development, and co-chaired by the director of Academic Assessment Center with the following charges:

- Manage the entire self-assessment process.
- Provide direction to the self-study committees.
- Plan and arrange the external review team visit.
- Gather internal and external feedback on the self-assessment draft report
- Recommend priorities for improvement.
- Review the final self-assessment report.



^{*} existing standing committees

Figure 4: Organizational structure for institutional accreditation

Institutional Report and Documentation Committee (IRDC)

This committee is chaired by the Director of AAC. It shall be responsible for writing and compiling the Self-Study Report for the Institution (SSRI) along with all of its supporting documents. The tasks of IRDC include:

- Prepare the Institutional Accreditation Eligibility report. Collect the necessary
 documentations to fulfill the Eligibility requirements, and suggest remedy actions
 in case of any shortcomings to the Vice President of Academic Affairs.
- Prepare guidelines for SSSCs in how to fill the SESI, writing initial report, and suggesting necessary action recommendations related to their respective standards.
- Conduct meetings with the SSSCs to discuss the initial Self-Evaluation Scales (SESs) and the report write-up, and action recommendations related to their respective standards.

- Fill the final SESI and write the final report of each standard along with necessary action recommendations.
- Coordinate with SSSCs and relevant administrative and academic units to collect necessary evidences, and properly archive them for easy referencing and/or citation.
- Provide necessary report on the recommendations from the previous cycle and suggest further action plan based on the collected data.
- Finalize the write-up and the compilation of the whole SSRI along with all necessary appendences and/or attachments according to the requirements of the NCAAA.
- Respond to the factual errors, current recommendations from the External Evaluation Team and NCAAA Accrediting Team as well as all the documentation requested by NCAAA.
- Provide support and guidance to NCAAA Teams during their visits to KFUPM.

Standards Self-Study Committees (SSSCs)

The members of the committee can be selected from relevant administrative personnel in addition to some selected faculty members. Each standards' self-study committee shall be responsible for one or more NCAAA institutional quality standards. They are expected to provide their initial input regarding the assigned standards. Their input will include SESI, report write-up, action recommendations, and supporting references and documentations associated with the assigned standards.

6.1.2 Procedure for National Institutional Accreditation

The procedure for conducting an institutional accreditation for KFUPM, including the Dammam community college, is described below.

- 1- AAC Director shall initiate the institutional assessment & accreditation process after getting approval from Academic Assessment & Accreditation Committee (AAAC) based on the institutional master plan for Assessment & Accreditation.
- 2- The formation of the institutional assessment and accreditation Ad-Hoc committees and their roles shall be furnished by the AAC Director with the approval of the Dean of Academic Development, Vice President of Academic Affairs (VPAA) and the Rector. The formation letter of these committees shall be issued from the office of the Rector.
- 3- The Chair of the IAASC advises IRDC, DCCC and SSSCs to start the institutional self-assessment process according to the NCAAA requirement, conduct self-evaluation against the national accreditation standards, and write the relevant parts in the SSRI.
- 4- SSSCs shall submit their inputs related to their respective standards to IRDC for review and to start the preparation of SSRI. The SSSC input includes the initial write-up of their respective standards with supporting documentations, the Self-Evaluation Scales for the Institution (SESI) and their perceived action recommendations.

- 5- IRDC shall meet each SSSC to discuss their input and fill the final SESI and write the final report of each standards along with necessary action recommendations and supporting documentations.
- 6- IRDC shall submit the draft of the SSRI to the QAC through IAASC for review in order to ensure that it is prepared according to the national accreditation standards and the report is in line with the required format. In this step, QAC may communicate with the IRDC for any clarifications if needed.
- 7- IAASC shall form a Mock External Evaluation Team (MEET) and negotiate the schedule of mock visit and report submission at least two months before mock visit.
- 8- QAC shall submit its review report to IRDC through IAASC within one month from receiving the SSRI.
- 9- IRDC shall submit the final draft of the SSRI to IAASC within one month from receiving the QAC review report.
- 10-IAASC shall send the final draft of the SSRI to the MEET and finalize the schedule of the mock visit.
- 11-IAASC shall prepare for the mock visit in coordination with Public Relations and IRDC and form a task force team to provide logistic support during the mock visit.
- 12-IAASC shall form other task force teams in coordination with AAC, if necessary, to check the readiness of various academic and/or administrative units for the visit.
- 13-Once the MEET conducts the visit, they are expected to submit its evaluation report to the IAASC and presents its findings according to NCAAA protocols.
- 14-The IAASC shall send the MEET report to IRDC to make any necessary modifications in coordination with the concerned SSSCs.
- 15- If necessary, action plans are needed as per the recommendations of the MEET, IRDC shall prepare and submit an action plan, in coordination with relevant SSSC, according to the form PRF6 provided in Appendix B.
- 16-IRDC shall update SSRI according to MEET report and submit the updated report to QAC within one month.
- 17- QAC shall review the updated report ensuring that all MEET findings are resolved. In this step, QAC may communicate with the IRDC for any clarifications if needed. QAC shall submit its review report to IRDC within two weeks from receiving the updated SSRI.
- 18- IRDC shall submit the final SSRI to IAASC within one month from receiving the QAC review report.
- 19-IAASC shall send the final SSRI to NCAAA and finalize the schedule of the accreditation visit.

- 20-IAASC shall form taskforce teams as indicated in Steps 11 and 12.
- 21-Upon receiving the report of Accreditation Team (AT), the IRDC shall prepare a report to respond to the factual errors and response on the recommendations as per NCAAA protocols.

After going through the accreditation process, AAC shall follow up on the corrective actions based on AT findings, as shown in Figure 6. In the next cycle, AAC shall initiate self-assessment according to a timeline that will be sent to AAAC. The self-assessment process must be initiated at least two years before the next accreditation or re-accreditation visit.

6.2 Programmatic Accreditation

In its efforts to improve the quality and level of performance of the academic programs, KFUPM initiated the process of accreditation of their Academic Programs at the main campus as well as the Dammam Community College (DCC). Accreditation of the Engineering and Computing Programs is provided by the Accreditation Board for Engineering and Technology (**ABET**) with a review cycle of 6 years. Accreditation of the Business School programs is done by the Association to Advance Collegiate Schools of Business (**AACSB**) with a review cycle of 5 years. Accreditation of all the programs at National level is done through National Center for Academic Accreditation and evAluation (**NCAAA**) with a review cycle of 7 years.

In the next section, the program accreditation committee formation is explained. Then, the procedure for program accreditation is presented in the following section. It should be noted that regardless of the accrediting agency, the committee formation and the procedures for program accreditation will be essentially the same.

6.2.1 Program Accreditation Committees

For program accreditation, additional ad-hoc committees are needed to be formed in addition to the existing academic quality structure, described in Section 3. A steering committee is formed for each accrediting body, i.e. NCAAA, ABET, and AACSB. One of the concerned college Deans shall be assigned by the Vice President of Academic Affairs (VPAA) as the chair of the Programs Accreditation Steering Committee (PASC) and the other colleges' deans will be members. The chair of PASC shall be the contact person with the accrediting body. The committee structure of program accreditation is illustrated in Figure 5.

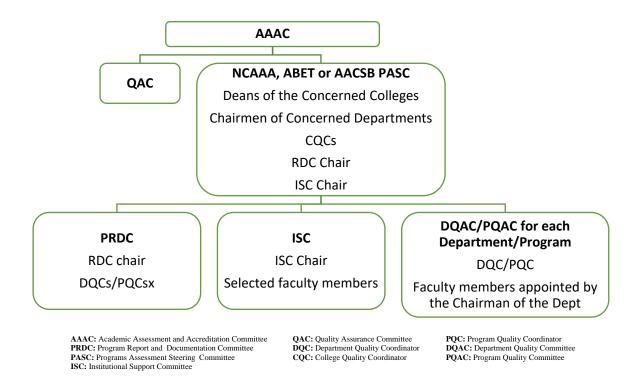


Figure 5: Organizational structure for programmatic accreditation

The charges for the standing committees AAAC and QAC, have been mentioned in section 3. The following are the charges of the ad-hoc committees:

Programs Accreditation Steering Committee (PASC)

The chair of PASC shall be one of the concerned college Deans and appointed by the VPAA. Members of this committee are the chairmen of concerned departments, CQCs, PRDC chair and ISC chair .The following are the PASC charges:

- Manage the entire self-assessment process.
- Provide direction to other committees (ISC, PRDC and DQAC/PQAC).
- Plan and arrange the visits by external review team (Mok) and accrediting teams.
- Gather internal and external feedback on the self-assessment draft report
- Approve the Self-Study Reports, and other related documentation, and recommendations for improvements and their action plans.

Program Report and Documentation Committee (PRDC)

The chair of this committee shall be appointed by the chair of PASC. Members of this committee are the DQCs/PQCs. The tasks of PRDC include:

- Preparing guidelines for report writing and documentations of SSRP and other needed documents by the accrediting body.
- Review the SSRP and other documents needed for accreditation to ensure their quality and compliance with the accreditation requirements.

• Review the response of the DQAC/PQAC on the factual error reports and recommendations of the external evaluation team (Mock) as well as accrediting team and their action plans.

Institutional Support Committee (ISC)

Members of this committee are faculty members selected by the chair of PASC. The task of ISC will be to collect data and prepare documentations common to all programs going through the accreditation.

6.2.2 Procedure for Program International/National Program Accreditation

The procedure for conducting an international or national accreditation for KFUPM academic programs is described below.

- 1. The Vice President of Academic Affairs (VPAA) forms the PASC in coordination with concerned colleges. There will be one PASC for each accrediting body, i.e. there will be ABET PASC, NCAAA PASC, and AACSB PASC.
- 2. PASC shall identify the academic programs to seek initial accreditation/re-accreditation or self-assessment after getting approval from Academic Assessment & Accreditation Committee (AAAC) based on the master plan for Assessment & Accreditation.
- 3. In case of international accreditation, the chair of PASC shall contact NCAAA 6 months before contacting the international accrediting body to get its approval.
- 4. Chair of PASC is the point of contact with accrediting body, and he is the one responsible for sealing the agreement with accrediting body and initiating the accreditation process in appropriate timing in coordination with academic assessment center.
- 5. PASC shall agree on detailed timeline for the whole process of self-assessment and accreditation including tentative dates for the visits of mock evaluators as well as the accreditation panel. This timeline shall be in line with the master plan for Assessment & Accreditation.
- 6. PASC forms the Program Report and Documentation Committee (PRDC) to provide guidelines for the write-up of the Self-Study Report for Program (SSRP), and to ensure the quality, timeliness and completeness of the SSRPs. PRDC shall prepare the guidelines within two weeks from the formation of the committee and send it to PASC.
- 7. PASC forms the Institutional Support Committee (ISC) to write the common parts of the SSRPs, especially the ones related to the institutional support.
- 8. PASC shall inform the Department Assessment & Accreditation Committee (DAAC)/Program Assessment & Accreditation Committee (PAAC) to prepare the Self-Study Report for the Program (SSRP) according to the accrediting body requirements and PRDC guidelines.
- 9. The findings of the SSRP and associated action recommendation shall be discussed and approved by the Council of the concerned Department or the College.
- 10. DAAC/PAAC shall submit the draft SSRP and its supporting documents to PRDC for review.

- 11. If satisfied, PRDC forwards the draft SSRP and supporting documents to the Quality Assurance Committee (QAC) to review it within one month for quality assurance. Otherwise, PRDC shall send it back to DAAC/PAAC with a review report detailing the issues found in the draft SSRP.
- 12. QAC shall send its review report back to PRDC for corrections. Based on QAC input, PRDC prepares a review report to address all issues pertaining the draft SSRP and send it to the concerned DAAC/PAAC.
- 13. DAAC/PAAC shall update the draft SSRP based on PRDC review report and send the updated draft SSRP to the PRDC. DAAC/PAAC shall also prepare a response report to respond to the PRDC review report and include it with the updated draft SSRP.
- 14. PRDC shall review the updated draft SSRP. If there are other issues, a review report shall be sent back to DAAC/PAAC. Otherwise, PRDC shall send the draft SSRP to PASC.
- 15. PASC shall review the draft SSRP. If there are issues in draft SSRP, PASC shall return it back to PRDC with a review report. Otherwise, PASC shall send the draft SSRP to the Mock External Evaluation Team (MEET) and plan the schedule of the MEET visit after the approval of AAAC.
- 16. MEET conducts the visit, submits an evaluation report and presents its findings according to accrediting body protocols.
- 17. PASC forwards MEET evaluation report to the PRDC and AAAC.
- 18. RDC shall review MEET evaluation report within two weeks and send its input along with the MEET report to the concerned DAAC/PAAC.
- 19. DAAC/PAAC shall prepare an action plan to respond to the MEET and PRDC inputs according to the form provided in this document in Appendix B (PRF6). The plan must include MEET findings and the corrective actions to be taken, assignment of responsibility and a time frame for such actions.
- 20. AAAC approves the action plan and forward it to the PASC, which in turn forward it to the concerned DAAC/PAAC.
- 21. DAAC/PAAC prepares the updated SSRP according to accrediting body requirements based on MEET recommendations and the action plans approved by AAAC.
- 22. Repeat Steps 9 to 13.
- 23. PASC shall review the SSRP. If there are issues in SSRP, PASC shall return it back to PRDC with a review report. Otherwise, PASC shall send the SSRP to the Accrediting Agency meeting their timeline requirements.
- 24. PASC shall plan the schedule of the AT visit and shall make necessary arrangements.
- 25. The AT conducts the visit, submits a report and presents its findings in an exit meeting that will be attended by VPAA, DAD, PASC, AAC director, PRDC and DAAC Members.

26. Upon receiving the report of AT, PRDC shall prepare a report to respond to the factual errors and to its recommendations as per accrediting body protocols in coordination with the relevant departments.

After going through the accreditation process, Academic Assessment Center shall follow up on the corrective actions based on AT findings, as shown in Figure 6.

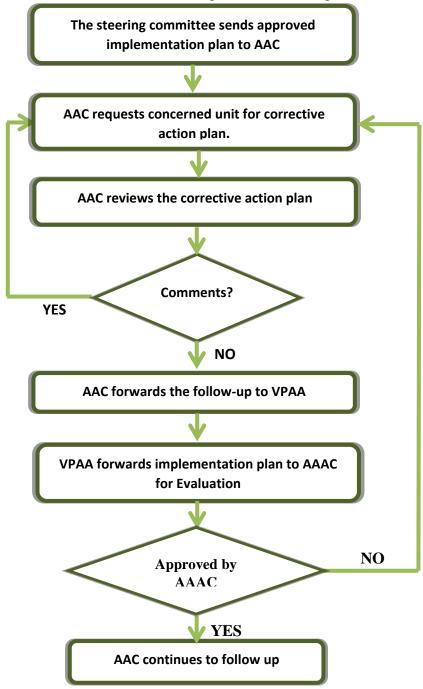


Figure 6: The process of follow-up on accreditation R & AR

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CRF1. COURSE FILE COVER PAGE

Course Title:	Code #:
Program:	Semester:
Department:	No. of Sections:
College:	Location: Choose an item.
Name of course instructor/coordinator:	Date:

COURSE FILE CHECKLIST

#	Item Name	Included Yes ✓ / No	Reasons if not Included
1	Course Specification (Using Course Specifications Template)		
2	Course Report (Using Course Report Template)		
3	Syllabus		
4	Assignments		
5	Assignments Marked Samples	□ Best	
	(Best, Average and Worst)	☐ Average	
		□ Worst	
6	Quizzes		
7	Quizzes Marked Samples	□ Best	
	(Best, Average and Worst)	☐ Average	
		□ Worst	
8	Project		
9	Project Marked Samples	□ Best	
	(Best, Average and Worst)	☐ Average	
		□ Worst	
10	Major Exams		
11	Major Exams Marked Samples	□ Best	
	(Best, Average and Worst)	☐ Average	
		□ Worst	
12	Final Exam		
13	Final Exam Marked Samples	□ Best	
	(Best, Average and Worst)	☐ Average	
		□ Worst	
14	Instructional Material (ex. Slides, Lecture notes,)		
15	Outcome Assessment Report		
16	Student evaluation of the course (Survey results)		

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CRF2. COURSE SPECIFICATIONS

Co	urse Title:						
Co	urse Code:						
Pro	ogram: Click or tap here to enter text.						
De	partment: Click or tap here to enter text.						
Co	llege: Click or tap here to enter text.						
Ins	titution: Click or tap here to enter text. Date: Clic	ck or tap to enter a date.					
	COURSE SPECIFICA		Γ				
#	Item Name	Completed? Yes ✓ / No	Reasons if not Completed				
A	Course Identification						
В	Course Description,						
	Objectives & Learning Outcomes						
C	Course Contents						
D	Teaching and Assessment						
E	Office Hours						
F	Learning Resources						
G	Other NCAAA Program Accreditation						
	Requirements (Optional)						
repa	ared by						
Cour	se Instructor/Coordinator:	Sig	gnature:				
Date:							
Approval Data							
L	Council / Committee						
	Reference No.						
	Date						

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A. COURSE IDENTIFICATION

1. Course Credit Hours: 3digits, Ex, 2-1-3

2. Course Type:

a. Choose an item.b. Choose an item.						
3. Level at which this course is offered: Choose an item.						
4. Pre-requisites for this cours	se (if any):					
	-					
5. Co-requisites for this cours	e (if any):					
6. Not to be taken with (if any):					
7. Location: Choose an item.						
8. Mode of Instruction						
Mode of instruction				Percentage	e (%)	
in class (face to face)						
Other (Specify:)				
Comments:						
9 Contact and Credit Hours	s (contact hour	s ner semester)				
9. Contact and Credit Hours (contact hours per semester)						
Contact/Condit House	Lecture	Laboratory	Tutorial	Others	Total	
Contact/Credit Hours	Lecture	Laboratory or Studio	Tutorial	Others (Specify)	Total	
Contact Hours	Lecture		Tutorial		Total	
	Lecture		Tutorial		Total	
Contact Hours	Lecture		Tutorial		Total	
Contact Hours	Lecture		Tutorial		Total	
Contact Hours	Lecture		Tutorial		Total	
Contact Hours Credit Hours		or Studio		(Specify)		
Contact Hours		or Studio		(Specify)		
Contact Hours Credit Hours B. COURSE DESCRIP	PTION, OB	or Studio	& LEARN	(Specify)		
Contact Hours Credit Hours	PTION, OB	or Studio	& LEARN	(Specify)		
Contact Hours Credit Hours B. COURSE DESCRIP	PTION, OB	or Studio	& LEARN	(Specify)		
Contact Hours Credit Hours B. COURSE DESCRIP	PTION, OB	or Studio	& LEARN	(Specify)		
Contact Hours Credit Hours B. COURSE DESCRIP	PTION, OB	or Studio	& LEARN	(Specify)		
Contact Hours Credit Hours B. COURSE DESCRIP	PTION, OB	or Studio	& LEARN	(Specify)		
Contact Hours Credit Hours B. COURSE DESCRIP 1. Catalog Course Description	PTION, OB.	JECTIVES &	LEARN Form used in	(Specify)		
Contact Hours Credit Hours B. COURSE DESCRIP	PTION, OB.	JECTIVES &	LEARN Form used in	(Specify)		
Contact Hours Credit Hours B. COURSE DESCRIP 1. Catalog Course Description	PTION, OB.	JECTIVES &	LEARN Form used in	(Specify)		
Contact Hours Credit Hours B. COURSE DESCRIP 1. Catalog Course Description	PTION, OB.	JECTIVES &	LEARN Form used in	(Specify)		
Contact Hours Credit Hours B. COURSE DESCRIP 1. Catalog Course Description	PTION, OB.	JECTIVES &	LEARN Form used in	(Specify)		
Contact Hours Credit Hours B. COURSE DESCRIP 1. Catalog Course Description	PTION, OB.	JECTIVES &	LEARN Form used in	(Specify)		

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3. Ma	3. Map Course-level Student Learning Outcomes (CLOs) to the Program-level Student Learning Outcomes (PLOs)*.							
Code	de CLOs						Aligned PLOs (PLO's Code)	
1	Knowledge and Understanding						(120 s couc)	
1.1		V						
1								
2								
2.1								
3	Values							
3.1	values							
3								
		. of CLOs within the						
linked	to more than one	PLO; (4) it is not nec	cessary to lin	ık all the	CLOs to PLO	s or to cover a	all the d	domains.
C. C	OURSE CON	TENT						
-	ject Area Credit l		l l : C:	11	1	. 1 41	1:4	1)
	te tne number of c <mark>eering/Computer</mark>	redit hours against the Mathematics/		tion below		ea tne course <mark>ucation/ Soci</mark>		
Science		Science	Business		Sciences/ H		aı	Other
2 Tor	oics to be Covered	1						_
No	hes to be covered		List of Top	oics				Contact hours
1			2150 01 101	105				001144001104115
2								
			Total					
D T	EACHING on	1 ACCECCMENT	r					
		d ASSESSMENT		(GT 0		G		
	ignment of Course	e-level student Learn	ing Outcome					
Code	Vnovdodao on	CLOs d Understanding		Teacl	ning Strategi	es	Assessi	nent Methods
1.1	Knowledge an	u Onderstanding						
1.1								
2	Skills							
2.1								
3	Values		T					
3.1								
•••	<u> </u>							
2. Sch	edule of Assessm	ent Tasks for Stude	nts During t	he Seme	ster			
		Assessment			-	Week Due	Pro	portion of Total
								sessment Score
1								
2								
*e a 6	e.g., essay, written or oral test, group project, examination, speech, oral presentation, etc.							



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E. OFFICE HOURS

1. The amount of time teaching staff are expected to be available each week (it should be minimum 3 hours per week)

F. LEARNING RESOURCES

- 1. List Required Textbooks
- 2. List Essential References Materials (Journals, Reports, etc.)
- 3. List Recommended Textbooks and Reference Material (Journals, Reports, etc)
- 4. List Electronic Materials, Web Sites, Facebook, Twitter, etc.
- 5. Other Learning Materials such as computer-based software, professional standards or regulations and software.

G. Other NCAAA PROGRAM ACCREDITATION REQUIREMENTS (OPTIONAL)

- 1. Arrangements for availability of faculty and teaching staff for individual student consultations and academic advice, in addition to the instructor office hours.
- 2. Facilities Required (Accommodation, e.g. classrooms and laboratories; Technology Resources, e.g. data show and smart board; other resources, e.g. laboratory equipment, etc.)
- 3. Course Evaluation.

Evaluation Areas/Issues	Evaluators	Evaluation Methods

Evaluation Areas/Issues: For example, Effectiveness of teaching and assessment, Extent of achievement of course learning outcomes, Quality of learning resources, etc.

Evaluators: Students, Faculty, Program Leaders, Peer Reviewer, Others (specify)

Assessment Methods: Direct (Assignments, Exams, term reports, etc.), & Indirect (Surveys, Interviews, etc.)

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CRF3. COURSE REPORT

	urse Title:		
Co	urse Code:	Sem	ester:
_			
De	partment: Click or tap here to enter text Prog	gram: Click or ta	p here to enter text
		e: Click or tap to e	
	<u> </u>	T. T. T.	
	COURSE REPORT CE	HECKLIST	
#	Item Name	Completed? Yes ✓ / No	Reasons if not Completed
A	Course Identification and General Information		
	Course Delivery		
В	1- Coverage of Planned Topics		
	2- Consequences if Topics were not fully covered		
	3- Course Student Outcomes Assessment		
	Course Results		
C	1- Distribution of Grades		
	2- IC Grade		
	3- Results Analysis		
	Course Evaluation and Recommendations		
D	1- Student Evaluation of the Course		
	2- Student Evaluation of the Textbook		
	3- Recommendations		
E	Quality Improvement (NCAAA Requirements)		
F	Course Improvement Plan		
	pared by urse Instructor/Coordinator: Signature:		
	5181111110.	Bate	
Rev	iewed by		
Cha	ir of Department Quality Assurance Committee:		
	Signature:		Date:



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A. C	A. COURSE IDENTIFICATION AND GENERAL INFORMATION									
1. N	. Name of course instructor (s):									
	Number of Number of Students									
No	No Instructor)]	Location	Sections	St	carting the course	Coı	mpleting the course	
2. Y	ear an	d semester to	which this r	eport applie	es:			•		
3. N	o. of s	tudents who	started the co	ourse:						
4. N	o. of S	Students who	completed th	ne course:						
5. N	o. of s	tudents who	took the fina	l exam:						
6. To	otal Co	ourse Contac	t Hours:							
	Lecture Laboratory or Studio Tutorial Others (Specify) Total									
Con Hou		Planned								
пои	IS.	Actual								
* Total	Semeste	er Hours = Week	ly hours x Numbe	er of weeks per	semester		•			

B. COURSE DELIVERY

1. Consequences if Topics were not fully covered

	Topics no	t Fully Covere	d Reason for Not Covering	Extent of their impact on learning outcomes	Compensating Action*		
Ī							

^{*}Compensating actions already taken or suggested

		PLOs	Assessment	Assessment 1	Comments on	
	CLOs	Code	Methods	Target/criterion	Actual	Assessment Results
		Couc	Wichiods	for success	Actual	Assessment Results
1	Knowledge and Under	standing				
1.1						
1.2						
2	Skills					
2.1						
2.2						
3	Values					
3.1						
3.2						



	ъ.			 na
C . 3	ĸ	K.S	U	12

1- Grade distribution

	Grades Status Distributions*														
	A+	A	B+	В	C+	C	D+	D	F	IP	IC	DN	W	NP	NF
No. of students															
Percentage															
*IP(In Progress); IC(In	comple	ete); DN	N(Denia	al); W(withdra	wn); N	IP(No g	grade-P	ass); N	F(No g	rade-F	ail)			

GRADE POINT AVERAGE (GPA) (of the course) =	$\sum Q$ ualifying	Points	of G	rade _	
GRADE I OINT AVERAGE (GI A) (of the course) =	Number	of Stu	idents		

2- IC (Incomplete) Grade

Provide the following information for students who were assigned IC grade (Attach an IC form for each student)

Student ID	Student Name	Reason for IC grade	Expected date of removal of IC grade

3. Result Analysi	vsis	Anal	lt	Resu	3.
-------------------	------	------	----	------	----

ndicate special factors, if any, affecting the results), add recommendations, if needed.	

D. COURSE EVALUATION

1. Students Evaluation of the Quality of the Course

Date of Survey:	Number of Participants:	Percent Particip	0	Evaluation Result:		
Stu	dents Feedback	Course Coordinator/Instructor Comments/Response				
Strengths:						
•						
•						
Areas for improvements						
•						
•						
Suggestions for Improve	ement:					
•						
•						



2. Students Evaluation of the Quality of the Textbook

Date of Survey:	Number of		Percentage		Evaluatio	n Result:
*	Participants:	<u> P</u>	Participati			ator/Instructor
Studen	nts Feedback			20	Comments	
Strengths:						
•						
Areas for improvement:						
•						
•						
Suggestions for Improvement	ent:					
•						
Recommendations:						
Recommendations:						
E OHALITY IMDDO	VENDENT (NCA	A A DE	OUIDE	MENT	a)	
E. QUALITY IMPRO 1. Teaching Strategies	VENENT (NCA	AA KE	QUIRE	MENI	3)	
1. Teaching Strategies			-			
DI 175 11	G		e They		ficulties	
Planned Teachin	g Strategies		mented?	I		Suggested Action
		Yes	No			
		<u> </u>	ļ	ļ		
			<u> </u>			
2 Anticities/Assessment	Mathada					
2. Activities/Assessment	Wiethods					
			e They		ficulties	
Activities/Planned Ass	essment Methods		mented?	_	enced (if any)	Suggested Action
		Yes	No	ın ımp	lementation	
		ļ				
3. Verification of Credibi	lity of Students' Res	ults			·	
Meth	hod(s) of Verificat	tion			C	onclusions



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4.	Oth	ner Course Evaluations							
(e.	g., l	Evaluations by faculty, progran	n leaders, peer review	ers, others)	*				
F	Eval	uation method :		Date:					
		Evaluator(s) Comm	ents	Course	Coordin	ator/In	structo	r Comn	nents/Response
S	tre	ngths:							
•									
	res	as for improvement:							
•		is for improvement.							
•									
S	ugg	gestions for Improvement:							
•									
* /	\	separate table for each evaluat	ion						
		ommendations:	1011						
۱ ^۲	\UU	ommendations.							
_									
5.	Dif	ficulties and Challenges							
	Dif	ficulties and Challenges	Conseq	uences			Ac	ctions 7	Taken
A	\dr	ninistrative Issues							
I	Lea	rning Resources							
		<u> </u>							
I	- Tac	ilities							
	ac	mues			1				
ļ									
. F	rev	ious course report recomme	ndations						
#	R	Recommendations	Actions Taken		Resul	ts		Comn	nents
I	·. (COURSE IMPROVEME	ENT PLAN						
Ā	\ct	ion Plan for Next Semest	ter/Year						
	#	Recommendations	Actions	_	onsible		Ti	me	Needed
				Perso	n		Start	End	Support



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CRF4. FIELD EXPERIENCE COVER PAGE

Academic Year:	
Course Code:	
V VI	
Course Name:	
Department:	
follege:	

CHECKLIST

#	Item Name	Included Yes ✓ / No	Reasons if not Included
1	Filed Experience Specifications (FES)*		
2	Filed Experience Report (FER)*		
3	Attachments of the FER		
	a. Student Survey		
	b. Visitation Report		
	c. Other Evaluation Surveys, if any		
3	Student Outcome Assessment Report		
4	Sample of Student Final Report	□ Best	
		☐ Average	
		□ Worst	

^{*}According to the provided template

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CRF5. FIELD EXPERIENCE SPECIFICATIONS

Cot	ırse Title:			
Cot	ırse Code:			
Dep	partment: Click or tap her	e to enter text.		
	lege: Click or tap here to		te: Click or tap t	to enter a date.
	-			
		CHECKLIST	Γ	
#	Item 1		Completed? Yes ✓ / No	Reasons if not Complete
A	Filed Experience Identific	cation		
В	Learning Outcomes and T	Training & Assessment		
	Methods			
C	Field Experience Admini	stration		
D	Training Quality Evaluati	on		
Prej	pared by			
Cou	rse Instructor/Coordinat	or:	Signa	ture:
			Date:	
_	Approval Data			
	Council / Committee			
	Reference No.			

Date



Field Experience Specifications

Course Title:	
Course Code:	
Program:	
Department:	
College:	
Institution:	











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B. Learning Outcomes, and Training and Assessment Methods	41
1. Field Experience Learning Outcomes	41
2. Alignment of Learning Outcomes with Training and Assessment Method	ls/ Activities 41
3. Field Experience Learning Outcomes Assessment	42
C. Field Experience Administration	43
1. Field Experience Locations	43
2. Supervisory Staff	43
3. Responsibilities	43
4. Field Experience Implementation	44
5. Safety and Risk Management	44
D. Training Quality Evaluation	45

A. Field Experience Identification

- 1. Credit hours:
- 2. Level/year at which this course is offered:
- 3. Dates and times allocation of field experience activities.
 - Number of weeks: (....) week
 - Number of days: (....) day
 - Number of hours: (....) hour
- 4. Pre-requisites to join field experience (if any):

B. Learning Outcomes, and Training and Assessment Methods

1. Field Experience Learning Outcomes

	CLOs					
1	Knowledge and Understanding					
1.1						
1.2						
1.3						
1						
2	Skills:					
2.1						
2.2						
2.3						
2						
3	Values:					
3.1						
3.2						
3.3						
3						

2. Alignment of Learning Outcomes with Training Activities and Assessment Methods

Code	Learning Outcomes	Training Methods/Activities	Assessment Methods		
1.0	Knowledge and Understanding				
1.1					
1.2					
2.0	Skills				



Code	Learning Outcomes	Training Methods/Activities	Assessment Methods
2.1			
2.2			
3.0	Values		
3.1			
3.2			

3. Field Experience Learning Outcomes Assessment

a. Students Assessment Timetable

#	Assessment task*	Assessment timing (Week)	Percentage of Total Assessment Score
1			
2			
3			
4			
5			
6			
7			
8			

^{*}Assessment task (i.e., Practical test, oral test, presentation, group project, essay, etc.)

b. Assessment Responsibilities

م	Category	Assessment Responsibility
1	Teaching Staff	
2	Field Supervisor	
3	Others (specify)	



C. Field Experience Administration

1. Field Experience Locations

a. Field Experience Locations Requirements

Suggested Field Experience Locations	General Requirements*	Special Requirements**

^{*}Ex: provides information technology ,equipment ,laboratories ,halls ,housing ,learning sources ,clinics etc.

b.	Decision	-making ı	orocedures	for ic	dentifying	appropriate	locations	for f	ïeld ex	zperience
~ •						abbrobries				

2. Supervisory Staff

a. Selection of Supervisory Staff

Selection Items	Field Supervisor	Teaching Staff
Qualifications		
Selection Criteria		

b. Qualification and Training of Supervisory Staff

(Including the procedures and activities used to qualify and train the supervisory staff on supervising operations, implementing training activities, the follow-up and evaluation of students, etc.)

3. Responsibilities

a. Field Experience Flowchart for Responsibility

Including units, departments, and committees responsible for field experience, as evidenced by the relations between them.



^{**}Ex: Criteria of the training institution or related to the specialization, such as: safety standards, dealing with patients in medical specialties, etc.

b. Distribution of Responsibilities for Field Experience Activities

Activity	Department or College	Teaching Staff	Student	Training Organization	Field Supervisor
Selection of a field					
experience site					
Selection of supervisory staff					
Provision of the required equipment					
Provision of learning resources					
Ensuring the safety of the site					
Commuting to and from the field experience site					
Provision of support and guidance					
Implementation of training activities (duties, reports,					
projects,) Follow up on student training activities					
Adjusting attendance and leave					
Assessment of learning outcomes					
Evaluating the quality of field experience					
Others (specify)					

4. Field	Experience .	lmp	lement	tai	tion
-----------------	--------------	-----	--------	-----	------

a.	Super	vision	ana	rono	w-up	Mechanism	1
----	-------	--------	-----	------	------	-----------	---

b	. Student Support and Guidance Activities
Γ	
I	

5. Safety and Risk Management

Potential Risks	Safety Actions	Risk Management Procedures



D. Training Quality Evaluation

Evaluation Areas/Issues	Evaluators	Evaluation Methods

Evaluation areas (e.g., Effectiveness of Training and assessment, Extent of achievement of course learning outcomes, Quality of learning resources, etc.)

Evaluators (Students, Supervisory Staff, Program Leaders, Peer Reviewer, Others (specify)

Assessment Methods (Direct, Indirect)

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CRF6. FIELD EXPERIENCE REPORT (FER)

	oartment: Click or tap here to enter text.		
		te: Click or tap t	to enter a date.
	CHECKLIS'	n .	
#	Item Name	Completed? Yes ✓ / No	Reasons if not Completed
A	Field Experience Identification		
В	Training Delivery and Assessment		
C	Student Results		
D	Field Experience Learning Outcomes		
E	Field Experience Quality Evaluation		
F	Difficulties and Challenges		
G	Field Experience Improvement Plan		
	repared by ourse Instructor/Coordinator:	Sign	nature:
		Dat	te:
R	eviewed by		
C	hair of Department Quality Assurance Committee	:	
Si	gnature: Date:		



Field Experience Report

Course Title:	
Course Code:	
Program:	
Department:	
College:	
Institution:	











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B. Training Delivery and Assessment:	49
1.Training Methods and Activities:	
2. Assessment Methods.	49
3. Differences in evaluation.	49
4. Verification of Credibility of Students' Results	50
5. Recommendations	50
C. Student Results	50
1. Distribution of Grades.	50
2. Comment on Student Results	50
3.Recommendations	50
D. Field Experience Learning Outcomes	50
1. Learning Outcomes Assessment Results	50
2. Recommendations	5
E. Field Experience Quality Evaluation.	51
1. Students Evaluation of the Quality of Field Experience	5
2. Supervisory Staff	5
3. Other Evaluations.	52
4.Recommendations:	52
F. Difficulties and Challenges	52
G. Field Experience Improvement Plan	53
1. Field Experience Improvement Actions	53
2. Action Plan for Next Semester/Year	53

				Number of Students		
No	Supervisor(s)	Loca	tion	Starting the course	Completing the course	
ates an	d timing (duration) of field	d experienc	e activit	ies implementation	1:	
Dates:						
Timing	g (Duration):					
Trair	ning Delivery and Asse	ssment				
	g Methods and Activities					
			e They	Difficulties		
Trai	ning Methods and Activities		mented?	Experienced	Suggested Actio	
0	Yes	No	in Implementation (if any)			
•••••						
Assessn	nent Methods					
11000001		Were	They	Difficulties		
Pla	nned Assessment Methods	_	nented?	Experienced in	Suggested Actio	
		Yes	No	Implementation (if any)		
				·		
••••••					·	
					·	
					·	
	nces in Evaluation					
Difforo	loog in Hamiliotian					

4. Verification of Credibility of Stud	lents' Results
--	----------------

Method(s) of Verification	Conclusions

5. Recommendations

C. Student Results

1. Distribution of Grades

	Grades						Status Distributions								
	A+	A	B+	В	C+	С	D+	D	F	Denied Entry	In Progress	Incomplete	Pass	Fail	Withdrawn
Number of Students															
Percentage															

2. Comment on Student Results

(including special factors (if any) affecting the results)

3. Recommendations

D. Field Experience Learning Outcomes

1. Learning Outcomes Assessment Results

learning Outcomes		PLOs Assessment Code Methods		Assessment Results		Comment on
	(CLOs)		Methods	Target Level/ Criterion for Success	Actual Level	Assessment Results
1	Knowledge and Understand	ling				
1.1						
1.2						
1.3						
1					+	
2	Skills:				•	
2.1						

2.3 2 3 Values: 3.1 3.2 3.3 3 2. Recommendations	Comment on Assessment Results
2.2	
2 3 Values: 3.1 3.2 3.3 3 2. Recommendations	
3 Values: 3.1 3.2 3.3 3 2. Recommendations	
3.1 3.2 3.3 3 2. Recommendations	
3.1 3.2 3.3 3 2. Recommendations E. Field Experience Quality Evaluation	_
3.3 3 2. Recommendations	
3 2. Recommendations	
2. Recommendations	
1. Students Evaluation of the Quality of Field Experience Number of Percentage of I	

Date of Survey:	Number of Participants:	Percent Particij		Evaluation Result:	
Students Feedback			Course Coordinator/Instructor Comments/Response		
Strengths:					
•					
•					
•					
Areas for improvement:					
•					
•					
Suggestions for Improver	nent:				
•					
•					
•					

2. Supervisory Staff
(Including Field Supervisors, Supervising Teaching Staff)

Evaluation method:	Date:	Number of Participants:			
Supervisory Staff Feedback			Course Coordinator/Instructor Comments/Response		
Strengths:					
•					
•					
•					
Areas for improvement:					
•					

•	
Suggestions for Improvement:	
•	
•	
•	

3. Other Evaluations

Ex. Evaluation by program administrators, peer reviewers, independent reviewers, program advisory committee, Others (specify)

Evaluation method:	Date:
Evaluator(s) Comments	Course Coordinator/Instructor Comments/Response
Strengths:	
•	
•	
Areas for improvement:	
•	
•	
Suggestions for Improvement:	
•	
•	

^{*} Add separate table for each evaluation

4. Recommendation	ns
-------------------	----

F. Difficulties and Challenges

Difficulties and Challenges	Consequences	Actions Taken						
Administrative Issues*								
Supervision **								
Students								

^{*} Include administrative Issues, implementation times (Duration) and locations, learning resources, facilities and equipment, etc.

^{**} Include field supervisors from inside and outside the program



^{*} Add separate table for each evaluation

G. Field Experience Improvement Plan 1. Field Experience Improvement Actions

Recommended Actions	Actions Taken	Results	Comments					
1.1 Previous Report	1.1 Previous Report Recommendations							
2.2 Other Improvem	ent Actions*							

^{*} The developmental measures taken during Training and not included in the development plan of it.

2. Action Plan for Next Semester/Year

		Responsibility	Time		Needed	
Recommendations	Actions	For Implementation	Start	End	Support	
1.						
2.						
3.						

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Appendix B: Annual Program File Templates



جامعة الملك فهد للبترول والمعادن عمادة التطوير الأكاديمي مركز التقويم الأكاديمي

APF1: ANNUAL PROGRAM FILE COVER PAGE

Academic Year:
Program Code:
Program Name:
Degree Title:
Department:
College:
Location:

PROGRAM FILE CHECKLIST

#	Item Name	Included Yes ✓ / No	Reasons if not Included
1	Program Specifications (PS)*		
2	Attachments of PS*		
3	Annual Program Report (APR)*		
4	Attachments of APR*		
5	Course Files' Summary Report*	1 st Term: □	
	separate report for each term including the summer	2 nd Term: □	
	session (3 rd Term)	3 rd Term: □	
6	Status report* on: 1- Program Revision 2- Program Accreditation 3- Industrial Advisory Committee (department level)		
7	Rs and ARs Progress Report**		
8	KPIs Analysis Report		

^{*}According to the provided template

 $[\]hbox{**Rs: Recommendations, ARs: Action Recommendations}$

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APF2. PROGRAM SPECIFICATIONS

Program Specifications

Program Name:	
Qualification Level:	
Department:	
College:	
Institution	



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Content

- A. Program Identification and General Information
- B. Mission, Goals, and Learning Outcomes
- C. Curriculum
- **D. Student Admission and Support**
- E. Teaching and Administrative Staff
- F. Learning Resources, Facilities, and Equipment
- **G. Program Management and Regulations**
- H. Program Quality Assurance
- I. Specification Approval Data

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A. Program Identification and Gener	ai informatio	n			
1. Program Main Location:					
2. Branches Offering the Program:					
3. Reasons for Establishing the Program:					
(Economic, social, cultural, and technological reaso	ons, and national n	eeds and development, etc.)			
4. Total Credit Hours for Completing the	Drogram: (,			
4. Total Credit Hours for Completing the	i rogram. (•••••			
5. Professional Occupations/Jobs:					
6. Major Tracks/Pathways (if any):					
Major track/pathway	Credit hours	Professional Occupations/Jobs			
	(For each track)	(For each track)			
1. 2. 3.					
3.					
4.					
7. Intermediate Exit Points/Awarded Degr	ee (if any):				
Intermediate exit points/awarded degree	Credit hours				
1.					
2.					
3.	1				



B. Mission, Goals, and Learning Outcomes
1. Program Mission:
2. Program Goals/Educational Objectives:
3. Relationship between Program Mission and Goals/Educational Objectives and the
Mission and Goals of the Institution/College.
4. Graduate Attributes:
5.Program learning Outcomes*
Knowledge and Understanding
K1
K2
K3
K
Skills
S1
S2
S3
S
Values
V1
V2
V3
V
* Add a table for each track and exit Point (if any)

^{6.} Mapping Program Learning Outcomes to Goals/Educational Objectives

	Program Learning Outcomes											
Educational Objectives	Knowledge and understanding			Skills			Values					
	K1	K2	К3		S1	S2	S3		V1	V2		
EO1												
EO2												
•••												



C. Curriculum

1. Curriculum Structure

Program Structure	Required/ Elective	No. of courses	Credit Hours	Percentage
Institution Description onto	Required			
Institution Requirements	Elective			
College Deguinements	Required			
College Requirements	Elective			
Duaguam Daguinamanta	Required			
Program Requirements	Elective			
Capstone Course/Project				
Field Experience/ Internship				
Others				
Total				

^{*} Add a table for each track (if any)

2. Program Study Plan

Year	Term	Course Code	Course Title	Required or Elective	Pre-Requisite Courses	Credit Hours	Type of requirements (Institution, College or Department)
		ENGL 01-xx	Prep. English I (First Quarter)	Required	None	4	Institution
		ENGL 02-xx	Prep. English II (Second Quarter)	Required	None	4	Institution
		MATH 001	Prep. Math I	Required	None	4	Institution
L	Term1	PYP 001	Prep. Physical Science	Required	None	2	Institution
ean	1611111	PYP 003	Life Skills	Required	None	1	Institution
, Y		PE 001	Prep. Health and Physical Educ. I	Required	None	1	Institution
Preparatory Year			Total Credit Hours of Te			16	
rat		ENGL 03-xx	Prep. English III (Third Quarter)	Required	None	4	Institution
pa	Term 2	ENGL 04-xx	Prep. English IV (Fourth Quarter)	Required	None	4	Institution
Pre		MATH 002	Prep. Math II	Required	None	4	Institution
, ,		PYP 002	Prep. Computer Science	Required	None	1	Institution
		PYP 004	Prep. Eng. Technology	Required	None	1	Institution
		PE 002	Prep. Health and Physical Educ. II Total Credit Hours of T	Required	None	1	Institution
			15				
First Year Freshman)	Term 1		Total Credit Hours of T	erm 1			
irst						ļ	
F F						ļ	
	Term 2						
	Term 2					1	
						1	
			Total Credit Hours of T	erm 2			

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Year	Term	Course Code	Course Title	Required or Elective	Pre-Requisite Courses	Credit Hours	Type of requirements (Institution, College or Department)
	Term 1						
n 3							
Second Year (Sophomore)			Total Credit Hours of To	erm 1			
Soph							
<i>S</i> ₁							
	Term 2						
			Total Credit Hours of Te	 erm 2			
	Term 1						
ear r)			To LO IV H	1			
Third Year (Junior)			Total Credit Hours of To	erm 1			
T. (
	Term 2						
			Total Credit Hours of To	erm 2			
	Tamm 1						
ar	Term 1						
h Ye nior)			Total Credit Hours of To	erm 1			
Fourth Year (Senior)							
	Term 2					ļ	
		 	Total Credit Hours of To	l erm 2			
			Total Credit Hours				

^{*} Include additional levels if needed

3. Course Specifications

Insert hyperlink for all course specifications.

^{**} Add a table for each track (if any)

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4. Program learning Outcomes Mapping Matrix

Align the program learning outcomes with program courses, according to the following desired levels of performance (I = Introduced P = Practiced M = Mastered)

1 = Introduced P = Practiced M = Mastered)												
	Program Learning Outcomes											
Course code & No.	Knowledge and understanding				Skills				Values			
	K1	K2	К3		S1	S2	S3		V1	V2		

^{*} Add a table for each track (if any)

5. Teaching an	d learning str	ategies to achi	eve program lea	rning outcomes
Describe policies	teaching and le	earning strategies	learning experienc	e and learning acti

Describe policies, teaching and learning strategies, learning experience, and learning activities, including curricular and extra-curricular activities, to achieve the program learning outcomes.

6. Assessment Methods for program learning outcomes.

Describe assessment methods (Direct and Indirect) that can be used to measure achievement of program learning outcomes in every domain of learning.

D. Student Admission and Support:

1. Student Adn	ission Requiremen	ts		
1 Cuidanas an	d Owientation Duese	mana fan Mary Cir	J 4	
2. Guidance an	d Orientation Prog	rams for New Stu	dents	

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3. Student Counseling Services
(academic, career, psychological and social)
4. Special Support
(low achievers, disabled, gifted and talented)

E. Teaching and Administrative Staff

1. Needed Teaching and Administrative Staff

1. Needed Teaching and Administrative Stair						
Academic Rank	Specialty		Special	Required Numbers		
	General	Specific	Requirements / Skills (if any)	M	F	Т
Professors						
Associate Professors						
Assistant Professors						
Lecturers						
Teaching Assistants						
Technicians and Laboratory Assistants						
Administrative and Supportive Staff						
Others (specify)						

2.	Pro	fession	al De	evelo	pment
				, , СТО	DILLCIA

_	-	<u> </u>				~
2	1	()rien	tation	of New	Teaching	Staff

Describe briefly the process used for orientation of new, visiting and part-time teaching staff

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2.2 Professional Development for Teaching Staff

Describe briefly the plan and arrangements for academic and professional development of teaching staff (e.g., teaching & learning strategies, learning outcomes assessment, professional development, etc.)

F.	Learning	Resources,	Facilities.	and F	aninment
т. •	Laming	itcour cco,	1 acmides,	anu	quipilicit

F. Learning Resources, Facilities, and Equipment
1. Learning Resources. Mechanism for providing and quality assurance of learning resources (textbooks, references and other resource materials, including electronic and web-based resources, etc.)
2. Facilities and Equipment (Library, laboratories, medical facilities, classrooms, etc.).
3. Arrangements to Maintain a Healthy and Safe Environment (According to the nature of the program)

G. Program Management and Regulations

1. Program Management **1.1** Program Structure (including boards, councils, units, committees, etc.)

1.2 Stakeholders Involvement

Describe the representation and involvement of stakeholders in the program planning and development. (students, professional bodies, scientific societies, alumni, employers, etc.)

2. Program Regulations

Provide a list of related program regulations, including their link to online version: admission, study and exams, recruitment, appeals and complaint regulations, etc.)



H. Program Quality Assurance

1. Program Quality Assurance System
Provide online link to quality assurance manual
2. Program Quality Monitoring Procedures
3. Arrangements to Monitor Quality of Courses Taught by other Departments.
4. Arrangements Used to Ensure the Consistency between Main Campus and Branches
(including male and female sections)
5. Arrangements to Apply the Institutional Regulations Governing the Educational and
Research Partnerships (if any).
6. Assessment Plan for Program Learning Outcomes (PLOs), and Mechanisms of Using
its Results in the Development Processes

7. Program Evaluation Matrix

Evaluation Areas/Aspects	Evaluation Sources/References	Evaluation Methods	Evaluation Time

Evaluation Areas/Aspects (e.g., leadership, effectiveness of teaching & assessment, learning resources, partnerships, etc.)

Evaluation Sources (students, graduates, alumni, faculty, program leaders, administrative staff, employers, independent reviewers, and others (specify)

Evaluation Methods (e.g., Surveys, interviews, visits, etc.)

Evaluation Time (e.g., beginning of semesters, end of academic year, etc.)

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8. Program KPIs*

The period to achieve the target (.......) year.

No	KPIs Code	KPIs	Target	Measurement Methods	Measurement Time
1					
2					
3					
4					
5					
•••••					

^{*} including KPIs required by NCAAA

I. Specification Approval Data

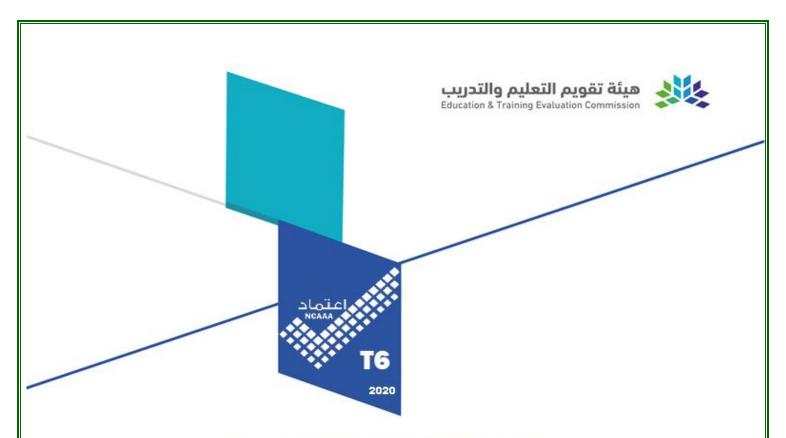
Council / Committee	
Reference No.	
Date	

APF3. ANNUAL PROGRAM REPORT

For this template we are using NCAAA template. The latest version can be found in their website below:

 $\underline{https://etec.gov.sa/en/products and services/NCAAA/Accreditation Programmatic/Pages/Forms.aspx}$

A copy is attached below.



Annual Program Report

Program Name:	
Qualification Level:	
Department:	
College:	
Institution:	
Academic Year:	
Main Location:	
Branches offering the	•
Program:	•
	•











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5. Analysis of Program Evaluation	75
G. Difficulties and Challenges Faced Program Management	

A. Implementation of Previous Action Plan

Considering the recommendations of previous year annual report, list the planned actions and their status.

Planned Actions	Responsibility of Action	Planned Completion	Leve Comp	el of oletion	If Not C	ompleted
1 fainted Actions	of Action D	Date	Completed	Not Completed	Reasons	Proposed Actions
1.						
2.						

B. Program Statistics

1. Students Statistics (in the year concerned)

No.	Item	Results
1	Number of students who started the program	
2	Number of students who graduated	
	Number of students who completed major tracks within the program (if applicable)	
3	a.	
3	b	
	c.	
4	a. Number of students who completed the program in the minimal time	
5	a. Percentage of students who completed the program in the minimal time (Completion rate)	
6	Number of students who completed an intermediate award specified as an early exit point (if any)	
7	Percentage of students who completed an intermediate award specified as an early exit point (if any)	
Com	nent on any special or unusual factors that might have affected the completion rates:	

Comment on any special of unusual factors that hight have affected the completion faces

2. Cohort Analysis of Current Graduate Batch

2. Conort P	111011	or our reme	Gradatte 2				
Student Catego	ories Years	Total cohort enrollment	Withdrawn	Retained till year end	Not passed	Passed	Passing rate
	M						
Three Years	F						
Ago	Total						
	M						
Two Years Ago	F						
Agu	Total						
	M						
Last Year	F						
	Total						
	M						
Current Year	F						
1001	Total						

Comments on the results:

*	add	more	rows	for	further	years	(if	needed)
---	-----	------	------	-----	---------	-------	-----	--------	---

3. Analysis of Program Statistics

(including strengths, areas for improvement, and priorities for improvement)

Strengths:	•	•	•	
Areas for Improvement:				
D.:	<u> </u>			
Priorities for Improvemen	L :			

C. Program Learning Outcomes Assessment

1. Program Learning Outcomes Assessment Results.

#	Program Learning Outcomes	Assessment Methods (Direct and Indirect)	Performance Target	Results
Kno	wledge and Understanding			
K1				
K2				
K				
Skill	ls			
S 1				
S2				
S				
Valu	ies			
V1				
V2				
V				
Con	nments on the Program Learning (Outcome Assessment re	esults.	

^{*} Include the results of measured learning outcomes during the year of the report according to the program plan for measuring learning outcomes

2. Analysis of Program Learning Outcomes Assessment

(including strengths, Areas for Improvement:, and priorities for improvement)

Strengths:			
Areas for Improvement:			

^{**} attach separate cohort analysis report for each branch

^{**} Attach a separate report on the program learning outcomes assessment results for male and female sections and for each branch (if any)

Teaching of Plant the courses / units tha	ourse Reports aned Courses / Un	nits taught during the academic year, i	ndicating the reasons and
t the courses / units that mpensating actions.	aned Courses / Until t were planned and not a		ndicating the reasons and
Teaching of Plant the courses / units that mpensating actions.	aned Courses / Until t were planned and not a		ndicating the reasons and
t the courses / units than the pensating actions.	t were planned and not		ndicating the reasons and
	Units/Topics		
		Reasons	Compensating Actions
			<u> </u>
Courses with V	wiations		
Courses with Warked		t are stated in the course reports, in	ncluding: (completion rate o
		ons for these variations and action	
Course Name	variation	Reasons for variation	Actions taken
&Code	, 20072022	110450115 201 (411401011	12002000 00000
D 14 A 1	- f C D	_	
	of Course Reports s for Improvement:, and	s I priorities for improvement)	
trengths:	, , , , , , , , , , , , , , , , , , ,	T	
roos for Improvement	ont.		
areas for Improveme			
Priorities for Improv	ement:		
. Program Activ	itios		
Student Counsel	ing and Support		
Activities Impleme	ented	Brief Description	on [*]

Comment on Student Counseling and Support **					

2. Professional Development Activities for Faculty and Other Staff

Activities Implemented	Brief Description*			
	-			
Comment on Professional Development Activities for Faculty and Other Staff **				

^{*} including action time, number of participants, results and any other statistics.

** including performance evaluation on these activities

3. Research and Innovation

Activities Implemented	Brief Description*
	. 22
Comment on Research and	Innovation

^{*} including action time, number of participants, results and any other statistics.

** including performance evaluation on these activities

4. Community Partnership

Activities Implemented	Brief Description*

^{*} including action time, number of participants, results and any other statistics.

^{**} including performance evaluation on these activities

Commen	t on Community Partnersl	hin **					
	VIII	<u>P</u>					
* ' 1 . J:							
	including action time, number of participants, results and any other statistics. * including performance evaluation on these activities						
	-						
	sis of Program Activiti		imn	rovement)			
Strength:	trengths, Areas for Improvements:	nt:, and priorities for	шр	orovement)			
Areas for	Improvement:						
, 1 11 ca 5 101							
D : :::	6 T						
Priorities	s for Improvement:						
F. Progr	am Evaluation						
1. Evalua	ation of Courses						
Course		Student		Other	Developmental		
Code	Course Title	Evaluation (Yes-No)	E	(specify)	Recommendations		
		(1es-110)		(specify)			
			 				
2. Studer	nts Evaluation of Prog	ram Quality					
Evaluation	n Date :			Number of Pa	rticipants:		
	Students Feedback Program Response						
Strengths	Strengths:						

Areas for Im Suggestions f				1		
• Suggestions f	provement::					
Suggestions f						
	or improveme	 nt:				
•						
•						
•						
Attach report	on the students	evaluation of progr	am quality			
B. Other Eve e.g. Evaluation lumni, and em	ns by independe	ent reviewer, progr	am advisor	y committee, an	d stakeholders (e.g.,	faculty member
Evaluation m	nethod:	Date:			Number of Partici	pants :
	Summary of I	Evaluator Review			Program Respon	nse
Strengths:						
•						
•						
Points for Im	provements::					
•						
Suggestions f	for improveme	nt				
•	•					
•						
Attach indepe	endent reviewer'	s report and stakeh	olders' surv	ey reports (if an	ny)	
		dicators (KPI key performance in		cluding the key	performance indicate	ors required by the
		Accreditation and e				
No	KPI	Target Benchmark	Actual Value	Internal Benchmark	Analysis	New Target Benchmark
1						
2						
3				†		
3 4						
3						

Priorities for Improvement:	

G. Difficulties and Challenges Faced Program Management

Difficulties and Challenges	Implications on the Program	Actions Taken

^{*}Internal and external difficulties and challenges

H. Program Improvement Plan

No.	Priorities for			Da	ite	Achievement	Target Benchmark
110.	Improvement	Actions	Responsibility	Start	End	Indicators	Benchmark
1							
2							
3							
4							
5							
6							

I. Report Approving Authority

1 11 0	
Council / Committee	
Reference No.	
Date	

J. Attachments:

- A separate cohort analysis report for male and female sections and for each branch
- A report on the program learning outcomes assessment results for male and female sections and for each branch (if any)
- A report on the students evaluation of program quality
- Independent reviewer's report and other survey reports (if any)
- Attach KPIs detailed report



APF4 - SUMMARY REPORT OF	COURSE FILES				
Term					
1. Course Files' Statistics Fotal number of courses offered in the concerned term:					
Status Number of Courses Percentage					
Submitted and Completed					
Submitted but not Completed (CF missing one or more items)					
Submitted With Variations *					
Not submitted					

2. The Status of All Program Course Files offered in the concerned term

#	Course Code	Status	Justification and Action Taken (need only for status: "submitted but not completed", and "not submitted")
1		Choose an item.	
2		Choose an item.	
•••		Choose an item.	

^{*}Variations mean any course where passing rates, grade distribution, or trends are significantly skewed, high or low results, or departed from policies on grades or assessments. If the variation from the course specifications with respect to topics to be covered is 25% or more, the course status should be "Submitted with Variations".



APF5. PROGRAM STATUS REPORT

Academic Year Enter concerned year, ex, 2018/2019

1. Program Revision

1. Trogram Revision	
Last semester of program approval	Only use 3 digits, ex. 182
(from the University Council)	
Planned/Actual start semester of the revision process	Only use 3 digits, ex. 182
Targeted semester of approval declared by the college	Only use 3 digits, ex. 182
Revision progress	Choose an item.
Comments, if any:	

2. Program Accreditation

Status	Choose an item.
Accrediting Body	Choose an item. , specify if you selected other:
Accreditation Period (if accredited)	Ex, 2015-2022, 2018-2024
Accreditation/Re-Accreditation Progress	Choose an item.
Comments, if any:	

3. Industrial Advisory Committee

IAC Members Sorted by Date Joined				
S#	Name	Affiliation	Date joined	
1				
2				

Number of meetings conducted in the concerned year	Click here to enter text.				
Major Activities and Recommendations:					



APF6. PROGRESS REPORT ON ACCREDITATION RECOMMENDATIONS

Select R or AR # Enter R or AR Number

(R: Recommendations jinstitutional review team					on R ecommendat	ions from the
1. College:						
2. Program:						
3. Accrediting Body			n.			
Specify if you select	ed Othe	er:				
4. Statement of the Se						
Write the statement of the	Recom	mendat	ion or Action	Recommendation	on	
5. Action Plan for Im (if it is new R or AR, you Exe. Unit).			•		Task, Start and	d End dates,
Task	Start Date	End Date	Execution Unit	Status	Evidence if completed	Comments
1.				Choose an item.		
2.				Choose an item.		
•••	•••			•••		
	of pers	on resp	onsible for A	ction Plan	tion Plan.	



Appendix C: Annual College File Templates



ACF1: COLLEGE FILE COVER PAGE

Academic Year:	
College Code:	
College Name:	

COLLEGE FILE CHECKLIST

#	Item Name	Included Yes ✓ / No	Reasons if not Included
1	Annual College Report (ACR)*		
2	Status Report on Accreditation Recommendations *		
3	Ten Years Projected Plan of Assessment & Accreditation*		
4	Student Outcome Assessment Plan*		
5	College KPIs Report		

^{*}According to the provided template All the APFs should be attached

King Fahd University of Petroleum & Minerals Deanship of Academic Development

Academic Assessment Center



جامعة الملك فهد للبترول والمعادن عمادة التطوير الأكاديمي مركز التقويم الأكاديمي

ACF2. ANNUAL COLLEGE REPORT (ACR)

The college is required to annually complete an ACR. The ACR is to document a complete academic year, and shall prepared by the College Quality and Accreditation Office (CQAO). The report summarizes the achievements, strengths, and areas of improvement of the college and its programs, and used as the basis for any modifications or changes in the college programs.

Academic Year:	
College Code:	
1. College Name:	Names and positions of persons completing the ACR
	1-
2. College Dean:	2-
	3-
3. Location: Choose an item.	

ACR CHECKLIST

#	Item Name	Completed Yes ✓ / No	Reasons if not completed
A	College Goals & Objectives		
В	College Management & Administration		
С	Statistical Information		
D	Status Reports Summary		
Е	Course Files Summary		
F	Student Outcomes Assessment Summary		
G	College Evaluation Summary		
Н	College KPIs		
I	Recommendations and Action Plans		



جامعة الملك فهد للبترول والمعادن عمادة التطوير الأكاديمي مركز التقويم الأكاديمي

A. College Goals & Objectives

1. Alignment with KFUPM Goals and achievements

No.	KFUPM Goals	College goals	College Objectives	Achievements
1				
2				
••	•••	•••	•••	•••

2. Initiatives towards achieving the goals

	College Goal	Initiatives	Status
1			
2			
•••			

B. Co	B. College Management and Administration					
No.	List difficulties (if any) encountered in management of the College.	Impact of difficulties on the achievement of the college objectives.	Proposed action to avoid future difficulties in response.			
1						
2						
•••						

King Fahd University of Petroleum & Minerals

Deanship of Academic Development Academic Assessment Center



جامعة الملك فهد للبترول والمعادن عمادة التطوير الأكاديمي مركز التقويم الأكاديمي

C. Statistical Information		
Departments/Programs	Number of Students who started in the year concerned	Number of Students who completed in the year concerned
Department 1		
1-		
2-		
Department 2		
1-		
2-		
Department n		

_	~	_	. ~	
D.	Status	Renor	rte St	ımmarv

1- Status of the College Advisory Committee

	CAC Members Sorted by Date Joined						
S#	Name	Affiliation	Date joined				
1							
2							
3							

Number of meetings conducted in the concerned year	Click here to enter text.
Major Activities and Recommendations:	

King Fahd University of Petroleum & Minerals

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Departments/Programs	Accreditation Status	Revision Status	IAC Status (Dept. Level)
Department 1			No. of meetings in the concerned year
1-	Choose an item.	Choose an item.	
2-	Choose an item.	Choose an item.	
	Choose an item.	Choose an item.	
Department 2			No. of meetings in the concerned year:
1-	Choose an item.	Choose an item.	
2-	Choose an item.	Choose an item.	
Department n			No. of meetings in the concerned year:

^{*}Current: within six years from the UB approval of the program; Under Revision: more than six years and started the revision; Not Current: six years past from the UB approval of the program without starting the revision process.



جامعة الملك فهد للبترول والمعادن عمادة التطوير الأكاديمي مركز التقويم الأكاديمي

E. Course Files Summary

1		Ollrca	$\mathbf{F}_{\mathbf{i}}$	امد،	Stat	tistics	
	I. (ourse	F1	ies	Stal	USUCS	

Denoutments/Ducquema	No. of	Not complete		Not Su	bmitted	With Significant Variations	
Departments/Programs	Courses	No.	%	No.	%	No.	%
Department 1							
1-							
2-							
Department 2							
1-							
2-							
Department n							
••••							

2. Analysis of Variations in the Offered Courses

Provide a summary on the courses with variations. For each course, indicate what was done to investigate, the reason for the variation, and what action was taken.

Variations mean any course where passing rates, grade distribution, or trends are significantly skewed, high or low results, or departed from policies on grades or assessments. This includes variations in topics coverage of more than 25% from the planned in the course specifications.

Department 1 - Program 1				
a. Course Code	Variation:			
Investigation undertaken				
Reason for variation				
Action taken (if required)				
Action taken (ii required)				

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جامعة الملك فهد للبترول والمعادن عمادة التطوير الأكاديمي مركز التقويم الأكاديمي

b. Course Code	Variation
Investigation undertaken	
Reason for variation	
Action taken (if required)	
Department 1 – Program 2	
a. Course Code	Variation
Investigation undertaken	
Reason for variation	
Action taken (if required)	
b. Course Code	Significant result or variation
Investigation undertaken	
Reason for variation	
Action taken (if required)	



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F. Student Outcomes Assessment Summary

	No. of PLOs	PLOs Planned for	Assessed PLOs		Not Attained PLOs*		Justification	Recommendations
Departments/Programs		Assessment in the Reporting Year	% ₁	PLO Codes	%2	PLO Codes	(If needed)	(If needed)
Department 1								
1-								
2-								
•••								
Department 2								
1-								
2-								
Department n								
••••								
College overall performance ₃								

^{*} The PLOs with target not achieved, if any

¹ Percentage calculated by dividing number of assessed PLOs over the number of PLOs planned for Assessment in the Reporting Year x 100

² Percentage calculated by dividing number of not attained PLOs over the number of assessed PLOs x 100

³ College overall performance is calculated by averaging programs results.

King Fahd University of Petroleum & Minerals

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G. College Evaluation Summary

1. Graduating Student Evaluations (surveys)

Attach survey reports for all programs.

Departments/Programs	date of survey	Response Rate	List important recommendations for improvement
Department 1			
1-			
2-			
Department 2			
1-			
2-			
Department n			

2. Other Evaluation (e.g. Evaluations by employers or other stakeholders, external review, etc.)

Attach review/survey report.

Departments/Programs	date of survey	Response Rate	List important recommendations for improvement
Department 1			
1-			
2-			
Department 2			
1-			
2-			
Department n			



جامعة الملك فهد للبترول والمعادن عمادة التطوير الأكاديمي مركز التقويم الأكاديمي

H. College KPIs

1. Strategic KPIs (Linked directly to the College goals)

KPI #	Goal Code	KPI	KPI Target Benchmark	KPI Actual Benchmark	KPI Internal Benchmarks	KPI External Benchmarks	KPI New Target Benchmark
1							
2							
3							
•••	•••	•••	•••	•••	•••	•••	•••

2. College Secondary KPIs (The list of College-Level KPIs) (a separate KPIs report should be attached)

KPI #	КРІ	KPI Target Benchmark	KPI Actual Benchmark	KPI Internal Benchmarks	KPI External Benchmarks	KPI New Target Benchmark
1						
2						
3						
••	•••	•••	•••	•••	•••	•••

Analysis and Recommendations						

I. Recommendations and Action Plans



جامعة الملك فهد للبترول والمعادن عمادة التطوير الأكاديمي مركز التقويم الأكاديمي

1- I	1- Progress on Implementation of Previous Year's Action Plans								
No.	Recommendation	Action Plan	Planned Completion Date	Person Responsible	Completed Yes ✓ / No	If Not Completed, Give Reasons			
1		1. 2. 							
2		1. 2.							

2- New Recommendations/Action Plans (From the previous sections list all Recommendations/Action Plans required to improve the college/programs indicating in each case the proposed completion date and the person responsible for carrying out that action. (**This may include the incomplete recommendations from previous years with new completion dates.**)

No.	Recommendation	Action Plan	Responsible Person	Start Date	Completion Date
1		1.			
		2.			
2		1.			
		2.			



ACF3. STATUS REPORT ON THE ACCREDITATION RECOMMENDATIONS

The colleges need to review and evaluate the progress reports of its programs regarding the recommendations and action recommendations that are raised from the self-assessment or the accrediting body as a result of the accreditation process.

ACR3-R: Status Report for Recommendations (From the accreditation evaluation team)

Dep	Department 1:						
Pro	Program 1:						
#	Statement	Progress Report Submission Status	Planned Completion Date	Response/Justification Received from the Responsible Unit	CAAC Evaluation		
1		Choose an item.			Status: Choose an item. Comments (if any):		
2		Choose an item.			Status: Choose an item. Comments (if any):		
3		Choose an item.			Status: Choose an item. Comments (if any):		
•••			•••				



جامعة الملك فهد للبترول والمعادن عمادة التطوير الأكاديمي مركز التقويم الأكاديمي

Department 1:

Program 2:

#	Statement	Progress Report Submission Status	Planned Completion Date	Response/Justification Received from the Responsible Unit	CAAC Evaluation
1		Choose an			Status: Choose an item.
		item.			Comments (if any):
2		Choose an			Status: Choose an item.
		item.			Comments (if any):

Department 2:

Program 1:

#	Statement	Progress Report Submission Status	Planned Completion Date	Response/Justification Received from the Responsible Unit	CAAC Evaluation
1		Choose an			Status: Choose an item.
		item.			Comments (if any):
2		Choose an			Status: Choose an item.
		item.			Comments (if any):
	•••				

• • •



Rs Statistics

Based on the evaluation of the progress reports on the accreditation-based recommendation you need to fill the following table for each program as well as for the college.

#	Status	Number	Percentage
1	Completed		
2	Progressing Well		
3	Not Progressing Well		
4	No Progress		
5	No Action Plan		
Ana	alysis and Recommendations		



$ACR3-AR: \ Status\ Report\ for\ Action\ Recommendations\ (\text{From the institutional review team during the self-assessment process})$

Dep	Department 1:						
Pro	gram 1:						
#	Statement	Progress Report Submission Status	Planned Completion Date	Response/Justification Received from the Responsible Unit	CAAC Evaluation		
1		Choose an item.			Status: Choose an item. Comments (if any):		
2		Choose an item.			Status: Choose an item. Comments (if any):		
3		Choose an item.			Status: Choose an item. Comments (if any):		



جامعة الملك فهد للبترول والمعادن عمادة التطوير الأكاديمي مركز التقويم الأكاديمي

Department 1:	

Program 2:

#	Statement	Progress Report Submission Status	Planned Completion Date	Response/Justification Received from the Responsible Unit	CAAC Evaluation
1		Choose an			Status: Choose an item.
		item.			Comments (if any):
2		Choose an			Status: Choose an item.
		item.			Comments (if any):

Department 2:

Program 1:

#	Statement	Progress Report Submission Status	Planned Completion Date	Response/Justification Received from the Responsible Unit	CAAC Evaluation
1		Choose an			Status: Choose an item.
		item.			Comments (if any):
2		Choose an			Status: Choose an item.
		item.			Comments (if any):

• • •



ARs Statistics

Based on the evaluation of the progress reports on the action recommendation you need to fill the following table for each program as well as for the college.

#	Status	Number	Percentage
1	Completed		
2	Progressing Well		
3	Not Progressing Well		
4	No Progress		
5	No Action Plan		
Ana	alysis and Recommendations		



ACF4. TEN YEARS PROJECTED PLAN FOR ASSESSMENT AND ACCREDITATION (SAMPLE)

(1)			# 5	Г										inata																<u> </u>			
COLLEGE	0E	v iii	Las	20	12-20	12	201	13-201	4	2014	1-2015	=		ojecteo -2016		1 for A 016-201			ditation and Assessment at KFUPM 2017-2018 2018-2019 2019-2020 2020-2021 2021-2022 2022-2023														
3	SYMBOL	edi Sod	o of	20.	12-20	13	201	13-201	4	2014	-2013	0	2015	-2010		10-201	. /		ERM	- 4	2010-20	019	20.	19-20.	20	202	0-20.	41	2021-2022		42	202	22-202
8	SX	Accreditin Body	Year of Last Accreditation	121	12	2	131	132	2 1	41	142	1	51	152	161	162	2	171	172	18	1 1	82	191	19	2	201	20	12	201	202	2	211	212
KFUPM (INSTITUTIONAL ACCREDITATION)	KFUPM	NCAAA	2010								0		Δ 🗆]●	A	-													T	0		Δ	□●
College of Engineering Sciences	CES															П	\neg												\Box				
Aerospace Engineering		ABET	2009			ı	0	Δ			A		•			Ħ				0	Δ	1	□●			A	•						
Civil Engineering		ABET	2009			ı	0	Δ			A		•			П				0	Δ	1	□●		Ī	A	•			\neg			
Chemical Engineering		ABET	2009			Ī	0	Δ			A		•			П				0	Δ	1	□●		Ī	A	•		\blacksquare				
Electrical Engineering		ABET	2009				0	Δ			A		•							0	Δ		□●		Γ	A	•				Г		
Mechanical Engineering		ABET	2009				0	Δ		. •	A		•							0	Δ		□●			A	•						
College of Applied Engineering	CAE																L								L								
Applied Aerospace Eng		ABET					0	Δ			A		•		L	ш	L			0	_		□●		L	A	•				L		
Applied Civil Eng		ABET	2009				0	Δ			A	-	•		L		L			0			□●		L	A	•				L		
Applied Chemical Eng		ABET	2009				0	Δ			A	-	•		L					0			□●			A	•				L		
Applied Electrical Eng		ABET	2009				0	Δ			A	L	•		<u> </u>	ш	L			0			□●			A	-						
Applied Mechanical Eng		ABET	2009				0	Δ	L	. •	A	L	•	_	<u> </u>	ш	l.			0	Δ		□●			A	•						
College of Petroleum Engg & Geosciences	CPG								L		\perp	L			\vdash	ш	L														L		
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College of Industrial Management	CIM							\dashv			\dashv					\vdash	H								-						-	-	
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Supply Chain Management (SCM)											\neg					П	ı					1											
Safety Technology						ŀ		\neg		\dashv	\dashv		1			П	ı																
Human Resource Management								\neg		_	7					П	ı																
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IR Submission of Interim Report to AAC by	December	2017			\ I	Submi	ssion	of Self	Assess	ment I	Report				A	Submis	ssion o	of Acen	editation	Repor	rt			ion C	ycle	ABI	ET .	6		Disc	continu	ned P	rogram



ACF5. ASSESSMENT PLAN OF PROGRAM-LEVEL STUDENT LEARNING OUTCOMES

The college needs to review and make sure that the Program-level student Learning Outcomes (PLOs) assessment plan of all its programs cover all PLOs at least twice per accreditation period. Also, to make sure that the actual assessment is in compliance with the assessment plan.

Academic Year:	
College Code:	
College Name:	

Domontos ou to/Duo ou ou o	Number	Assessment Semesters* (-)													
Departments/Programs	of PLOs	151	152	161	162	171	172	181	182	191	192	201	202	211	212
Department 1															
Program 1**	8	1,2	3,4	5,6	7,8	1,2									
Program 2															
Department 2															
Program 1															
Program 2															
Department n				•		•		•			•	•	•	•	

^{*}the assessment semesters are based on the program accreditation period, i.e. For NCAAA the accreditation period is seven years (14 semesters); for ABET, six years (12 semester); for AACSB, five years (10 semesters) and so on. So, the table can be changed accordingly.

^{**}example, this program has 8 PLOs, it is planned to assess PLOs 1, and 2 in semester 151 and so on.



Appendix D: Institutional Academic Quality Report



INSTITUTIONAL ACDEMIC QUALITY REPORT

Academic Year 20XX – 20XX

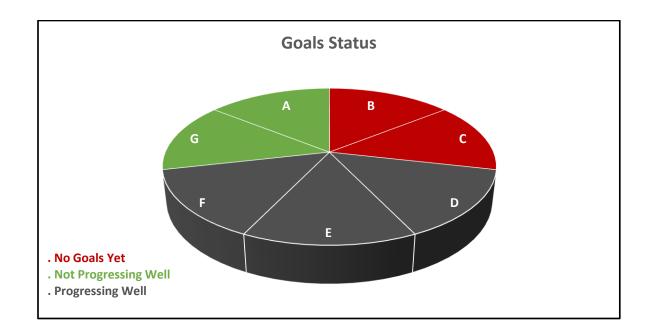




A. College Goals and Objectives

No.	College Name	Goals Status	AAC Comments
1		Choose an item.	
2			
3			
4			
5			
6			
7			

Status Chart:





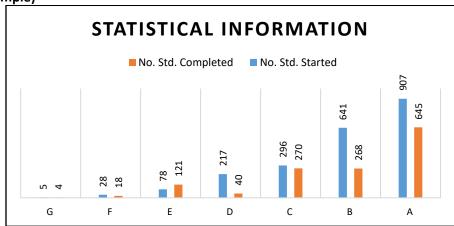
B. College Management and Administration

No.	College Name	Management Difficulties	Proposed Actions	AAC Comments
1				
2				
3				
4				

C. Statistical Information

No.	College Name	No. of Students started the concerned year	No. of Students completed the concerned year	AAC Comments
1				
2				
3				
4				
	Total			

Statistical Information Chart (Example)





D. Status Reports Summary

This table shows the status of <u>Accreditation</u>, <u>Currency</u> and <u>Industrial Advisory Committees</u> in all KFUPM colleges/programs.

No.	College	No. of CAC	No. of	No. of		rams credited		Programs Not Current		ith No etings	AAC Comments	
- 1.01	Name	meetings	Dept.	Prog.	No.	%	No.	%	No.	%		
1												
2												
3												
4												
5												
6												
7												
Total	•											
CAC:	CAC: College Advisory Committee. IAC: Industrial Advisory Committee.											

E. Course Files Summary

No.	College Name	No. of Courses	Not con	npleted	Not Sul	omitted		gnificant ations	College Input	AAC Comments
	Name	Courses	No.	%	No.	%	No.	%		
1										
2										
3										
4										
5										
6										
7										



F. Student Outcomes Assessment Summary

No.	Colleges Name	Accrediting body	Assessed PLOs	Not Achieved PLOs*	one or PLO	ms with more s Not eved	College Input	AAC Comments
			% 1	%2	No.	%		
1								
2								
3								
4								
5								
6								
7								

^{*} The PLOs with target not achieved, if any

G. College Evaluation Summary

No.	College Name	No. of Conducted	Type & date of	No. of Participants	No Cor	ms with iducted veys	College Input	AAC Comments
		Surveys	Surveys		No.	%		
1								
2								
3								
4								
5								
6								·
7								

¹ Calculated by dividing number of assessed PLOs of all college programs over the number of PLOs planned for Assessment in the Reporting Year x 100

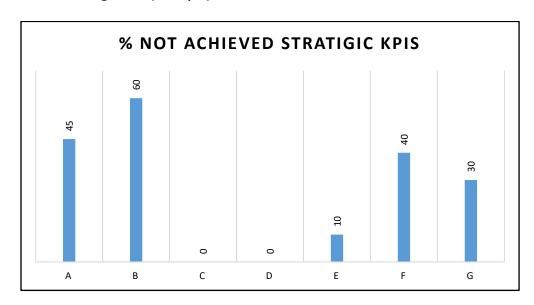
² Calculated by dividing number of not achieved PLOs of all college programs over the number of assessed PLOs x 100



H. College KPIs

	Strategic KPIs							
No.	College Name	No. of KPIs	% of Not Achieved KPIs	AAC Comments				
1								
2								
3								
4								
5								
6								
7								

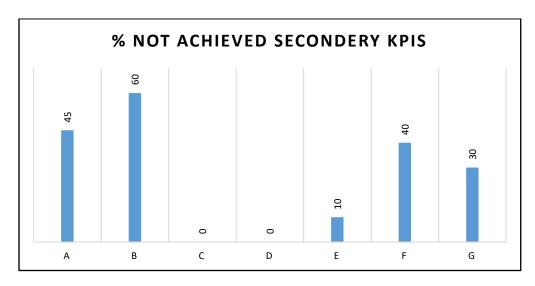
Chart of Percentage of Not Achieved Strategic KPIs (Example):





	Secondary KPIs							
No.	College Name	No. of KPIs	% of Not Achieved KPIs	AAC Comments				
1								
2								
3								
4								
5								
6								
7								

Chart of Percentage of Not Achieved Secondary KPIs:



Note: The Institutional KPIs report should to be attached.



I. Previous Year Recommendations and Action Plans

	College Recommendations (CRs)							
Na	College	No. of This Year	No. of Previous	CRs Not Progressing Well		AAC Comments		
No.	Name	Recomm.	Year Recomm.	No.	%	AAC Comments		
1								
2								
3								
4								
5								
6								
7								

	Programs Recommendations (PRs)							
	College			PRs Not Completed				
No.	Name		AAC Comments					
1								
2								
3								
4								
5								
6								
7			· · · · · · · · · · · · · · · · · · ·					