ATHEA

ASSOCIATION FOR TRANSNATIONAL
HIGHER EDUCATION ACCREDITATION

ACCREDITATION
SELF-EVALUATION MANUAL

Version 2.0

January 2017

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PART I: INTRODUCTION

Mission, Vision, and Values of ATHEA

Mission

The Association for Transnational Higher Education Accreditation (ATHEA) is a voluntary, non-governmental, membership association that is dedicated to quality assurance and improvement through accreditation via peer evaluation. Accreditation by ATHEA instils public confidence in the institutional mission, goals, performance, and resources through its rigorous accreditation standards and enforcement of those standards. ATHEA standards for accreditation are based on the European Standards and Guidelines for Quality Assurance (ESG) required for recognition by the European Quality Assurance Register in Higher Education (EQAR).

Vision

The Association for Transnational Higher Education Accreditation (ATHEA) aspires to be the preeminent resource for institutions of higher education striving to achieve excellence in fulfilling their missions. ATHEA intends, through voluntary assessment and adherence to high standards of student learning outcomes and operational behaviour, to assure higher education's publics that its accredited institutions are fulfilling their stated purposes and addressing the public's expectations.

Core Values

The Association for Transnational Higher Education Accreditation (ATHEA) is guided by these Core Values:

➢ Voluntary membership.

➢ Self-regulation and peer-review.

➢ A continuous and seamless relationship with member institutions to promote continuous self-evaluation and institutional improvement.

➢ Respect for the unique mission of each institution and evaluation within that context.

➢ Student learning and effective teaching.

> ➢ Transparency about the accreditation processes and the status held by each member institution.

> ➢ Commitment to the principles of cooperation, flexibility, and openness.

> ➢ Responsiveness to the needs of the higher education community and societal changes.

> ➢ Consideration of societal and institutional needs through attention to and emphasis on both improvement and compliance.

> ➢ Responsiveness to a diverse, dynamic, global higher education community that is continually evolving.

Scope of Accreditation

The Scope of Accreditation is to provide educational, accrediting, quality assurance and other services to its member institutions, degree/diploma granting post-secondary educational institutions offering higher education and located inside or outside the European area, including, but not limited to, the countries who are signatories of the Bologna Protocols.

Statement of Accreditation Philosophy

Organizational Purpose

ATHEA is a non-profit organization to promote the following activities:

(a) To provide educational, accrediting, quality assurance and other services to its member institutions, degree/diploma granting post-secondary educational institutions offering higher education and located inside or outside the European area, including, but not limited to, the countries who are signatories of the Bologna Protocols.

(b) To serve as an accrediting agency that is included on the European Quality Assurance Register for Higher Education. As such, ATHEA will conduct voluntary, non-governmental peer review and make decisions concerning the accreditation or pre-accreditation status of member institutions.

(c) To promote quality assurance and improvement through voluntary accreditation via peer evaluation and instil public confidence in its institutional members' missions, goals, performance, and resources through its rigorous accreditation standards and their enforcement.

(d) To initiate and sustain such training and research activities as may be consistent with the general purposes of ATHEA.

ATHEA's Accreditation Beliefs

ATHEA believes that accreditation must be mission-based, strategic planning driven, outcomes and competency centred, and based upon peer-review. Accreditation signifies that an institution has a purpose appropriate to higher education and has resources, programmes, and services sufficient to accomplish and sustain that purpose. Accreditation indicates that an institution maintains clearly specified educational objectives that are consistent with its mission and appropriate to the degrees it offers, and that it is successful in achieving its stated objectives.

Self-regulation through accreditation embodies a philosophy that a free people can and ought to govern themselves through a representative, flexible, and responsive system. Accordingly, accreditation is best accomplished through a voluntary association of educational institutions. Accreditation enhances educational quality throughout the region by improving the effectiveness of institutions and ensuring that institutions meet standards established by the higher education community, and serves as a common denominator of shared values and practices among the diverse institutions.

Both a process and a product, accreditation relies on integrity, thoughtful and principled judgment, rigorous application of requirements, and a context of trust. It provides an assessment of an institution's effectiveness in the fulfilment of its mission, its compliance with the requirements of its accrediting association, and its continuing efforts to enhance the quality of student learning and its programmes and services. Based upon reasoned judgment, the process stimulates evaluation and improvement, while providing a means of continuing accountability to constituents and the public. An intended outcome of accreditation is that the process leads to continuous enhancement and development of the institution, and serves as a mechanism of continuous improvement.

The product of accreditation is a public statement of an institution's continuing capacity to provide effective programmes and services based on agreed-upon requirements. The statement of an institution's accreditation status is also an affirmation of that institution's continuing commitment to the principles and philosophy of accreditation.

Accreditation supports the right of an institution to pursue its established educational mission; the right of faculty members to teach, investigate, and publish freely; and the right of students to access opportunities for learning and for the open exchange

of ideas. However, the exercise of these rights should not interfere with the overriding obligation of an institution to offer its students a sound education.

ATHEA would adhere to the following fundamental characteristics of accreditation:

- Participation in the accreditation process is voluntary and is an earned and renewable status.

- Member institutions develop, amend, and approve accreditation requirements through an open and transparent governance concept.

- The process of accreditation is representative, responsive, and appropriate to the types of institutions accredited.

- Accreditation is self-regulating.

- Accreditation requires institutional commitment and engagement.

- Accreditation is based upon a peer review process.

- Accreditation requires an institutional commitment to student learning and achievement.

- Accreditation acknowledges an institution's prerogative to articulate its mission within the recognized context of higher education and its responsibility to show that it is accomplishing its mission.

- Accreditation expects an institution to develop a balanced governing structure designed to promote institutional autonomy and flexibility of operation.

- Accreditation expects an institution to ensure that its programmes are complemented by support structures and resources that allow for the total growth and development of its students.

Privacy and Confidentiality of Accreditation Information

When an institution becomes a member of ATHEA, it agrees to the disclosure of its accreditation status, including disclosure of the extent to which its academic programs are in compliance with the THEA Standards and Expectations. The disclosure of this information assists external stakeholders, such as students, parents, employers, and the general public, in making appropriate educational decisions.

Much of the information provided to ATHEA during the accreditation process is confidential, and ATHEA makes every reasonable effort to protect that confidentiality. Some of the information provided to ATHEA by the member institutions will need to be publicly available as required by ATHEA bylaws.

Only site evaluators, staff, and THEA Board of Commissioners may review confidential institutional information. The THEA Board of Commissioners requires the aforementioned individuals to abide by this confidentiality requirement. They have to sign a Non-Disclosure Agreement (NDA).

ATHEA and the THEA Board of Commissioners make every reasonable effort to avoid conflicts of interest. All members of the evaluation team must sign a declaration form prior to commencing activities in order to declare any potential conflict of interest. Site evaluators are excluded from involvement in the accreditation process for institutions in which they have, or might foresee having, a professional or personal conflict of interest. Members of ATHEA Board of Directors and THEA Board of Commissioners are required to recuse themselves from discussions, deliberations, or decisions about their own institutions where a conflict of interest might exist.

Site evaluators understand their ethical responsibilities pertaining to conduct before, during, and after accreditation site visits. Matters pertaining to an accreditation site visit are not discussed in public and are treated confidentially.

THEA Board of Commissioners policy requires that each site evaluation member maintains the confidentiality of all accreditation materials (e.g., self-study, site visit reports, etc.). While such materials can be disseminated throughout the institution, as appropriate, they should not be shared with outside parties without the approval of the THEA Board of Commissioners.

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PART II: THE INSTITUTION ACCREDITATION PROCESS

Introduction to the Process

As part of the THEA accreditation process, it is necessary to produce an Accreditation Application. These documents will be reviewed and validated by a team of external reviewers. This manual is to be used to prepare the accreditation application. The completion of an application for an institution is required to receive THEA Accreditation status.

THEA recognizes, acknowledges, and respects the fact that institutions operate in differing educational, historical, cultural, and legal/regulatory environments. Consequently, each institution will have its own unique mission, goals and objectives, and organizational culture, all of which are reflected in the application.

Self-Evaluation Application

The application is used to document the institution's eligibility for the THEA accreditation. The key to preparing a good application is to provide accurate, complete, and well thought-out responses to all of the accreditation standards. Inaccurate, incomplete, or improperly formatted information may delay the accreditation process. Make sure that your responses are clear and address the relevant topics. At the same time, be succinct in the narrative statements that you provide. The quality of the content in the application is more important than the length of the document.

The application period must cover one full academic year; this should be the full academic year immediately preceding, and not including any portion of, the academic year in which the site visit takes place. For example, if the site visit is scheduled for the calendar year of 2016, use the preceding academic year (2014-2015 academic year) as the application year. For consistency purposes, an academic year should consist of one 12-month period.

A preliminary draft copy of the application must be submitted to THEA offices at least 120 days prior to the site visit. THEA staff will review the application for completeness and accuracy. Any missing information and inaccuracies will be communicated in writing to the institution, which will then revise its application accordingly to ensure that it is complete, addresses all accreditation standards, and is in the appropriate format with accurate tables. No explicit site visit travel arrangements will be made, and no site visits will be conducted until the THEA has received a complete and accurate application.

A complete and accurate application should be submitted to the THEA at least 60 days before the scheduled site visit. The application and all supporting materials must

be submitted electronically. Materials to be submitted: the completed application, the institution's catalogue(s) or bulletin(s) for the application year, and any other supporting information.

Application Organization and Format

The remainder of this section addresses the format of the application. It also provides a description of the information that you are to include. The application should consist of two volumes: Volume 1 for your narrative responses to the Accreditation Standards and for the required tables, and Volume 2 for the appendices to accommodate bulky items such as course syllabi, strategic planning documents, outcomes assessment plan, faculty vitae, faculty handbook, etc. A table of contents is required for each volume of the application. The application and all supporting materials must be written in English.

The application should be organized in the following manner:

Volume 1

Title Page

Table of Contents

The Institutional Background

Documentation that demonstrates compliance with the Accreditation Standards

Volume 2

Table of Contents

Appendices (Each appendix should have a separate cover page.)

Application Forms and Institutional Context

The following forms are required to proceed the institution's responses to the Accreditation Standards.

Title Page

Name of the institution	
Date founded	
Total graduates to date	
Institution's web address	
Date of submission	
Who prepared this document (list all members)	
Accreditation liaison:	
Position	
Department	
Postal address	
if different, physical address	
Email	
Phone	Office Mobile
Secondary liaison:	
Position	
Department	
Email	
Phone	Office Mobile

Institutional Background

The information in this section conveys a general profile of the institution and provides essential background information. This information is needed so that the THEA Board of Commissioners can understand your academic institution. Please attach any supporting documentation or location of such documentation (website URL) with this report following the final appendix.

1. **Institution History**. In one or two paragraphs, provide a brief history of the institution. If the history is stated in the institution's catalogue, provide the page numbers for the relevant section.

2. **Institutional Type.** Please indicate the type of institution relative to ownership.

Institutional Type	
Private not-for-profit	
Private for-profit	
Public	
Other	

If "Other", please explain and describe:

3. **Instructional Levels and Modality.** Please indicate the instructional levels and their programme delivery modality.

Institutional Levels and Delivery Methods		Delivery Methods			
		Traditional	Online	Joined	Other
Undergraduate/Bachelors (First Cycle)	Number of credit hours that constitute 2, 3, and 4 year degrees				
2-year					
3-year					
4-year					
Masters (Second Cycle)					
Doctorate (Third Cycle)					
Post Doctorate					
Other (i.e., Certificate Executive Training)					

If you selected "Other" as a delivery modality, please explain what you mean.

4. **Institutional Partners**. Provide a list of institutional partners, if any, that offer programmes or joint programmes through or with the institution that is seeking accreditation (the applicant institution).

Institutional Partner	Who is the Degree Issuing Institution(s)?			
	Applicant Institution	Partner Institution	Joined	Other (Examples: • Degree and Certificate • More than 2 institutions)
Name of the Partner Institution				
Name of the Partner Institution				
Name of the Partner Institution				
Name of the Partner Institution				
Name of the Partner Institution				
Name of the Partner Institution				
Name of the Partner Institution				
Name of the Partner Institution				

If you list "Other" in terms of who is issuing the degree, please explain.

5. **Organizational Structure.** Provide a brief description of the institution's organizational structure. **Include a copy of the institution's organizational chart.**

6. **Strategic Plan**. First, briefly describe your institution's strategic plan in a few paragraphs. Next, provide a copy of the institution's strategic plan with this application; insert it in Volume 2 at the end of the appendices and label it as **Appendix K**.

PART III: RESPONSE TO ACCREDITATION STANDARDS

THEA Self-Evaluation Requirements

Standard 1. Policy for Quality Assurance.

The institution has a policy for quality assurance that is made public and forms part of the institution's strategic management. Internal stakeholders develop and implement this strategy through appropriate structures and processes, while involving external stakeholders. This strategy should be included in the institution's strategic planning process. All transnational activities of the institution including joint programmes, partnership arrangements, branch campuses, etc. should also be included within the strategy for quality assurance.

The following Quality Assurance Objectives are associated with this expectation.

The institution's quality assurance policy:

- Addresses the entire institution.
- Is inclusive of all internal stakeholders.
- Preserves academic integrity and freedom and is vigilant against academic fraud
- Guards against intolerance and discrimination.
- Involves external stakeholders.
- Includes transnational activities.

Expectation 1.a.

What is the institution's current policy relative to this Standard and its associated Quality Assurance? In the narrative for this Standard state, describe, and discuss the institution's policy for quality assurance across the institution. Address each of the areas in a comprehensive Quality Assurance Plan associated with this standard.

Requirement for Accreditation Standard 1.a (Narrative response):

Provide a narrative response (up to 3000 words) of the institution's current policy and strategy for Quality Assurance for the entire institution. The response should include operational and academic strategies. Please use the text boxes for your narrative response.

Areas to be updated from the Candidacy Application:

1. What is the institution's understanding of Quality Assurance (QA) and explanation of your policy and strategy approach to QA?

>

2. The process used to develop the comprehensive QA plan; if still in the process what remains to be completed.

>

3. The date the plan was completed and first implemented.

>

4. The length of review cycle for the comprehensive plan.

>

Also, include for the Self-Evaluation:

5. How the faculty and students are involved in institutional governance.

>

6. How the institution is acting and promoting social responsibility and environmental sustainability.

>

Provide documentation or other related evidence, as **Appendix A** to this application, that the institution has a strategy for quality assurance and the strategy addresses the entire institution.

Please note that this specific Quality Assurance Planning is considered critical for accreditation and must be a *Meets Standard* for the self-evaluation and peer-review visit. The *Meets Standard* for this requirement is that ***the strategy is provided with evidence that the entire institution is included***.

If shortcomings relative to this specific *Quality Assurance Plan* were noted within the Candidacy Application, please plan to make the necessary improvements with the submission of this self-evaluation and for the peer-review visit for accreditation.

Expectation 1.b

What are the institution's current practices, policies, and/or procedures relative to this Standard and its associated Quality Objectives? Provide documentation and related evidence regarding how the institution conducts quality assurance.

Requirement for Accreditation Standard 1.b (Evidence of submission):

If a comprehensive quality assessment plan (outcomes assessment) is in place, please include it in **Appendix A** to this application including any:

   i.   Results of the implementation of the plan.

   ii.   Identified changes and improvements needed/made.

   iii.   Any realized outcomes (the effect of previous changes and improvements).

Provide evidence of faculty and student involvement in institutional governance.

Provide evidence that the institution is acting and promoting social responsibility and environmental sustainability.

Expectation 1.c

How does the institution determine if there is a shortcoming or quality gap between the institution's strategy and the outcomes currently obtained? State, describe, discuss, and provide documentation and evidence regarding the processes used to evaluate current actions relative to stated objectives.

Please use the text box for your narrative response (up to 1000 words).

Provide evidence that the described process has been and is implemented and producing results.

Expectation 1.d

What is the institution's approach for continuous improvement in order to address any identified shortcomings and close any quality gaps? State, describe, discuss, and provide documentation and evidence regarding the institution's approaches to continuous improvement and quality assurance relative to this Standard.

Please use the text box for your narrative response (up to 1000 words).

Standard 2. Design and Approval of Academic Programmes.

The institution has processes for the design and approval of their academic programmes. The programmes are designed so that they meet the objectives set for them, including the intended learning outcomes. The qualification resulting from a programme is clearly specified and communicated, and referred to the correct level of the national qualifications framework for higher education and, consequently, to the Framework for Qualifications of the European Higher Education Area.

The following Quality Assurance Objectives are associated with this standard.

The process for the design and approval of the institution's academic programmes should include:

- Programme objectives and intended learning outcomes.
- Involving faculty, students, and other key stakeholders such as employers in the design of the programmes.
- Reflecting the four purposes of higher education of the Council of Europe (preparation for sustainable employment; preparation for life as active citizens in democratic societies; personal development; the development and maintenance, through teaching, learning and research, of a broad, advanced knowledge base.)
- Facilitating smooth student progression.
- Defining the expected student workload and other learning expectations. (e.g. in ECTS)
- Applied experiential placement opportunities.
- Formal institutional review.

Expectation 2.a.

What is the institution's current strategy relative to this Standard and its associated Quality Objectives? State, describe, and discuss the institution's plan for its academic programmes. Address each of the Quality Assurance Objectives associated with this standard.

Provide a narrative response (up to 3000 words). State, describe, and discuss the institution's plan for its academic programmes. Please use the text boxes for your narrative response.

Areas to be updated from the Candidacy Application:

1. Describe the process of development of programmatic objective and intended learning outcomes.

2. Describe how the results of the implemented quality assurance plan has been used to make improvements at the institutional, unit, and program levels.

3. How do you integrate the results of the plan into the institution?

Also, include for the Self-Evaluation:

4. Describe how all programs meet European standards for that level.

5. Describe the process used to ensure that the institution is involved in academic innovation.

Expectation 2.b.

What are the institution's current practices, policies, and/or procedures relative to this Standard and its associated Quality Objectives? Provide documentation and related evidence regarding the institution's academic programmes.

List all academic programmes offered by the institution at the time of this application. Include the data for each programme as indicated.

For all data, use the current date for this application as the starting point to establish a frame of reference.

List each degree level separately.

Programmes offered by the applicant institution	Academic Programme Data				
List each degree level separately Location of the programme's description and content available to the public. http:// _____ and/or Name of Document: _____	Levels of degree or diploma (e.g., under-graduate, masters, doctorate)	Number of students currently enrolled in the programme	Number of graduates in the past 12 months	Year the programme was first offered	Year of the last programme review

(Add lines as needed.)

Provide documentation or other related evidence in **Appendix B** to this application that the ***institution's academic programmes have programme objectives and intended learning outcomes***. If the objectives and intended outcomes are in the completed quality assurance plan, provide the location in the plan.

Complete a table for each degree or diploma program offered.

Copy additional tables as needed.

Programme:	
Programmatic Objectives	Intended Learning Outcomes

Programme:	
Programmatic Objectives	Intended Learning Outcomes

Provide evidence of academic innovation at the institution.

Expectation 2.c.

How does the institution determine if there is a shortcoming or quality gap between the institution's strategy and the outcomes currently obtained for academic programmes? State, describe, discuss, and provide documentation and evidence regarding the processes used to evaluate current actions relative to stated objectives.

Please use the text box for your narrative response (up to 1000 words).

Expectation 2.d.

What is the institution's approach for continuous improvement in order to address any identified shortcomings and close any quality gaps in its academic programmes? State, describe, discuss, and provide documentation and evidence regarding the institution's approaches to continuous improvement and quality assurance relative to this Standard.

Please use the text box for your narrative response (up to 1000 words).

Standard 3. Student-Centred Learning, Teaching, and Assessment.

The institution's academic programmes are delivered in a way that encourages students to take an active role in creating the learning process, and the assessment of student learning reflects this approach.

The following Quality Assurance Objectives are associated with this expectation.

The institution's student-centred learning and teaching:

- Recognizes and respects student diversity and their needs, enabling flexible learning paths
- Considers different delivery modalities where appropriate.
- Uses a variety of pedagogical methods.
- Evaluates and adjusts the modes of delivery and pedagogical methods.
- Encourages a sense of autonomy in the learner.
- Ensures adequate guidance and support from the teacher.
- Promotes mutual respect within the learner-teacher relationship.
- Has procedures for addressing student complaints.

The institution's assessment strategy:

- Includes assessors familiar with existing testing and examination methods.
- Is published.
- Is focused on evaluating intended learning outcomes.
- Employs multiple assessment methods.
- Is consistent and fairly administered.
- Includes a formal appeals procedure.

Expectation 3.a.

What is the institution's current strategy relative to this Standard and its associated Quality Objectives? State, describe, and discuss the institution's plan for academic program delivery. Address each of the Quality Assurance Objectives associated with this standard.

Provide a narrative response (up to 3000 words) addressing student-centred learning, teaching, and assessment. All the quality objectives listed under this expectation should be addressed. Please use the text boxes below for your narrative response.

Areas to be updated from Candidacy Application:

1. Explain the institution's understanding of student-centred learning, teaching, and assessment.

2. Describe the process used to implement a student-centred learning environment.

3. Describe the role of faculty and students in the process.

4. Describe the faculty and staff development around this student-centred learning, teaching, and assessment.

Also, include for the Self-Evaluation:

5. Describe the method or methods used to deliver the institution's programmes.

6. Describe the process used to review programmes and to develop new programmes.

Expectation 3.b.

What are the institution's current practices, policies, and/or procedures relative to this Standard and its associated Quality Objectives? Provide documentation and related evidence regarding how the institution delivers its academic programmes.

Provide documentation or other related evidence, as **Appendix C** to this application, that describes ***the institution's academic student policies and services.***

i. Include a copy of the institution's academic policies that deal with learning, teaching, and assessment. If they are included in other provided documentation, provide the location of the evidence. If this information is located on your website, please provide the web address.

ii. A copy of the institution's student handbook. If this information is located on your website, please provide the web address.

Provide evidence that the processes described to review or develop new programmes are being used.

Provided evidence that the faculty and staff development around this student-centred learning, teaching, and assessment are being followed.

Expectation 3.c.

How does the institution determine if there is a shortcoming or quality gap between the institution's strategy and the outcomes currently obtained? State, describe, discuss, and provide documentation and evidence regarding the processes used to evaluate current actions relative to stated objectives.

Please use the text box for your narrative response (up to 1000 words).

Expectation 3.d.

What is the institution's approach for continuous improvement in order to address any identified shortcomings and close any quality gaps? State, describe, discuss, and provide documentation and evidence regarding the institution's approaches to continuous improvement and quality assurance relative to this Standard.

Please use the text box for your narrative response (up to 1000 words).

Standard 4. Student Admission, Progression, Recognition, and Certification.

The institution consistently applies pre-defined and published regulations and policies covering all phases of the student cycle including student admission, progression, recognition, and certification.

The following Quality Assurance Objectives are associated with this expectation.

The institution's student admission, progression, recognition, and certification processes:

- Are predefined and published regulations and policies that are applied consistently, fairly, and in a transparent manner.
- Has policies to monitor the student cycle.
- Provides for fair recognition in accordance with appropriate regulatory standards and national/regional requirements.
- Recognize both formal and informal learning.
- Validate the qualifications of transfer students.
- Have policies and procedures that cover both academic and non-academic life.
- Cooperate with other institutions, quality assurance agencies and the ENIC/NARIC centres

Expectation 4.a.

What is the institution's current strategy relative to this Standard and its associated Quality Objectives? State, describe, and discuss the institution's plan for students. Address each of the Quality Assurance Objectives associated with this standard.

Provide a narrative response (up to 3000 words) concerning the student academic programme cycle (Student Admission, Progression, Recognition, and Certification). Please use the text boxes below for your narrative response.

Areas to be updated from the Candidacy Application:

1. Describe the institution's admission, progression, recognition, and certification/graduation policy/process, and address all the quality assurance objectives listed under this expectation.

   _____

2. Is there a difference between admission for undergraduate students and graduate students?

   _____

3. Discuss, if any have occurred, student admission, progression, recognition, and certification/graduation that has not followed the policy/process.

   _____

4. If these policies/processes have not been documented, what is the timeline to get the policies/processes documented in a way that meets this expectation?

   _____

5. Describe how your programmes link to the European Qualification Framework (Dublin Descriptors) - First cycle, second cycle and third cycle.

   _____

6. Describe how your degree programmes link to the European Credit Transfer System (ECTS).

   _____

Also, include for the Self-Evaluation:

7. Describe how co-curricular activities, both formal and informal, contribute to the student experience at your institution.

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8. Describe the institution's student services and how they contribute to the quality of the education delivered.

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Expectation 4.b.

What are the institution's current practices, policies, and/or procedures relative to this Standard and its associated Quality Objectives? Provide documentation and related evidence regarding how the institution recruits, teaches, assesses, and graduate students.

Provide documentation or other related evidence as **Appendix D**, that the institution's student processes provide for fair recognition in accordance with appropriate regulatory standards and national/regional requirements.

i. Include a copy of the student admissions form.

ii. Include a copy of the student file template or list of what is included in a student file.

iii. Include a copy the expectation placed upon the student to progress through the programme.

iv. Include a copy of the process that determines that a student has completed the programme of study and how the completion certificate/diploma/degree is awarded.

v. Show that the institution's student processes are in accordance with appropriate regulatory standards and national/regional requirements.

vi. Include a copy of typical diploma(s) awarded for the first, second and third cycle of higher education (Bachelor, Master, Doctoral level)

vii. Include a copy of typical Diploma Supplements for the first, second and third cycle of higher education (Bachelor, Master, Doctoral level

Provide information concerning co-curricular activities that are available to students. Include a list of these activities.

Provide information concerning student services offered to the students.

Expectation 4.c.

How does the institution determine if there is a shortcoming or quality gap between the institution's strategy and the outcomes currently obtained? State, describe, discuss, and provide documentation and evidence regarding the processes used to evaluate current actions relative to stated objectives.

Please use the text box for your narrative response (up to 1000 words).

Expectation 4.d.

What is the institution's approach for continuous improvement in order to address any identified shortcomings and close any quality gaps? State, describe, discuss, and provide documentation and evidence regarding the institution's approaches to continuous improvement and quality assurance relative to this Standard.

Please use the text box for your narrative response (up to 1000 words).

Standard 5. Teaching Staff.

The institution assures themselves of the competence of their teachers, including appropriate qualification to teach the assigned workload. The institution applies fair and transparent processes for the recruitment and development of the teaching staff. The institution performs research appropriate to the institution's mission.

The following Quality Assurance Objectives are associated with this expectation.

The institution's teaching staff:

- Are recruited using clear, transparent, and fair processes.
- Have employment agreements that recognize the importance of teaching.
- Are offered opportunities for professional development.
- Are encouraged to pursue scholarly activity and research.
- Are encouraged to use innovative teaching methods and apply new technologies.
- Are qualified for the role they assume.

Expectation 5.a.

What is the institution's current strategy relative to this Standard and its associated Quality Objectives? State, describe, and discuss the institution's plan for teachers. Address each of the Quality Assurance Objectives associated with this standard.

Provide a narrative response (up to 3000 words) for teaching staff expectation. Be sure to cover all six of the quality assurance objectives. Please use the text boxes below for your narrative response.

Areas to be updated from the Candidacy Application:

1. Describe the recruitment and retention process of your faculty.

2. Describe the recruitment and retention process for non-teaching academic personnel.

3. If a faculty manual is in the process of being developed, what is the time frame for its completion? Please provide your faculty manual. List this in the appendix.

4. Describe the institution's scholarly expectation of its faculty.

5. Describe the faculty development process to include new teaching methods and new technologies.

Also, include for the Self-Evaluation:

6. Describe what the institution's policy is that determines who is qualified to teach by subject/discipline at the various levels of education.

7. Describe the policies and procedures provided to staff and faculty, in the area of professional development.

| |
| |

8. Describe the process used to ensure quality teaching in the classroom.

| |
| |

Expectation 5.b.

What are the institution's current practices, policies, and/or procedures relative to this Standard and its associated Quality Objectives? Provide documentation and related evidence regarding how the institution recruits and develops teachers.

Provide documentation or other related evidence as **Appendix E** that include the following:

i.   Include a copy of the institution's employment document/contract used by teaching staff. If there is more than one employment document/contract used, include copies of all the documents.

ii.   Complete the following table that demonstrates that teaching staff are qualified to teach in their assigned academic programmes. List all full-time faculty. (Adjunct files should be available to site visitors.)

Specifically, list at least one qualified faculty member (usually the programme manager, chair, or department head) for each of the programmes as identified under Standard 2 and list his/her specific qualifications relative to the programme.

Note that for the accreditation self-evaluation, you will also need to list at least one qualified faculty member for each academic discipline taught within each academic programme.

Academic Programme (should be the same list of programmes as provided under Standard 2)	Faculty Member Name	Programme Role or Position (e.g., Chair, Lead Faculty, Programme Head, etc.)	Qualifications			
			Highest Degree Earned	Field of Study	Qualification to Teach	Teaching Load*

* For teaching load chose and define a value that has meaning in the context of your organization
 (e.g. lecture hours per week, term or year**)**

iii. Provide evidence of professional development provided to instructors/teachers.

iv. Provide evidence that instructors/teachers are involved in scholarly activity in their field of teaching responsibility. When providing evidence, please use the ***Boyer Model*** for scholarly activity. For more information regarding the Boyer Model, please see one of the following references.

> Boyer, E. L. (1990). *Scholarship reconsidered: Priorities of the professoriate*. Princeton, NJ: Carnegie Foundation for the Advancement of Teaching.

> Boyer, E. L. (1996). The scholarship of engagement. *Journal of Public Service and Outreach*, 1(1), 11-20.

Provide the documentation that states the qualification needed to teach by subject/discipline at the various levels of education. All faculty files will need to be available for the site visit team to review during their visit.

Provide the policies and procedures that are available, to staff and faculty, in the area of professional development.

Provide copies of tools used to ensure that quality teaching is occurring.

Expectation 5.c.

How does the institution determine if there is a shortcoming or quality gap between the institution's strategy and the outcomes currently obtained? State, describe, discuss, and provide documentation and evidence regarding the processes used to evaluate current actions relative to stated objectives.

Please use the text box for your narrative response (up to 1000 words).

Expectation 5.d.

What is the institution's approach for continuous improvement in order to address any identified shortcomings and close any quality gaps? State, describe, discuss, and provide documentation and evidence regarding the institution's approaches to continuous improvement and quality assurance relative to this Standard.

Please use the text box for your narrative response (up to 1000 words).

Standard 6. Learning Resources and Student Support

The institution has appropriate funding for learning and teaching activities and provides adequate and readily accessible learning resources and student support.

> **The following Quality Assurance Objectives are associated with this expectation.**
> The institution's learning resources and student support services:
> - Are wide-ranging to adequately support diverse student learning.
> - Are appropriately funded and equipped.
> - Are fit for purpose.
> - Are readily available to all students.
> - Are staffed with qualified professionals.

Expectation 6.a.

What is the institution's current strategy relative to this Standard and its associated Quality Objectives? State, describe, and discuss the institution's plan for learning resources and student support. Address each of the Quality Assurance Objectives associated with this standard.

Provide a narrative response (up to 3000 words) for Expectation 6.a. Please use the text boxes for your narrative response.

Areas to be updated from the Candidacy Application:

1. Describe how the institution is funded.

2. If the institution was to close, describe how the present students would be cared for to enable them to complete their certificate/degrees.

3. Describe the financial oversite for the institution.

4. Discuss the learning resources available to the students and faculty, and the process to assess the current and future needs at the institution.

5. Describe how the students and faculty access these resources.

Also, include for the Self-Evaluation:

6. Describe the facilities available for educational and administrative services. If there are multiple locations, compare the quality of facilities between locations.

7. Describe the support services and the processes used to ensure the quality of those services.

Expectation 6.b.

What are the institution's current practices, policies, and/or procedures relative to this Standard and its associated Quality Objectives? Provide documentation and related evidence regarding how the institution provides learning resources and student support.

Provide documentation or other related evidence as **Appendix F** that supports the narrative response to Expectation 6.a. To include:

  i.   The cost to the student to attend your institution.

  ii. What is your budget? What would be the cost at a given point in time to teach out your whole student body?

  iii. Evidence that there are financial reserves to ensure that present students will be able to complete their education at your institution.

  iv. List of present learning resources.

  v.   Add a balance sheet for the last completed 3 years. Include a profit and loss statement, budget, and teach-out plan including budget.

Provide evidence of sufficient facilities available for educational and administrative services.

Provide evidence of the support services that are available at the institution.

Expectation 6.c.

How does the institution determine if there is a shortcoming or quality gap between the institution's strategy and the outcomes currently obtained? State, describe, discuss, and provide documentation and evidence regarding the processes used to evaluate current actions relative to stated objectives.

Please use the text box for your narrative response (up to 1000 words).

Expectation 6.d.

What is the institution's approach for continuous improvement in order to address any identified shortcomings and close any quality gaps?

Please use the text box for your narrative response (up to 1000 words).

Standard 7. Information Management

The institution collects, analyses, and uses relevant information for the effective management of their academic programmes and other institutional activities with appropriate policies and procedures to facilitate clear communication with all stakeholders.

The following Quality Assurance Objectives are associated with this expectation.

The institution's information management systems:

- Provide reliable data for informed decision-making (key-performance indicators).

- Support the internal quality assurance system.

- Tracks student progression, success and drop-out rates

- Tracks student satisfaction with their programme

- Monitors the career paths of graduates.

- Facilitate the delivery of instructional content by the use of information management and associated technology.

- Facilitate good two-way communication with all stakeholders of the institution.

Expectation 7.a.

What is the institution's current strategy relative to this Standard and its associated Quality Objectives? State, describe, and discuss the institution's plan for information management. Address each of the Quality Assurance Objectives associated with this standard.

Provide a narrative response (up to 3000 words) for Expectation 7.a. Please use the text boxes below for your narrative response.

Areas to be updated from the Candidacy Application:

1. Describe the institution's information management system/s.

2. Describe how you collect key-performance indicators.

3. Describe how the institution communicates with its graduates, students, faculty, and the public at large.

4. Describe how the institution collects data about the career paths of institutions.

5. Discuss the process/policy used to ensure information management, and that associated technologies are reviewed on a periodic basis.

Expectation 7.b.

What are the institution's current practices, policies, and/or procedures relative to this Standard and its associated Quality Objectives? Provide documentation and related evidence regarding how the institution manages information.

Provide documentation or other related evidence, as **Appendix G** to this application, that the institution's information management plan and processes are supportive to the internal quality assurance system.

    i.   Provide a copy of the template used for student files.

    ii.   Provide a copy of the template used for faculty files.

    iii.   Provide copies of any policies related to the standard.

Provide evidence of the institution's present technology infrastructure.

Provide the plan used to replace and/or update the present information technology.

Expectation 7.c.

How does the institution determine if there is a shortcoming or quality gap between the institution's strategy and the outcomes currently obtained? State, describe, discuss, and provide documentation and evidence regarding the processes used to evaluate current actions relative to stated objectives.

Please use the text box for your narrative response (up to 1000 words).

Expectation 7.d.

What is the institution's approach for continuous improvement in order to address any identified shortcomings and close any quality gaps? State, describe, discuss, and provide documentation and evidence regarding the institution's approaches to continuous improvement and quality assurance relative to this Standard.

Please use the text box for your narrative response (up to 1000 words).

Standard 8. Public Information.

The institution publishes information about their activities, including academic programmes, which is clear, accurate, objective, up-to-date, and readily accessible. The institution also publishes information regarding its ethical standards and conduct, community engagement activities, and social responsibilities.

> **The following Quality Assurance Objectives are associated with this expectation.**
> The institution's public information management process:
> - Makes relevant information regarding the institution's activities available to the public.
> - Provides the public with information concerning the institution's programmes, the intended learning outcomes, the qualifications awarded, and the teaching, learning, and assessment procedures used.
> - Provides the public with the pass rates and graduate employment information.
> - States the ethical code of conduct for the institution.
> - Identifies community engagement activities.
> - Describes its social responsibility activities.

Expectation 8.a.

What is the institution's current strategy relative to this Standard and its associated Quality Objectives? State, describe, and discuss the institution's plan for managing publicly available information. Address each of the Quality Assurance Objectives associated with this standard.

Provide a narrative response (up to 3000 words) for Expectation 8.a. Please use the text boxes below for your narrative response.

Areas to be updated from the Candidacy Application:

1. Describe the process/policy the institution uses to publish information about their activities, including academic programmes, which is clear, accurate, objective, up-to-date, and readily accessible. The institution also publishes information regarding its ethical standards and community engagement.

2. Describe how the institution makes available to the public at large its understanding of its social responsibilities and its understanding of environmental sustainability.

Expectation 8.b.

What are the institution's current practices, policies, and/or procedures relative to this Standard and its associated Quality Objectives? Provide documentation and related evidence regarding how the institution shares information with the public.

Provide documentation or other related evidence as **Appendix H** that supports the narrative response to Expectation 8.a.

  i.   Provide the location on your website where this information can be found.

  ii.   Provide the locations available to the public that address this standard.

Provide evidence that demonstrates how the institution makes available to the public at large its understanding of its social responsibilities and its understanding of environmental sustainability.

Expectation 8.c.

How does the institution determine if there is a shortcoming or quality gap between the institution's strategy and the outcomes currently obtained? State, describe, discuss, and provide documentation and evidence regarding the processes used to evaluate current actions relative to stated objectives.

Please use the text box for your narrative response (up to 1000 words).

Expectation 8.d.

What is the institution's approach for continuous improvement in order to address any identified shortcomings and close any quality gaps? State, describe, discuss, and provide documentation and evidence regarding the institution's approaches to continuous improvement and quality assurance relative to this Standard.

Please use the text box for your narrative response (up to 1000 words).

Standard 9. On-going Monitoring and Periodic Review of Programmes

The institution monitors and periodically reviews their programmes to ensure that the programmes achieve the objectives set for them and are responsive to the needs of students and society. Periodic reviews lead to continuous improvement of the academic programme. Actions planned or taken as a result of the periodic reviews are communicated to all those concerned. A periodic review is also completed on the comprehensive quality assurance plan.

> **The following Quality Assurance Objectives are associated with this expectation.**
> The institution's ongoing monitoring and periodic review of programmes evaluate:
> - Programme content to ensure the up-to-date status of the content.
> - Society's needs.
> - Student workload, progression, and completion.
> - The effectiveness of procedures for assessment of students.
> - Student expectations, needs, and satisfaction in relationship to the programme.
> - The learning environment and support services, and their fitness for purpose.

Expectation 9.a.

What is the institution's current strategy relative to this Standard and its associated Quality Objectives? State, describe, and discuss the institution's plan for ongoing program review. Address each of the Quality Assurance Objectives associated with this standard.

Provide a narrative response (up to 3000 words) for Expectation 9.a. Please use the text boxes below for your narrative response.

Areas to be updated from the Candidacy Application:

1. Describe the periodic review process/policy for all programs. Include how you determine that the program objectives are completed.

2. Describe the continuous improvements process and how action plans are developed and implemented.

3. Describe how these programmatic reviews are integrated into the institution's comprehensive quality assurance plan.

Expectation 9.b.

What are the institution's current practices, policies, and/or procedures relative to this Standard and its associated Quality Objectives? Provide documentation and related evidence regarding how the institution conducts ongoing program review.

Provide documentation or other related evidence as **Appendix I** to this application that supports the narrative response to the requirement.

Expectation 9.c.

How does the institution determine if there is a shortcoming or quality gap between the institution's strategy and the outcomes currently obtained? State, describe, discuss, and provide documentation and evidence regarding the processes used to evaluate current actions relative to stated objectives.

Please use the text box for your narrative response (up to 1000 words).

Expectation 9.d.

What is the institution's approach for continuous improvement in order to address any identified shortcomings and close any quality gaps? State, describe, discuss, and provide documentation and evidence regarding the institution's approaches to continuous improvement and quality assurance relative to this Standard.

Please use the text box for your narrative response (up to 1000 words).

Standard 10. Cyclical External Quality Assurance.

The institution undergoes external quality assurance in accordance with ATHEA Standards and Expectations on a cyclical basis.

> **The following Quality Assurance Objectives are associated with this expectation.**
> The institution's cyclical external quality assurance:
> - Considers the legislative environment in which the institution operates and is focused accordingly.
> - Integrates feedback from the review into the continuous improvement of the institution.

Expectation 10.a.

What is the institution's current strategy relative to this Standard and its associated Quality Objectives? State, describe, and discuss the institution's plan for using external review and assistance. Address each of the Quality Assurance Objectives associated with this standard.

Provide a narrative response (up to 3000 words) for Expectation 10.a. Please use the text boxes below for your narrative response.

Areas to be updated from the Candidacy Application:

1. Describe the legislative environment in which the institution exists. If the institution is working in more than one environment, all the environments will need to be covered.

2. Describe the present external review process and discuss how that process grants the institution the authority to function as an educational institution.

Also, include for the Self-Evaluation:

3. Describe your last institutional and/or programmatic external review and provide any documents that were sent following that review.

4. If there are multiple locations of the institution that had different external reviews, describe the process used in each location.

5. Does your institution have national accreditation? If not, please explain why.

Expectation 10.b.

What are the institution's current practices, policies, and/or procedures relative to this Standard and its associated Quality Objectives? Provide documentation and related evidence regarding how the institution employs external evaluation and review.

Provide documentation or other related evidence as **Appendix J** that supports the narrative response to 10.a.

    i.   Provide evidence that the institution has the authority to function as an educational institution.

    ii.   If the institution operates in more than one jurisdiction, the appropriate documents should be provided.

Provide an executive summary of all external reviews. In addition, include copies of all final reports/letters received for the external reviewers.

Expectation 10.c.

How does the institution determine if there is a shortcoming or quality gap between the institution's strategy and the outcomes currently obtained? State, describe, discuss, and provide documentation and evidence regarding the processes used to evaluate current actions relative to stated objectives.

Please use the text box for your narrative response (up to 1000 words).

Expectation 10.d.

What is the institution's approach for continuous improvement in order to address any identified shortcomings and close any quality gaps? State, describe, discuss, and provide documentation and evidence regarding the institution's approaches to continuous improvement and quality assurance relative to this Standard.

Please use the text box for your narrative response (up to 1000 words).

--- End of Template ---

Notes for the Submission

The application has to consist of two volumes:

Volume 1 for your narrative responses to the candidacy standards and for the required tables.

Volume 2 for the appendices to accommodate bulky items such as course syllabi, strategic planning documents, outcomes assessment plan, faculty vitae, faculty, handbook, etc.

The application and all supporting materials must be written in English.

Submit the documents in PDF format. It has to be a searchable PDF format (No static image format).

PART IV: SITE VISIT POLICY AND PROCEDURES

Site Visit Team Composition

After the institution submits its self-evaluation, the THEA Board of Commissioners will designate a team of professionally-trained peer reviewers, including one student, to conduct the site visit. The THEA Board of Commissioners selects site visit team members from a pool of well-qualified individuals with experience in the evaluation process and in higher education institutional operations.

The Chair of the team will be responsible for assuring that the site visit is conducted objectively. The size of the team and the qualifications of its members are influenced by the institution's size, complexity, and number of locations. For institutions that offer programmes that are taught in a language other than English, at least one member of the site visit team will be fluent in the language of instruction.

The THEA Board of Commissioners is committed to avoiding potential conflicts of interest by site visit team members. The following guidelines will be used to determine site visit team composition:

- No member of the site visit team will have had a recent affiliation with the institution that is being considered for accreditation, nor will the members of the site visit team have relatives who are employees of the institution.

- No member of the site visit team will be a graduate of the institution that is being considered for accreditation.

- No member of the site visit team will have a known, expressed bias for or against the institution.

- No member of the site visit team will currently be an employee of another institution in the institution's primary competitive market.

Logistical Arrangements

After the site visit dates are agreed upon and the site visit team is appointed, the institution will be responsible for coordinating logistical arrangements with the chair of the team and/or the THEA Board of Commissioners. Logistical arrangements include developing the agenda for the site visit, procuring a meeting room on campus for team meetings, communication of the site visit arrangements with on-

campus personnel, hotel reservations, and arrangements for the site visit team to meet key staff, faculty, students, alumni, and community groups.

Once site visit team members have accepted an accreditation site visit assignment and a team chair has been designated, the THEA Board of Commissioners will notify the institution of the members' names, positions, and profiles along with the dates of their visit. The THEA Board of Commissioners will distribute copies of the self-evaluation to each member of the site visit team. Prior to the site visit, team members are expected to examine and carefully review all of the submitted self-evaluation materials.

Prior to the site visit, the team chair will work with the institution's Accreditation Liaison to ensure that sufficient support is available to conduct a successful visit. The site visit team chair is responsible for keeping the team members informed about the site visit arrangements.

Site visit team members will normally arrive the evening before the first day of the official site visit. The team chair will notify the other members of the team of the time and place of their first meeting. At this first meeting, the team chair will review the specific plans for the site visit, identify the team members who will be responsible for writing specific portions of the team's report of findings, and organize the team so that a successful visit is possible. This meeting should also include a discussion of the team's reaction to the institution's self-evaluation and related materials, a review of the agenda for each day of the site visit, and a discussion of how and when its final report of findings will be compiled and forwarded to the THEA Board of Commissioners.

Site Visit Team's Responsibilities

During its visit to the institution, the site visit team should meet with the chief executive officer of the institution, the chief academic officer, faculty members, students, and others as deemed appropriate. The site visit team begins the process of evaluation by considering the institution in its entirety. As representatives of the THEA, the site visit team is responsible for validating that the information in the self-evaluation is accurate. The site visit team should try to accumulate as much pertinent information as it can, and use appropriate sampling techniques to review the accumulated data. The site visit team's findings should reflect its collective judgment about the clarity of mission of the institution and its ability to deliver a high-quality learning experience to its students.

A final site visit team meeting should be held during the last day of the site visit, at which time the team will seek to reach agreement on the content of its report of findings to the THEA Board of Commissioners. At this meeting the site visit team chair should finalize plans for an exit interview with the institution's Accreditation Liaison and other appropriate administrators. At the exit interview, the site visit team chair will provide an oral summary of the major findings that will be included in the team's written report. The site visit team chair should make it clear in the exit interview that the THEA Board of Commissioners, not the site visit team, makes the final decisions on accreditation.

Each member of the site visit team is responsible for writing a portion of the team's report of findings. The site visit team chair has overall responsibility for gathering this information from the team members and preparing a comprehensive final report for the THEA Board of Commissioners. If no additional information is required from the institution, the site visit team's report of findings normally will be completed no later than two weeks after the team's visit to the institution and forwarded to the THEA offices. If the final site visit team's report of findings is delayed beyond two weeks, ATHEA offices should be notified.

The precise length of the site visit depends on the location(s), size, and complexity of the institution. Generally, three days is sufficient time to allocate for the site visit. It may take extra days if there are extensive off-campus sites or other extenuating circumstances.

Institution Response

After the site visit team's report of findings has been forwarded to the THEA Board of Commissioners, a written summary report of the site visit team's findings will be sent to the institutions' Accreditation Liaison for review and comment. A written response by the institution's Accreditation Liaison, or his or her designee, is required within two weeks of receipt of the report. The THEA Board of Commissioners cannot review the institution's request for accreditation without this response. Accordingly, a specific written response to each finding, indicating areas of agreement, disagreement, and/or clarification, must be provided by the institution.

APPENDIX A: GLOSSARY OF TERMS

Academic Cycle: An academic cycle refers to the time period from when a group of students starts a programme and when the same group of students completes the programme. Schools that offer continuous enrolment periods may have continuous cycles as opposed to schools with set enrolment periods that may have annual academic cycles.

Academic Innovation: The institution's ability to integrate new, original or advanced changes to its administration or academic programs. Academic innovation will not be the same for every institution.

Academic Program: An organized sequence of courses, modules, credits, classes, subjects, papers, etc. that leads to the awarding of a degree, diploma, certificate, or other equivalent credential at the undergraduate or graduate level in an institution of higher education.

Academic Quality: The overall level of performance of the institution in the context of its mission as measured by the extent of accomplishment of the institution's intended student learning and operational outcomes, and its mission and strategic goals.

Accreditation Expectations: Statements that lead to providing evidence that demonstrates compliance with the related Accreditation Standards.

Accreditation Liaison: The representative of an ATHEA member institution that has been assigned the primary contact while the institution seeks to achieve THEA and for any follow-up communication, such as addressing *Actions Required* for the accreditation letter and the annual report.

Accreditation Peer Review: The evaluation of an institution's self-evaluation done by one or more people of similar competence in higher education. It constitutes a form of self-regulation by qualified members of a profession within the relevant field; in ATHEA's case, the relevant field is tertiary education. Peer review methods are employed to maintain standards of quality, improve performance, and provide credibility.

Accreditation Self-Evaluation: A summary of the Standards and Expectations the institution will need to comply with to achieve THEA. There are 10 Standards that have 4 expectations that will need to be addressed in the Accreditation Self-Evaluation. Each of the Expectations requires a narrative response and the submission of evidence.

Accreditation Standard: A series of agreed-upon commonly accepted areas, which are vital for successful quality education and reveal quality learning

environments in higher education. ATHEA has identified 10 standards that can be applied to all tertiary education institutions.

Accreditation Status, THEA-Accredited: An accreditation status awarded to an institution by the THEA Board of Commissions. Once awarded, the membership status is Accredited Member of ATHEA, having obtained THEA.

Accreditation Status, THEA-Candidate: An accreditation status granted to an institution by the THEA Board of Commissioners. Once granted, the membership status is Candidate Member of ATHEA.

Accreditation Status: Refers to either Candidate for Accreditation or Accredited status.

Accreditation: The process of self-evaluation and external peer review for quality assurance, accountability, and quality improvement of an institution of higher education. The recognition of excellence in education for the institution includes achieving its mission and strategic goals, and compliance with ATHEA's Accreditation Principles.

Accredited Member: The status granted by the THEA Board of Commissioners to an institution that has successfully completed the THEA review process.

Accredited: Once a Candidate for Accreditation completes a self-evaluation, passes a site evaluation, and is accepted into accreditation status by the THEA Board of Commissioners, the institution is awarded accreditation. The THEA-Candidate must have at least 2 cycles of graduates (students that start and finish the programme) from their institution. The specific terminology for accreditation is *THEA-Accredited*.

Action Plan: A series of steps designed to accomplish a goal or an objective, or to make changes and improvements related to strategic planning and outcomes assessment.

Actions Required: Issues and or processes that need to be addressed by an institution following the Board of Commissioners decision on a candidacy or an accreditation application. These actions must be rectified within the time period stated in the Commissioner's letter following the Board of Commissioners' decision.

Affiliated Institution: An Affiliated Institution is a status of being associated with ATHEA and reserved for institutions and corporations that are associated with higher education, and wish to learn, be informed, and potentially receive assistance from ATHEA relative to quality improvement in higher education. Affiliated Institutions are not necessarily on an immediate path for

accreditation, rather perhaps at a later time the Affiliated Institution's institution will be ready to embark on obtaining THEA. Affiliated Institutions may also be corporations who would like to sponsor and support the activities of ATHEA.

Annual Report: A report required of all institution members of ATHEA, regardless of accreditation status, which is to be submitted annually to ATHEA. The annual reports are used to monitor the status of institution members and their efforts toward continuous improvement.

Applicant: An institution that has submitted a completed ATHEA membership application form with appropriate enclosures as specified in ATHEA criteria for institutional membership.

Assessment: A process of determining whether established student learning and operational goals/objectives have been achieved, and whether the mission and broad-based goals of the institution are being accomplished. The process involves gathering, evaluating, and interpreting results in light of intended outcomes.

ATHEA: The Association for Transnational Higher Education Accreditation. ATHEA is the membership-based organization.

ATHEA Board of Directors: The Board of Directors is elected by ATHEA institution membership in accordance with the bylaws of ATHEA. The directors are responsible for general oversight of the affairs of the organization and for establishing policy.

ATHEA Bylaws: The document that expands upon ATHEA Charter that addresses the day-to-day operational governance, procedures, policies, and practices of the organization.

ATHEA Charter: A document, issued by the Austrian government, outlining the conditions under which ATHEA is organized, and defining its rights and privileges.

ATHEA Status: There are four statuses of ATHEA membership as defined by ATHEA Charter. Each status has specific dues and other related costs.

Awards/Awarded: Terms used when referring to the THEA Board of Commissioners awarding accreditation to an institution.

Benchmarking: The process of continuously measuring and comparing an institution's resources, processes, and outcomes against comparable resources, processes, and outcomes in the institutions of leading providers of

higher education, and compared to the educational best practices described in academic journals, to obtain information that will assist the institution in identifying and implementing improvements.

Bologna Protocols: Launched in 1999 by the Ministers of Education and university leaders of 29 countries, the Bologna Process aimed to create a European Higher Education Area (EHEA) by 2010; it has further developed into a major reform encompassing 46 countries. Taking part in the Bologna Process is a voluntary decision made by each country and its higher education community to endorse the principles underlined in the European Higher Education Area. The Bologna Process does not aim to harmonize national educational systems but rather to provide tools to connect them. The intention is to allow the diversity of national systems and universities to be maintained while the European Higher Education Area improves transparency between higher education systems, as well as implements tools to facilitate recognition of degrees and academic qualifications, mobility, and exchanges between institutions. The reforms are based on ten simple objectives that governments and institutions are currently implementing. Most importantly, all participating countries have agreed on a comparable three cycle degree system for undergraduates (Bachelor degrees) and graduates (Master and Ph.D. degrees).

Candidacy: A process during which an institution prepares for a first-time accreditation review by the THEA Board of Commissioners.

Candidacy Application: It the first document to be submitted to begin the candidacy process. This document must be approved and signed by the institution's chief executive officer (i.e., president, chancellor, director general), affirming the institution is commited to abide by the accreditation policies and procedures of the THEA Board of Commissioners. Payment of the application fee for candidacy is part of the application.

Candidacy Self-Evaluation: A summary of the Standards and Expectations the institution will need to comply with to achieve THEA-Candidate status. There are 10 Expectations (one Expectation for each of the 10 standards) that will need to be addressed in the Candidacy Self-Evaluation. Each of the Expectations requires a narrative response and the submission of evidence.

Candidacy Site Visit: An on-campus review of the institution's academic programs and operations in response to the institution's request for institutional accreditation. The site visit includes validation of the candidacy self-evaluation by a THEA site visit team of professionally trained peer reviewers.

Candidacy Visit Report: Following the visit, the candidacy site visit team will prepare a comprehensive final report for the THEA Board of Commissioners. If no additional information is required from the institution, the candidacy site visit team's report of findings is normally completed no later than two weeks after the team's visit to the institution and forwarded to the THEA Board of Commissioners. If the final candidacy site visit team's report of findings is delayed beyond two weeks, ATHEA office should be notified.

Candidate for Accreditation: An Institutional Member, who has completed all of the requirements for candidacy status as stated in the Accreditation Policy Manual, will be considered a candidate for accreditation. The Institutional Member must have graduates of their programme and be in existence for at least 3 years. The specific term used to state a positive outcome for candidacy is *THEA-Candidate*. In ATHEA Charter, the specific membership category is *Candidate Member*. The member, therefore, becomes an ATHEA Candidate Member, having been granted THEA-Candidate by the THEA Board of Commissioners.

Dual Degree: When two or more institutions award degrees for a course of study approved by all institutions involved in the delivery of the degree program.

EQAR: European Quality Assurance Register.

ESG: European Standards and Guidelines.

Expectations: For each accreditation standard, there are specific expectations that define how the standard is evaluated.

Faculty Development: A process whereby faculty members seek to improve their professionalism related to teaching, discovery, application, and integration.

Faculty Load: Consists of teaching loads (the actual number of courses taught during an academic term for full-time, part-time, and adjunct faculty), and other academic assignments (e.g., student advising, committee work, and other administrative assignments).

Faculty Qualification Levels: A faculty member's education, certifications, industry experience, and teaching experience determine his or her qualification level. Faculty members are classified as being doctorally-qualified, professionally-qualified, minimally-qualified, or unqualified.

Findings: Items and issues identified by a site visit team resulting from its visit to the institution and its evaluation of the institution's self-evaluation in order to determine compliance with the THEA Accreditation Standards and Expectations. The THEA Board of Commissioners examines these findings to

determine whether they should be identified as observations, notes, or commendations.

Goal: See Mission/Goal/Objective.

Grants/Granted: Terms used when referring to the THEA Board of Commissioners granting Candidate for Accreditation.

Hybrid Program: A programme delivered to students partially online and partially face-to-face.

Institutional Accreditation: Accreditation granted to an academic institution in its entirety by an accrediting organization.

Institutional Member: This is the entry level membership into ATHEA and the starting point for all institutional members who may seek accreditation. The institution must have legal authorization to operate as a tertiary educational institution, have students in a programme of higher education, be in existence for at least 1 year, and offer and teach their own institution's programmes. If for example, an institution is teaching for another institution but has no academic programmes of their own, they could not be an Institutional Member.

Intended Outcome: A planned or desired result pertaining to student learning or institution operational effectiveness.

Learning Resources: Information represented, accessible or stored in a variety of media and formats, which assists student learning as defined by the learning outcomes of the institution's curriculum. Learning resources are generally understood to be texts, videos, software, and other materials that assist students in meeting the expectations for learning.

Legal Authority to Operate: An institution demonstrates that it has legal authorization to operate as a tertiary educational institution in their primary location.

Measurement Instruments: Tools used to determine the extent to which intended outcomes have been achieved. Measurement instruments for student learning can be either direct measures or indirect measures.

Measures, Direct: Methods used to assess the extent of student achievement of intended learning outcomes. The measures provide direct evidence to determine whether the desired learning has taken place (the evidence provided should be relevant, verifiable, and representative). Examples of

direct measures include comprehensive exams, capstone course assessments, portfolio evaluations, pre- and post-test assessments.

Measures, Indirect: Methods used to assess students' or external bodies' perceptions, thoughts, or opinions pertaining to the educational experiences of students. Examples of indirect measures include exit surveys, exit interviews, focus groups, alumni surveys, and employers' evaluations of students.

Member, Affiliated Institution: An Affiliated Institution is a status for being associated with ATHEA and reserved for institutions associated with higher education who wish to learn, be informed, and potentially receive assistance from ATHEA relative to quality improvement in higher education. Affiliated Institutions are not necessarily on an immediate path for accreditation, rather perhaps at a later time the Affiliated Institution will be ready to embark on THEA accreditation. In ATHEA Charter, the specific term used is *Affiliated Member*. Affiliated members are restricted to organizations, not individuals.

Membership Status (Category): Refers to the status related to membership for the member institution. The three categories of membership status are Institutional Member, Candidate for Accreditation, and Accredited.

Membership Status (Category), Accredited: Once an ATHEA Candidate Member completes a self-evaluation, hosts a site evaluation, and is accepted into accreditation status by the THEA Board of Commissioners, the institution is awarded accreditation. The THEA-Candidate must have at least 2 cycles of graduates from their institution. The specific term for accredited is *THEA-Accredited*. In ATHEA Charter, the specific membership category is *Accredited Member*. The Candidate Member, therefore, becomes an ATHEA Accredited Member, having been granted THEA by the THEA Board of Commissioners.

Membership Status (Category), Candidate for Accreditation: An Institutional Member who has completed all of the requirements for candidacy status as stated in the Accreditation Policy Manual will be a considered a candidate for accreditation. The Institutional Member must have graduates of the programme and be in existence for at least 3 years. The specific term used to state a positive outcome for candidacy is *THEA-Candidate*. In ATHEA Charter, the specific membership category is *Candidate Member*. The member, therefore, becomes an ATHEA Candidate Member, having been granted THEA-Candidacy by the THEA Board of Commissioners.

Membership Status (Category), Institutional Member: This is the entry into ATHEA and the starting point for all members who may seek accreditation. The institution must have legal authorization to operate as a tertiary educational institution, have students in an academic programme, be in existence for at least 1 year, and offer and teach their own institution's programmes. If for example, an institution is teaching for another institution but has no academic programmes of their own, they could not be an Institutional Member. In ATHEA Charter, the specific term stated is *Member*.

Mission/Goal/Objective: Mission is a statement of the purpose of an institution, the reason(s) for its existence, and sometimes includes its future direction or vision. Goals are established to place into action various facets of the mission, purpose, and vision of the institution (the results it wants to accomplish in the future). The mission and goals of the institution should be congruent with those of the institution. Objectives are the specific, measurable results that the institution expects to achieve consistent with its mission and goals.

Objective: See Mission/Goal/Objective.

Off-Campus: Any site other than the main campus at which courses are taught by the institution is considered to be "off campus." Online and/or video delivery of courses to dedicated sites may also be considered "off-campus."

Operational Effectiveness: The ability of the institution to accomplish its operational goals and intended operational outcomes.

Outcomes Assessment Plan: A document prepared by an institution that outlines the process it uses to measure the academic quality of its programmes, the extent of its operational effectiveness, and the degree to which it is accomplishing its mission and broad-based goals.

Partner Institution: Are institution consenting organizations that share resources to accomplish a mutual goal.

Partnership: Is an arrangement where parties, known as partners, agree to cooperate to advance their mutual interests. The partners in a partnership may be individuals, businesses, interest-based organizations, schools, governments, or combinations. Organizations may partner together to increase the likelihood of each achieving their mission and to amplify their reach.

Peer Evaluator: A qualified member of a profession within the relevant field, in ATHEA's case it is tertiary education.

Publicly Available Information: The main purpose of providing publicly available information is to demonstrate that an institution of higher education is delivering to their students and other stakeholders the achievement of its stated institutional and programmatic mission and goals. This information should include evidence of student learning and operational effectiveness.

Qualified Teachers/Faculty: Qualified faculty members are identified primarily by credentials, but other factors including, but not limited to, equivalent experience may be considered by the institution in determining whether a faculty member is qualified. Qualified Teacher/faculty possess an academic degree relevant to what they are teaching and at least one level above the level at which they teach, except in programs for terminal degrees or when equivalent experience is established. In terminal degree programs faculty members possess the same level of degree. When faculty members are employed based on equivalent experience, the institution defines a minimum threshold of experience and an evaluation process that is used in the appointment process.

Reaffirmation of Accreditation: Once an institution has been granted accreditation by the THEA Board of Commissioners, an institution must have that accreditation reaffirmed periodically by developing a self-evaluation, undergoing a site visit, and being reviewed by the THEA Board of Commissioners.

Realized Outcome: A measurable statement of performance resulting from the implementation of a course of action. A realized outcome may or may not be an indicator of success in achieving goals and objectives.

Recommendations: A comment by the THEA Board of Commissioners that it believes would be helpful to the institution in achieving its goals. Action on recommendations is highly recommended, but is not required.

Rubric: An established guide used to provide consistent evaluations of assessment results generated by identified measurement instruments. A rubric establishes criteria for objective assessment and evaluation. A rubric can be a description of performance characteristics corresponding to points on a rating scale, an explicit expectation of performance qualities on a rating scale, or a defined scoring point on a scale.

Scholarly and Professional Activities: Those activities and tasks that faculty members undertake in order to enhance and further develop their knowledge, skills, and abilities within their fields of study.

Self-Evaluation: A comprehensive report prepared by an institution that documents the extent of the institution's compliance with the Accreditation Standards and Expectations.

Site Visit: A comprehensive, on-campus review of the institution's programmes and operations in response to the institution's request for institutional accreditation. The site visit includes evaluation of the institution's self-evaluation by a THEA site visit team of professionally-trained peer reviewers and students.

Standard: ATHEA Accreditation Standards represent its criteria for accreditation.

Strategic Goals: Strategic goals represent aspirations of the institution and should be directly related to the accomplishment of the institution's mission.

Student Learning Outcomes: Measurable knowledge, skills, and abilities of students related to a course or programme of study.

Student Support Services: An institution provides services and support for students to enhance growth and development. These services include, but are not limited to, career counselling, academic counselling, administrative services, and student life.

Tertiary Educational Institution: A post-secondary educational institution.

THEA: Transnational Higher Education Accreditation. THEA is the actual accreditation service provided. THEA is the principal service provided by ATHEA to its members. An institution joins ATHEA in order to be awarded THEA.

THEA Accredited: An ATHEA member that has completed a self-evaluation, hosted a site evaluation, and has been accepted into accreditation status by the THEA Board of Commissioners, is awarded THEA accreditation and carries the title of *THEA Accredited.*

THEA Board of Commissioners: The THEA Board of Commissioners is the independent accreditation decision-making body of ATHEA and is elected by the organization's membership in accordance with ATHEA bylaws. The Commissioners review and evaluate requests for accreditation, and determine the accreditation status of all ATHEA institutional members. The commissioners are responsible for maintaining and updating the THEA Accreditation Process Manual and associated documents.

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