

Pursuant to Article 36 of the Law on State Administration (Official Gazette of Montenegro 78/2018, 70/2021 and 52/2022), and in conjunction with Article 42 of the Law on Higher Education (Official Gazette of Montenegro 44/2014, 52/2014, 47/2015, 40/2016, 42/2017, 71/2017, 55/2018, 3/2019, 17/2019-other law, 47/2019, 72/2019, 74/2020, 104/2021 and 86/2022) and Article 18 of the Articles of Association of the Agency, the Agency for Control and Quality Assurance of Higher Education hereby adopts the

RULES
on the procedure for reaccreditation of higher education institution

Subject
Article 1

These Rules govern the procedure, manner and criteria for conducting the reaccreditation of higher education institution in Montenegro (hereinafter referred to as: institution).

Reaccreditation of institution
Article 2

Reaccreditation of institution is a process under which the quality of licensed higher education institution and accredited study programmes is verified.

Reaccreditation of institution and study programmes is based on the Self-evaluation Report of the institution, external evaluation procedure and the Institution Reaccreditation Report.

Reports referred to in paragraph 2 of this Article are prepared on the templates in line with the criteria that make an integral part of these Rules, set out by the Agency for Control and Quality Assurance of Higher Education (hereinafter referred to as: Agency) and published on its web page.

Criteria referred to in paragraph 3 of this Article arise from the Standards and guidelines for reaccreditation of higher education institutions, harmonized with the European standards and guidelines for quality assurance in the European Higher Education Area (hereinafter referred to as: European standards and guidelines).

Reaccreditation costs shall be borne by the institution in accordance with the law governing the area of administrative fees.

Plan of institutions reaccreditation
Article 3

By 30 June of the current year, the Agency publishes the reaccreditation plan for the next year on the notice board and on the official web page of the Agency. Apart from the plan, the institution can be reaccredited at the proposal of the competent Minister or at the request of authorized authority of the institution undergoing reaccreditation.

Procedure before the competent authority
Article 4

Provisions of the Law on Administrative Procedure apply in the institution reaccreditation procedure, unless these Rules govern otherwise.

Submitting the reaccreditation application

Article 5

The reaccreditation procedure is initiated by the institution by submitting the application.

The institution shall submit the application for reaccreditation (hereinafter referred to as: application) at least eight months before the expiry of accreditation, that is, of previous reaccreditation of institution.

The authorized authority of the institution submits the application to the Agency on a prescribed institution reaccreditation application form prescribed by the Agency, which makes an integral part of these Rules and is published on Agency's web page.

Along with the reaccreditation application, it is mandatory for the institution to submit the following:

- documents indicated in section C of the application form,
- filled in Self-evaluation Report form with evidence on meeting the criteria and
- certificate of payment of administrative fee.

The institution submits the reaccreditation application in hard copy and electronically (on USB within the envelope) in language in official use and in English language.

The institution reaccreditation procedure will end within six months following the submission of application, and in accordance with these Rules.

Review of completeness of reaccreditation application

Article 6

The Agency verifies the formal completeness and timeliness of the reaccreditation application within 7 days following the submission of application.

In case the application is incomplete or incomprehensible, that is, that not all of the required documents have been submitted, the Agency notifies the applicant in writing to remedy the observed deficiencies within eight days following the receipt of the notification.

If the applicant fails to remedy the observed deficiencies within the period referred to in paragraph 2 of this Article, the Agency shall reject the application by its Decision.

Self-evaluation

Article 7

The institution shall implement the self-evaluation procedure in a manner and under the criteria set out by the Self-evaluation Report form, which makes an integral part of these Rules.

During the self-evaluation procedure, the institution assesses the compliance of criteria with regard to the study programmes, teaching equipment, qualifications of academic staff, teaching method, student admission, percentage of students passing the exams, percentage of graduates and other.

The self-evaluation procedure has to end before the submission of the reaccreditation application.

After the procedure is closed, the institution submits to the Agency the Self-evaluation Report for the period of maximum five years, adopted by a competent authority of the institution that has to comprise all relevant data regarding the institution and the study programmes.

Reaccreditation Committee

Article 8

In the interest of establishing facts of significance for making the decision on reaccreditation application of institution, the Agency sets up the expert Committee for reaccreditation of institutions (hereinafter referred to as: Committee).

Members of the Committee are appointed by the Agency from a pool of experts set on the basis of the public call that is published on web page of the Agency.

Universities Reaccreditation Committee consists of minimum seven members and the other institutions Reaccreditation Committee of minimum five members.

At least five members of Universities Reaccreditation Committee, that is, three for the reaccreditation of other institutions, have to be university teachers with academic title or scientists from the scientific research institutions in scientific areas in which the study programmes are performed in institution under evaluation.

At least three members of the Universities Reaccreditation Committee, that is, two members for reaccreditation of other institutions, referred to in paragraph 4 of this Article, have to be employed at an international university or scientific institute.

One member of the Committee has to be a student of the final year of undergraduate studies, master studies or doctoral studies, who is elected based on the Agency's public call.

The student must not be studying in the institution under evaluation and has to be recognized by excellence and regular attendance of studies.

One member of the Committee may be an expert in the area of labour market, who is elected out of the pool of experts referred to in paragraph 2 of this Article.

Rights and duties of the Committee members

Article 9

A member of the Committee shall:

- analyse the filled in forms and documentation submitted by a Coordinator,
- notify the Coordinator of possible need for clarifications or additional documentation;
- visit the institution;
- keep notes during the discussion with representatives of the institution during the visit;
- participate in the training and meetings when invited by the Agency;
- participate in writing the institution Reaccreditation Report and assess the fulfilment of criteria;
- give recommendations for improvement of the quality of work of the institution;
- at the Agency's request, plead with regard to the institution's opinion on the institution Reaccreditation Report;
- if needed, correct the institution Reaccreditation Report in accordance with the institution's justified opinion and
- meet all of the given deadlines.

The Agency appoints one of the Committee members as Chairman of the Committee.

The Chairman of the Committee shall:

- be familiar with the quality assurance system in higher education in Montenegro,
- be familiar with European standards and guidelines;

- coordinate the Committee's work and determine precise assignments for other members of the Committee;
- chair the Committee meetings and manage electronic and other communication of the Committee members;
- propose to the Coordinator the replacement for the Committee member who performs his/her tasks unknowingly in accordance with these Rules;
- conduct meetings with managers of the institution undergoing assessment and study programmes being conducted in that institution;
- ensure the consistency of Reaccreditation Reports and
- integrate the final Report and deliver it to the Agency.

Chairman and members of the Committee shall participate in the Committee's work and knowingly perform the entrusted assignments.

Chairman, as well as the Committee members, shall be entitled to a fee in the amount determined by the Agency's director in accordance with appropriate regulation.

Conflict of interest

Article 10

Members of the Committee must not be in the conflict of interest. Members of the Committee are in the conflict of interest if:

- a) a member of the Committee is/was under an employment contract or any cooperation agreement or has for the last two years been under an employment contract or any other cooperation agreement with the institution under reaccreditation, or participates in a project the respective institution takes part in;
- b) a member of the Committee takes part or has in the last two years taken part in management, professional or advisory bodies of the institution under reaccreditation;
- c) a member of the Committee is a person related to the members of management bodies of the institution under reaccreditation, i.e. is a relative of the Committee member in a straight line and laterally to the second degree of kinship, is in-law up to the first degree of kinship, marital and extra marital spouse, adopter and adoptee;
- d) a member of the Committee studies in the institution under reaccreditation.

A member of the Committee cannot be employed in the institution he/she evaluates within three years following the completion of the reaccreditation procedure.

Before and after the Committee's visit to the institution there shall be no direct communication between the members of the Committee and the institution under reaccreditation.

Communication referred to in paragraph 3 of this Article shall be carried out by a Coordinator.

In case of any breach of the provision referred to in paragraph 3 of this Article, the member of the Committee shall notify the Coordinator thereof. Expert who has breached the provision referred to in paragraph 3 of this Article shall be excluded from the pool of experts.

Before, during and after the visit to the institution, the Committee members may not give or accept any gifts.

Members of the Committee sign the Confidentiality and Non-conflict of Interest Statement on a separate form which makes an integral part of these Rules.

Coordinator of the reaccreditation procedure

Article 11

For each procedure the Agency determines a Coordinator among the Agency's employees, who shall:

- check the completeness of the reaccreditation application in accordance with Article 6 and return it to the institution for amendments if needed;
- coordinate the Committee's work;
- suggest the composition of the Commission to the director of the Agency (hereinafter referred to as: Director) not later than within 5 days after the application becomes formally complete;
- carry out the tasks of written and verbal communication with the institution and members of the Committee;
- deliver to the Committee members the acts required for the implementation of the reaccreditation procedure;
- organize and conduct training of experts for working in the Committee;
- organize the visit to the institution with the predetermined protocol;
- check factual and structural correctness of the institution Reaccreditation Report;
- complete the documentation on reaccreditation of institution and
- coordinate the subsequent monitoring of implementation of recommendation from the institution Reaccreditation Report (follow-up).

After the Coordinator recognizes that the reaccreditation application is formally-legally accurate, Director appoints members of the Committee within 5 days following the submission of the Coordinator's proposal.

The Agency will submit the decision appointing the members of the Committee to the institution, for the purposes of providing the opinion.

The institution will submit the opinion regarding the decision on setting up the Committee within three days.

If the institution provides negative opinion and the Agency assesses it as justified, the Agency will appoint new Reaccreditation Committee.

Training of the Reaccreditation Committee

Article 12

Before the site visit, all members of the Committee shall undergo training regarding the proceedings, tasks, procedures and method of preparing the institution Reaccreditation Reports, evaluation, as well as European standards and guidelines and other issues relevant for the institution reaccreditation procedure.

Five days before the visit to the institution, the Committee shall submit a preliminary Report comprising the preliminary opinion concerning any standard (in accordance with the available documents) and the need for possible submission of additional information, data and documents required for making the objective opinion consolidated by a Coordinator. One day before the site visit at the latest, the Coordinator sends the list of additional documentation the Committee will have insight in to the institution.

One day before the site visit at the latest, the Coordinator introduces the Committee members to the Plan of the visit and considers the preliminary Report.

The Committee establishes the facts of significance for making the decision on the application by reviewing the reaccreditation application, Self-evaluation Report including criteria and the site visit for the purposes of direct insight into its work.

Committee site visit Article 13

The Committee shall suggest the date of the site visit within 15 days following the receipt of the application, containing the affiliated documentation, for evaluation.

The Coordinator notifies the institution of the time of the visit 5 days following the receipt of the information by the Committee.

The visit to the institution has to be made within 60 days following the submission of the application with the affiliated documentation to the Committee for its evaluation.

The Coordinator submits the Plan of visit of the Committee to the institution at least seven days before the scheduled arrival.

Chairman of the Committee, in agreement with the members of the Committee, drafts the site visit plan, containing a clear protocol with the proposed date of the visit, time of the meetings, topics for discussion, as well as the relevant representatives of the institution the meeting is required with and submits it to the Coordinator not later than one day before sending the Plan to the institution.

The program of site visit, as a rule, includes:

- discussion with the management of institution;
- discussion with the persons in charge of the study programme;
- discussion with current students from different cycles or years and representatives of student organizations (if institution is about to be established, this activity can be completed in the subsequent verification of implementation of recommendations from the institution Reaccreditation Report);
- discussion with the representatives from the labour market who have the cooperation agreements signed with the institution;
- verification of existing documents of significance for the study programme, that is, for institution, and can be reviewed on the site;
- discussion with teaching and non-teaching staff and
- tour of the infrastructural and other material capacities required for the implementation of a study programme (classrooms, libraries, laboratories, computer laboratories, student services, etc.)

The site visits last for one day at least and can last longer at the proposal of the Committee.

In addition to the members of the Committee, Coordinator may also, if necessary, be accompanied by an Interpreter and Assistant Coordinator during the site visit.

Following the approval of the Director and the institution, independent observers may also participate in the site visit and sign the Confidentiality Statement.

The institution shall provide the Committee with all of the required data, free access and insight into the teaching process and Institution management process.

The institution shall provide the Committee with adequate premises for the scheduled meetings during the visit, Internet access and a room the Committee will use for their own meetings.

The site visit ends with the meeting with the management of the institution, in which the Chairman of the Committee informs the participants of his/her essential observations and evaluation.

Audio, visual and audio-visual recording without the knowledge and approval of the participants in the reaccreditation procedure is forbidden.

Institution Reaccreditation Report Article 14

The Committee makes a unique institution Reaccreditation Report.

The institution reaccreditation report is made on the basis of reaccreditation application, Self-evaluation Report and documents submitted by the institution, as well as on the basis of knowledge acquired during the site visit.

The Report is prepared on a template which makes an integral part of these Rules and mandatory contains recommendations for improvement.

Institution Reaccreditation Report particularly contains:

- assessment of fulfilment of criteria and comments to the fulfilment of each of the criteria within the standard;
- observed deficiencies in the work of the institution being reaccredited with the clarification and suggestions for their remedying;
- recommendations for improvement of the work of the institution being reaccredited and
- position of the Committee on reaccreditation of institution (hereinafter referred to as: reaccreditation position).

Reaccreditation position referred to in paragraph 4 indent 4 of this Article makes an integral part of the Reaccreditation Report and can be:

1. acceptance of the reaccreditation application for the period of maximum five years, with recommendations for improvement;
2. rejection of the reaccreditation application.

Reaccreditation Report of the Committee containing the reaccreditation position, signed by its members, shall be submitted to the Agency within 30 days following the site visit.

The Committee member who does not agree with the decision of its majority has to submit his/her opinion in writing, as an integral part of the institution Reaccreditation Report.

If any of the Committee's member wishes to add his/her review to the Reaccreditation Report, he/she will submit it as its integral part.

Coordinator reviews the institution Final Reaccreditation Report submitted by the Committee. If he/she establishes the Report needs to be upgraded, he/she shall electronically submit his/her suggestions for upgrading the Report to the Committee. The Committee shall, within 8 days, upgrade the Report and deliver it to the Agency together with its reaccreditation position.

The Agency shall submit the Reaccreditation Report containing the reaccreditation position to the institution so that it can provide its comments and suggestions within eight days.

The Agency shall pass the institution's declaration to the Committee within 3 days following its receipt.

The Committee shall respond to possible objections of the institution within seven days following the receipt of the declaration.

Decision on reaccreditation

Article 15

The Agency makes the decision on institution reaccreditation in the Reaccreditation Report, based on the proposal of the Committee for acceptance of the reaccreditation application.

The Agency shall make the decision rejecting the reaccreditation application based on the reaccreditation position of the Committee referred to in Article 14 paragraph 5 point 2.

The decision referred to in paragraph 1 and paragraph 2 of this Article the Agency passes within 8 days following the receipt of final reaccreditation report of the institution.

The Agency submits its decision and reaccreditation report to the institution.

Reaccreditation certificate

Article 16

Based on the decision on reaccreditation of institution, the Agency issues the reaccreditation certificate to the institution.

Reaccreditation certificate is issued for the period of five years maximum.

The Certificate is issued on a separate template which is established by a competent Ministry.

Additional monitoring of implementation of recommendations from the Report of the Committee (follow-up)

Article 17

The institution undergoing the reaccreditation procedure shall be subject to mandatory monitoring of work and implementation of recommendations from the Report of the Expert Committee (follow-up).

In accordance with the Committee recommendation, institution shall prepare and submit to the Agency the Action Plan for meeting the recommendations from the institution reaccreditation report within 90 days following the adoption of the reaccreditation decision.

The Action Plan referred to in paragraph 2 of this Article indicates executors for each of the proposed activities, time for implementation, measurable indicators and assets for checking the indicators regarding their implementation.

Additional monitoring of the institution's work and implementation of the recommendations from the institution reaccreditation report includes the period of two years following the date of submitting the Action Plan to the Agency.

Three months at the latest after expiry of the period included in the Action Plan, the institution submits the Action Plan Implementation Report to the Agency, in which it describes in details and documents supported with appropriate evidence and attachments the results of implemented activities, aimed at quality assurance.

The Report on additional monitoring of implementation of the recommendations from the institution reaccreditation report is prepared by the Committee.

Based on the Action Plan Implementation Report, the Committee within 30 days submits the Additional monitoring report to the Agency, providing in it the final evaluation regarding the fulfilment of recommendations from the institution reaccreditation report.

The Committee may propose to the institution additional recommendations for improving the quality of work within the range of implementation of recommendations that are the subject of additional follow-up, with deadline for their implementation.

The Institution shall present the Report and additional recommendations of the Committee within the follow-up procedure in the next reaccreditation procedure.

Publications of reports, decisions and register of reaccredited institutions
Article 18

Decision on institution reaccreditation and report on reaccreditation of institution are published on web page of the Agency.

The Register of reaccredited institutions in Montenegro is maintained by the Agency and is published on web page of the Agency.

Detailed contents and method of keeping the Register are established by the Agency.

Entry into force
Article 19

These Rules are published on web page of the Agency and apply as of the date of their publication.

On the date of publication of these Rules, the previous Rules (number 01-630/19-212/1 of 06.12.2019.) shall cease to exist.

Number: 01-607/23-409/1
Podgorica, 22.11.2023.

DIRECTOR
Goran Danilovic (signed)

Round seal of the Agency for Control and Quality Assurance of Higher Education

APPLICATION FOR REACCREDITATION OF HIGHER EDUCATION INSTITUTION

A. APPLICANT¹

1. Basic data

Name of the institution

Organization of studies

Institution		Joint programme of institution or organizational unit with local institution		with foreign institution	
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Type of the institution

	University		Faculty		Academy of Art		Higher school
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Headquarters and address of the institution

Telephone:

Fax:

<input type="text"/>	<input type="text"/>
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E-mail:

Webpage:

<input type="text"/>	<input type="text"/>
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2. Ownership structure

Institution:

<input type="checkbox"/>	<input type="checkbox"/>	Public	<input type="checkbox"/>	<input type="checkbox"/>	Private	<input type="checkbox"/>	<input type="checkbox"/>	Public-private
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Organizational unit:

Name²

<input type="checkbox"/>	<input type="checkbox"/>	Public	<input type="checkbox"/>	<input type="checkbox"/>	Private	<input type="checkbox"/>	<input type="checkbox"/>	Public-private
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¹ For joint study programmes the data are shown for all institutions.

² Only in case if ownership structure of indicated organizational unit differs from the ownership structure of institution. If there are many organizational units having different ownership structure than the institution, also indicate the others.

3. Former entry into registers:

a) Initial institution accreditation³:

Number:

Date of the issued certificate:

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b) Valid institution reaccreditation certificate⁴ :

Number:

Date of the issued certificate:

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c) Licence of institution:

Number:

Date of the issued certificate:

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4. Former entry into registers:

a) Initial institution accreditation⁵:

Number:

Date of the issued certificate:

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b) Valid institution reaccreditation certificate⁶ :

Number:

Date of the issued certificate:

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c) Licence of institution:

Number:

Date of the issued certificate:

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5. Authorities and bodies of institution

5.1. Institution administrative authority

Name of authority:

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First name and last name of the Head:

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Name of the act appointing Head

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Date of appointing the Head:

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³ Initial accreditation of all of the study programmes at establishment of institution.

⁴ Or valid decision on accreditation or reaccreditation of institution.

⁵ Initial accreditation of all study programmes.

⁶ Or valid decision on accreditation or reaccreditation of institution

Contact of the Head:

Telephone:

Email:

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5.2. Institution management authority

Name of authority:

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First name and last name of the Head:

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Name of the act appointing Head

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Date of appointing the Head:

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Contact of the Head:

Telephone:

Email:

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5.3. Institution professional authority

Name:

Telephone:

Email:

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5.4. Body in charge of institutional quality

Name:

Telephone:

Email:

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5.5. Scope of reaccreditation⁷

Faculty_____	
UNDERGRADUATE study programmes	
Academic studies	Applied studies
• • •	• • •

⁷ For each organizational unit /faculty the institution indicates all study programmes according to the levels of studies, which are the subject of reaccreditation

MASTER study programmes	
• • •	• • •
DOCTORAL study programmes	
• • •	• • •

B. ACTIVITIES OF THE INSTITUTION

Fields of education and research in institution/organizational unit:

Fields ⁸		Studies							
		Undergraduate		Master		Doctoral		Research	
Number	Name	Institution	Unit	Institution	Unit	Institution	Unit	Institution	Unit
1.	Natural sciences								
2.	Technical-technological sciences								
3.	Medical sciences								
4.	Social sciences								
5.	Humanistic sciences								
6.	Agricultural sciences								
7.	Art								
8.	Interdisciplinary sciences								

C. ACTS AND DOCUMENTS OF THE INSTITUTION

Document number	Name	Institution*	Unit*
C.1.	Incorporation act (law, decree, contract, decision, order) on the initial incorporation, as well as additional acts on founding rights of the successors		
C.2.	Act on entry into the Central Register of Commercial Entities		
C.3.	Act appointing the administration authority		
C.4.	Act appointing the management authority		
C.5.	Act on accreditation		
C.6.	Act on reaccreditation		
C.7.	Act on the license		
C.8.	Act on the license for performing scientific-research activity		
C.9.	Articles of Association		
C.10.	Rules of study in undergraduate studies		
C.11.	Rules of study in post-graduate studies		
C.12.	Rules of doctoral studies		
C.13.	Rules on organization and operation of the quality assurance system		

*insert the document reference number

⁸ The fields are defined in accordance with the Law on Higher Education (Official Gazette of Montenegro [55/2018](#)) and classified pursuant to the Law on National Qualification Framework (Official Gazette of Montenegro 80/2010)

D. VERIFICATION OF SUBMITTED MATERIALS

1.	ACTS OF THE INSTITUTION	Hard copy	C.1	C.2.	C.3.	C.4.	C.5.	C.6.	C.7.	C.8.
		Electronic								
2.	INSTITUTION DOCUMENTS	Hard copy	C.9	C.10.	C.11.	C.12.	C.13.			
		Electronic								
3.	REACCREDITATION DOCUMENTS	Hard copy	SELF-EVALUATION REPORT WITH CRITERIA							
		Electronic								
4.	STATEMENT OF THE APPLICANT	Hard copy								
		Electronic								

C. STATEMENT OF THE APPLICANT

By signing of this application the authorized person of institution declares:

1. That he/she is familiar with the Rules for the institutions reaccreditation procedure and Standards and guidelines for the institutions reaccreditation and accepts them;
2. That the Institution reaccreditation application has been submitted, containing the following:
 - Filled in form of Institution reaccreditation application with the attached documents,
 - Filled in form of the Self-evaluation report with the criteria,
 - Attached documents as evidence of meeting the criteria, and
 - Certificate of payment for the study programme⁹ reaccreditation application.
3. That he/she will, on demand, also submit the other necessary documents, welcome the Reaccreditation Committee during the institution site visit and present all data necessary for the evaluation of study programme;
4. That he/she guarantees the accuracy of all the data indicated in the submitted documents.

Place and date:

**Authorized person
Name and title**

⁹ Law on Administrative Fees (Official Gazette of Montenegro 45/14)

Template for the

SELF-EVALUATION REPORT WITH THE CRITERIA

NAME OF THE INSTITUTION	NAME OF THE ORGANIZATIONAL UNIT
No.	No.
Date and place	Date and place

Note: For each criterion you should explain its compliance or non-compliance, attaching the document or excerpt of a document as evidence.

STANDARD 1. POLICY FOR QUALITY ASSURANCE

Institutions should have a policy for quality assurance that is public and forms part of their strategic management. Internal stakeholders should develop and implement this policy through appropriate structures and processes, while involving external stakeholders.

Guidelines:

Policies and processes are the main pillars of a coherent institutional quality assurance system that forms a cycle for continuous improvement and contributes to the accountability of the institution. Such system supports the development of quality culture in which all internal stakeholders assume responsibility for quality and engage in quality assurance at all levels of the institution. In order to facilitate this, the policy has a formal status and is publicly available.

CRITERIA

a. Quality assurance policy is formally adopted and publicly available (date of adoption, web page with publicly available document).

b. Policy of the institution supports the organization of the quality assurance system.

c. Policy of the institution supports the organizational units as well as individual employees and motivates students to assume their responsibilities with regard to the quality assurance.

d. Policy of the institution supports the academic integrity and freedom and is vigilant against a possibility of academic frauds.

e. Policy of the institution protects against intolerance of any kind or discrimination against the students or staff.

f. Policy of the institution supports the involvement of external stakeholders in quality assurance.

Evidence for checking the fulfilment of standard:

- Strategy or Rulebook on quality assurance
- Statement of mission and vision of the higher education institution
- Statute of the higher education institution
- Decisions establishing administrative and management authorities in the institution (documents referred to in Section C of the institution reaccreditation application)
- Evidence establishing a formal body in charge of internal quality assurance in the institution
- Annual work report of the body for internal quality assurance in the institution
- The list of conducted surveys in the previous five years period
- A copy of the annual student survey in the procedure of institution self-evaluation
- Document analyzing results of conducted surveys
- Valid contracts with companies
- Statute of the students' parliament

STANDARD 2. DESIGN AND APPROVAL OF PROGRAMMES

Institutions should have processes for the design and approval of their programmes. The programmes should be designed so as to meet the objectives set for them, as well as the envisaged learning outcomes. The qualifications resulting from these programmes should be clearly specified and communicated and refer 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.

Guidelines:

Study programmes are the core of the higher education institutions' teaching mission. The students are provided with academic knowledge and skills, as well as those that are transferrable, which may influence their personal development and may be applied in their future carriers.

CRITERIA

a. Study programme contains overall programme objectives in line with the institutional strategy and have clearly intended learning outcomes

b. Study programme is designed in cooperation with students and other stakeholders.

c. Study programme benefits from external expertise and reference points.

d. Study programme reflects the four purposes of higher education of the Council of Europe (see Scope of application and concepts).

e. Study programme is designed so as to enable smooth student progression throughout the studies.

f. Study programme defines the expected student workload, e.g. by ECTS credits.

g. Study programme includes well-structured practice opportunities where appropriate.

h. Study programme is subject to a formal approval process within the institution.

Evidence for checking the fulfilment of standard:

- *The list of all accredited study programmes in the institution (Attachment-Table 2.1)*
- *Decision of appropriate authority of the institution (Council, Senate and Management Board) establishing the study programme/es*
- *Curricula for all study programmes implemented in the institution and information lists with clear overview of valuation and forms of testing knowledge and grading*
- *Evidence on implementation of practical teaching (25% per study programme)*
- *Statement on support of professional organizations, commercial and social partners*
- *Evidence on participation of commercial entities in the process of designing and creating of curriculums*
- *Pre-contracts on business cooperation for the purposes of conducting student practice*

STANDARD 3. STUDENT-CENTRED LEARNING, TEACHING AND ASSESSMENT

Institutions should ensure that the programmes are delivered in a way that encourages students to take an active role in creating the learning process, and that the assessment of students' knowledge reflects such approach.

Guidelines:

Student-centred learning and teaching plays an important role in stimulating students' motivation, their self-reflection and engagement in the learning process. It implies a careful consideration of the design and delivery of study programmes and assessment of outcomes.

CRITERIA

a. In learning and teaching it respects and adjusts to the diversity of students and their needs, enabling flexible learning paths.

b. In learning and teaching, different modes of delivery are considered and used, where appropriate.

c. In learning and teaching, the different pedagogical methods are used.

d. In learning and teaching the modes of delivery and pedagogical methods are regularly evaluated and adjusted.

e. In learning and teaching, it encourages the sense of students' independence, ensuring adequate guidance and support from the teaching staff.

f. In learning and teaching, mutual respect between the students and teachers is promoted.

g. In learning and teaching, there are appropriate procedures for dealing with students' complaints.

h. Persons assessing the students are familiar with the existing testing and examination methods and receive support in developing their own skills in that field.

i. Criteria and methods for knowledge assessment, as well as the marking criteria, are published in advance.

j. The knowledge assessment allows students to demonstrate to which extent the planned learning outcomes have been achieved. Students are given feedback, which, if necessary, is linked to advice on the learning process.

k. Where possible, the knowledge assessment is carried out by more than one examiner.

l. Rules of knowledge assessment take into account the mitigating circumstances.

m. Knowledge assessment is consistently and fairly applied to all students and carried out in accordance with the specified procedures.

n. There is a formal procedure for students' complaints.

Evidence for checking the fulfilment of standard:

- Study rules at undergraduate, master and doctoral study programmes
- Rules on knowledge assessment in the institution
- Evidence establishing a formal body in charge of acting upon the students' objections and complaints
- Evidence of using software for checking plagiarism
- Examples of reports on checking plagiarism for master and doctoral thesis

STANDARD 4. STUDENT ADMISSION, THEIR PROGRESSION DURING THE STUDIES, RECOGNITION AND CERTIFICATION

Institutions should consistently apply the pre-defined and published regulations covering all phases of studying, e.g. student admission, progression during the studies, recognition and certification.

Guidelines:

Providing conditions and support that are necessary for students to make progress in their academic career is in the best interest of every individual student, programme, institution and system. It is of crucial importance to have fit-for-purpose procedures of admission, recognition and completion of studies, especially when students are mobile within and across the higher education system.

CRITERIA

a. Access policies, admission processes and criteria are implemented consistently and in a transparent manner. Introduction of students to the institution work and induction to the programme is provided.

b. The institution puts in place both processes and tools to collect, monitor and react to the information on student progression during the studies.

c. Institutional practice for recognition is in line with the principles of the Lisbon Recognition Convention.

d. Cooperation with other institutions, quality assurance agencies and national ENIC/NARIC centre aimed at ensuring coherent recognition across the country.

e. After the programme completion, the students receive the documentation explaining the qualifications they obtained, including achieved learning outcomes and the context, level, content and status of the studies they attended and successfully completed.

Evidence for checking the fulfilment of standard:

- *Rulebook, criteria and requirements for students' admission to each study cycle*
- *Teaching plan and schedule per study programme*
- *Evidence on established procedure of monitoring information on students' advancement throughout studies*
- *Copy of diploma and diploma supplement for each study cycle*
- *Copy of the contract on studying*
- *Rules on students' mobility*
- *List of implemented mobilities for students in the previous five years period (Attachment – Table 4.1.)*

STANDARD 5. TEACHING STAFF

Institutions should assure themselves of the competence of their teaching staff. They should apply fair and transparent processes for the recruitment and development of staff.

Guidelines:

The lecturer's role is essential in creating the high quality experience of studying and enabling the acquisition of knowledge, competences and skills. The diversifying student population and stronger focus on learning outcomes require student-centred learning and teaching and the role of the teacher is therefore also changing (see Standard 1.3).

CRITERIA

a. The institutions set up and abide to clear, transparent and fair processes for the employment and conditions of employment that recognise the importance of teaching.

b. The institution offers and promotes opportunities for the professional development of teaching staff.

c. The institution encourages scientific activities in order to strengthen the link between education and research.

d. The institution encourages innovation in teaching methods and the use of new technologies.

Evidence for checking the fulfilment of standard:

- *The list of teaching staff engaged in the institution (people with academic titles) (Attachment – Table 5.1)*
- *The list of teaching staff engaged in the institution (teaching associates) (Attachment – Table 5.2)*
- *CVs and employment contracts for engaged teaching staff*
- *Rulebook on academic title appointment for teaching staff*
- *Decisions on academic title appointment for teaching staff*
- *Teaching staff workload plan by study programme in the institution (Attachment – Table 5.3)*
- *The list of scientific research works, that is, the list of sci/scie/ssci/a&hci indexed works of the teaching staff in scientific magazines for the previous five years period (Attachment – Table 5.4)*
- *The list of scientific research projects of the institution for the previous five years period (Attachment – Table 5.5)*
- *The list of mentors according to currently applicable regulations regarding the fulfilment of the*

requirements for mentors (Attachment – Table 5.6)

- *The list of implemented mobilities for teaching and academic staff in the previous five years period (Attachment – Table 5.7)*
- *Analysis of the results of students' surveys on the quality of teaching process and work of the teaching staff*
- *Evidence on activities fostering improvement of teachers' competencies and teaching associates (e.g. certificates on completed training, course...)*

STANDARD 6. LEARNING RESOURCES AND STUDENT SUPPORT

Institutions should have appropriate funding for learning and teaching activities and provide adequate and readily available learning resources and student support.

Guidelines:

For the purposes of providing optimal studying experience, institutions provide a range of resources to assist student learning. These resources are different, from physical resources such as libraries, study facilities and IT infrastructure to human support in the form of tutors and other advisers. The role of support services is of particular importance in facilitating the mobility of students within one or more higher education systems.

CRITERIA

a. Institution provides a series of resources for the support in learning process.

b. Institution takes into account the needs of diverse student population, the shift to student-centred learning and flexible modes of learning and teaching, when allocating, planning and providing learning resources and student support.

c. It is ensured through internal quality assurance that all resources are fit for their purpose, available, and that students are informed about the services available to them.

d. Administrative staff and support staff are qualified and have opportunities to develop their competences.

Evidence for checking the fulfilment of standard:

- The list of areas owned by the institution with the area of facilities (amphitheatres, classrooms, laboratories, reading rooms, halls, libraries, organizational units, services, etc.) (Attachment – Table 6.1)
- The list of institution owned equipment used in the teaching process and scientific research work (Attachment – Table 6.2)
- The list of informatics resources and equipment in the institution (Attachment – Table 6.3)
- The list of engaged non-teaching staff in the institution (administrative staff) (Attachment – Table 6.4)
- The list of library units (literature) at students' disposal in the library (Attachment – Table 6.5)
- The list of scientific bases of magazines and scientific paper (Attachment – Table 6.6)
- The list of other resources and services

- *Rules of writing of final paper for each study cycle*

STANDARD 7. INFORMATION MANAGEMENT

Institutions should ensure collection, analysing and using of relevant information for the effective management of programmes and other activities.

Guidelines:

Reliable data are crucial for informed decision-making and for knowing what is working well and what requires additional attention. Effective processes for collecting and analysing information about study programmes and other activities contribute to the internal quality assurance system.

CRITERIA

a. Institution provides information on key performance indicators.

b. Institution provides information on profile of student population.

c. Institution provides information on student progression during their studies, success and dropout rates.

d. Institution provides information on students' satisfaction with their study programmes.

e. Institution provides information on available learning and student support resources.

f. Institution provides information on career paths of the graduates.

Evidence for checking the fulfilment of standard:

- *The total number of students enrolled in all of the accredited study programmes for each study cycle for the previous five years period (Attachment – Table 7.1)*
- *The total number of graduated students compared to the number of enrolled ones in all of the accredited study programmes for each study cycle for the previous five years period (Attachment – Table 7.2)*
- *Number of students enrolled in the study programme within the organizational unit in the institution for the previous five years period (Attachment – Table 7.3)*
- *The list of defended master thesis in the previous five years period (Attachment – Table 7.4)*
- *The list of defended doctoral thesis and artistic projects in the institution in the previous five years period, with the results that have been published or approved for publishing (Attachment – Table 7.5)*
- *Titles of textbooks and monographies issued by the institution as a publisher*
- *The report on the market research results in accordance with the Law on Higher Education, with a special emphasize on applicability of obtained knowledge with graduate students and evidence on monitoring their carrier paths*

STANDARD 8. PUBLIC INFORMATION

Institutions should publish information about their activities and programmes being implemented, which is clear, accurate, objective, up-to-date and readily accessible.

Guidelines:

Information on institution activities is useful for future and current students as well as for graduates, other stakeholders and the public.

CRITERIA

- a.** Institution provides information about its activities and programmes it offers and the admission criteria, the intended learning outcomes of these programmes, the qualifications they award, the procedures for teaching, learning and assessment used, the pass rates and the learning opportunities available to its students, as well as information about graduates' employment.

Evidence for checking the fulfilment of standard:

- *The list of information available on the official web site of the higher education institution aimed at maintaining and improving the quality of work of the institution*

STANDARD 9. CONTINUOUS MONITORING AND PERIODIC REVIEW OF PROGRAMMES

Institutions should monitor and periodically review their programmes to ensure that they achieve the objectives set for them and respond to the needs of students and society. The activities planned or taken as a result of those activities should be communicated to all of the stakeholders concerned.

Guidelines:

The objective of regular monitoring, review and revision of the study programmes is to ensure their appropriate implementation and to create effective learning and supportive environment for students.

CRITERIA

a. Continuous monitoring and periodic review include the content of the programme in the light of the latest research in the given discipline, which is ensuring the state of the art programme.

b. Continuous monitoring and periodic review include the changing needs of society.

c. Continuous monitoring and periodic review include the students' workload, their progression during studies and completion of studies.

d. Continuous monitoring and periodic review include the effectiveness of procedures for students' assessment.

e. Continuous monitoring and periodic review include the students' expectations, needs and satisfaction in relation to the programme.

f. Continuous monitoring and periodic review include the learning environment and support services and their fitness for the purpose of the programme.

g. Programmes are regularly reviewed and revised, including students and other stakeholders.

h. Collected information are analysed and the programme is adapted in order to ensure it is up to date.

i. Revised programme specifications are published.

Evidence for checking the fulfilment of standard:

- *Evidence on innovation of the study programme/es*
- *Evidence on innovating curriculum and literature in accordance with current trends*
- *Evidence on students' and other stakeholders' participation in the procedure of programme revision*

STANDARD 10. CYCLICAL EXTERNAL QUALITY ASSURANCE

Institutions should periodically perform the process of external quality assurance in line with the ESG standards.

Guidelines:

External quality assurance in its different forms can verify the effectiveness of institution's internal quality assurance and can act as a catalyst for improvement and offer the institution a new perspective. It also provides information to assure the institution and the public of the quality of institution's activities.

CRITERIA

a. Institution ensures that the progress made since the last activity in the field of quality assurance is taken into consideration when preparing for the next one.

b. Institution takes part in cyclical procedures of external quality assurance that take account, where relevant, of the requirements of the legislative framework in which they operate.

Evidence for checking the fulfilment of standard:

- Decision and report of the competent authority on previous accreditation/reaccreditation
- Evidence on implementation of recommendations from the previous accreditation/reaccreditation period
- Evidence of students' participation in the procedure of self-evaluation of institution and quality check

STANDARD 11. MECHANISMS OF ACADEMIC INTEGRITY AND STRENGTHENING THE CULTURE OF INTEGRITY

Higher education institutions strive to strengthen the culture of academic integrity of their staff, students and partners. Higher education institutions integrate mechanisms for discovering, monitoring and preventing all forms of violations of academic integrity and including the risk management approach in the self-evaluation procedures and activity plans.

Guidelines:

Transparency of relevant information, training of all internal actors on the significance of academic integrity, raising awareness, open and clear dedication to the principles and values of academic integrity all contribute to the improvement of culture of quality in higher education institutions and with all other actors. Monitoring of the status, discovering threats to degrading integrity and updated response to changes also have to be included in the self-evaluation procedure of the institution.

CRITERIA

a. The higher education institution has adopted clear policies of integrity that are understandable and acceptable to all internal actors.

b. The higher education institution has set out appropriate mechanisms and bodies for identifying and resolving potential risks, for the prevention of abuse in the area of academic integrity and for protection of individuals (e.g. ethics committees, ombudsman for academic integrity and similar).

c. Within the framework of self-evaluation procedure, the higher education institution monitors compliance of work with the principles and values of academic integrity (e.g. questionnaires for students, teachers, researchers and other relevant actors)

d. The higher education institution educates and trains students and its own personnel on respecting the academic integrity values and to promote its principles.

<p>e. The higher education institution prepares the integrity plan setting out the risk factors and proposes measures for improvements (to consider possible and probable course of actions, define the list of consequences and prepare the activity plan for remedying risks).</p>
<p>f. The higher education institution promotes the principle of zero tolerance in cases of violation of academic principles and values (including plagiarism, fraud, responsible management of the teaching process, learning and research, gender based and other forms of harassment, responsibility of academic community, etc.)</p>
<p>Evidence for checking the fulfilment of standard:</p> <ul style="list-style-type: none"> - <i>Decision establishing the Ethics Committee</i> - <i>Decision adopting the Code of ethics</i> - <i>Evidence on carrying out periodical training of teachers and students, such as for example, the number of courses/training carried out for the purpose of raising awareness on the importance of academic integrity, number of teachers and students who attended courses, different forms of testing and similar (Attachment – Table 11.1)</i> - <i>Glossary of academic integrity violation</i> - <i>Two (years) report submitted to the Ethics Committee on recorded violations of rules of ethics (based on the students' surveys, reports of the colleagues, complaints and similar)</i> - <i>Rulebooks and clearly defined trainings for mastering studies and skills of academic writing for students</i> - <i>Evidence on reviewing master and doctoral theses – Decision establishing the body in charge of the review, founding act, code of conduct, method of review and similar, quantitative data on applications received, applications sent for the second review or rejected applications (Attachment – Table 11.2)</i> - <i>Disciplinary bodies for violations of other forms of institution Code of ethics violations – Decisions establishing disciplinary bodies, quantitative indicators on received/ruled forms of violations, by years, for the period 2020/2022 (Attachment – Table 11.3)</i> - <i>Risk Management Plan (including identified risks with clearly defined measures of implementation, monitoring and revision)</i> - <i>Training Plan for students and teaching staff, integration of academic integrity principles into the teaching and learning processes and the method that provides understanding of the Glossary of violations among the students and the staff</i>

The list of documents and attachments submitted by the institution along with the reaccreditation application (according to the standards)

Standard 1. Policy for quality assurance

- Strategy or Rulebook on quality assurance
- Statement of mission and vision of the higher education institution
- Statute of the higher education institution
- Decisions establishing administrative and management authorities in the institution (documents referred to in Section C of the institution reaccreditation application)
- Evidence establishing a formal body in charge of internal quality assurance in the institution
- Annual work report of the body for internal quality assurance in the institution
- The list of conducted surveys in the previous five years period
- A copy of the annual student survey in the procedure of institution self-evaluation
- Document analyzing results of conducted surveys
- Valid contracts with companies
- Statute of the students' parliament

Standard 2: Design and approval of programmes

- The list of all accredited study programmes in the institution (Attachment-Table 2.1)
- Decision of appropriate authority of the institution (Council, Senate and Management Board) establishing the study programme/es
- Curricula for all study programmes implemented in the institution and information lists with clear overview of valuation and forms of testing knowledge and grading
- Evidence on implementation of practical teaching (25% per study programme)
- Statement on support of professional organizations, commercial and social partners
- Evidence on participation of commercial entities in the process of designing and creating of curriculums
- Pre-contracts on business cooperation for the purposes of conducting student practice

Standard 3: Student-centered learning, teaching and assessment

- Study rules at undergraduate, master and doctoral study programmes
- Rules on knowledge assessment in the institution
- Evidence establishing a formal body in charge of acting upon the students' objections and complaints
- Evidence of using software for checking plagiarism
- Examples of reports on checking plagiarism for master and doctoral thesis

Standard 4. Student admission, their progression throughout studies, recognition and certification

- Rulebook, criteria and requirements for students' admission to each study cycle
- Teaching plan and schedule per study programme
- Evidence on established procedure of monitoring information on students' advancement throughout studies
- Copy of diploma and diploma supplement for each study cycle
- Copy of the contract on studying
- Rules on students' mobility
- List of implemented mobilities for students in the previous five years period (Attachment – Table 4.1.)

Standard 5. Teaching staff

- The list of teaching staff engaged in the institution (people with academic titles) (Attachment – Table 5.1)
- The list of teaching staff engaged in the institution (teaching associates) (Attachment – Table 5.2)
- CVs and employment contracts for engaged teaching staff
- Rulebook on academic title appointment for teaching staff
- Decisions on academic title appointment for teaching staff
- Teaching staff workload plan by study programme in the institution (Attachment – Table 5.3)
- The list of scientific research works, that is, the list of sci/scie/ssci/a&hci indexed works of the teaching staff in scientific magazines for the previous five years period (Attachment – Table 5.4)
- The list of scientific research projects of the institution for the previous five years period (Attachment – Table 5.5)
- The list of mentors according to currently applicable regulations regarding the fulfilment of the requirements for mentors (Attachment – Table 5.6)
- The list of implemented mobilities for teaching and academic staff in the previous five years period (Attachment – Table 5.7)
- Analysis of the results of students' surveys on the quality of teaching process and work of the teaching staff
- Evidence on activities fostering improvement of teachers' competencies and teaching associates (e.g. certificates on completed training, course...)

Standard 6. Learning resources and student support

- The list of areas owned by the institution with the area of facilities (amphitheatres, classrooms, laboratories, reading rooms, halls, libraries, organizational units, services, etc.) (Attachment – Table 6.1)

- The list of institution owned equipment used in the teaching process and scientific research work (Attachment –Table 6.2)
- The list of informatics resources and equipment in the institution (Attachment –Table 6.3)
- The list of engaged non-teaching staff in the institution (administrative staff) (Attachment – Table 6.4)
- The list of library units (literature) at students' disposal in the library (Attachment – Table 6.5)
- The list of scientific bases of magazines and scientific paper (Attachment –Table 6.6)
- The list of other resources and services
- Rules of writing of final paper for each study cycle

Standard 7. Information management

- The total number of students enrolled in all of the accredited study programmes for each study cycle for the previous five year period (Attachment –Table 7.1)
- The total number of graduated students compared to the number of enrolled ones in all of the accredited study programmes for each study cycle for the previous five years period (Attachment – Table 7.2)
- Number of students enrolled in the study programme within the organizational unit in the institution for the previous five years period (Attachment – Table 7.3)
- The list of defended master thesis in the previous five years period (Attachment – Table 7.4)
- The list of defended doctoral thesis and artistic projects in the institution in the previous five years period, with the results that have been published or approved for publishing (Attachment – Table 7.5)
- Titles of textbooks and monographies issued by the institution as a publisher
- The report on the market research results in accordance with the Law on Higher Education, with a special emphasize on applicability of obtained knowledge with graduate students and evidence on monitoring their carrier paths

Standard 8. Public information

- The list of information available on the official web site of the higher education institution aimed at maintaining and improving the quality of work of the institution

Standard 9. Continuous monitoring and periodic review of the programmes

- Evidence on innovation of the study programme/es
- Evidence on innovating curriculum and literature in accordance with current trends
- Evidence on students' and other stakeholders' participation in the procedure of programme revision

Standard 10. Cyclical external quality assurance

- Decision and report of the competent authority on previous accreditation/reaccreditation
- Evidence on implementation of recommendations from the previous accreditation/reaccreditation period
- Evidence of students' participation in the procedure of self-evaluation of institution and quality check

Standard 11. Mechanisms of academic integrity and strengthening of culture of integrity

- Decision establishing the Ethics Committee
- Decision adopting the Code of ethics
- Evidence on carrying out periodical training of teachers and students, such as for example, the number of courses/training carried out for the purpose of raising awareness on the importance of academic integrity, number of teachers and students who attended courses, different forms of testing and similar (Attachment –Table 11.1)
- Glossary of academic integrity violation
- Two (years) report submitted to the Ethics Committee on recorded violations of rules of ethics (based on the students' surveys, reports of the colleagues, complaints and similar)
- Rulebooks and clearly defined training for mastering studies and skills of academic writing for students
- Evidence on reviewing master and doctoral theses –Decision establishing the body in charge of the review, founding act, code of conduct, method of review and similar, quantitative data on applications received, applications sent for the second review or rejected applications (Attachment –Table 11.2)
- Disciplinary bodies for violations of other forms of institution Code of ethics violations – Decisions establishing disciplinary bodies, quantitative indicators on received/ruled forms of violations, by years, for the period 2020/2022 (Attachment – Table 11.3)
- Risk Management Plan (including identified risks with clearly defined measures of implementation, monitoring and revision)
- Training Plan for students and teaching staff, integration of academic integrity principles into the teaching and learning processes and the method that provides understanding of the Glossary of violations among the students and the staff

ATTACHMENTS

Table 2.1. The list of all accredited study programmes in the institution

No.	Name of faculty/ organizational unit	Name of the study programme	Type of the study programme					
			Undergraduate academic	Master academic	Doctoral academic	Undergraduate applied	Master applied	Integrated
1.								
2.								
3.								
4.								
5.								
6.								
7.								
8.								
9.								
10.								

Table 4.1. The list of implemented mobilities for students in the previous five years period

No.	Student's name and surname	Parent institution the student was enrolled in	Institution in which mobility is implemented	Period of mobility (from - to)
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				

Table 5.1. The list of teaching staff engaged in the institution (people with academic title)

No.	Name and surname	Academic title	Date of appointment to the title	Full working hours / not full working hours	Contract number	Date of the contract	Narrow scientific field of choice
1.							
2.							
3.							
4.							
5.							
6.							
7.							
8.							
9.							
10.							

Note: Expert Committee will randomly check the certain number of employment contracts.

Table 5.2. The list of teaching staff engaged in the institution (teaching associates)

No.	Name and surname	Scientific title	Contract number	Date of the contract	Subject of engagement
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					

Note: Expert Committee will randomly check the certain number of contracts.

Table 5.3. Plan of the teaching staff load per study programme in the institution

Teacher/teaching associate				Courses				Actual workload						Workload valuation	
No.	Name and surname	Title	Level of study	Name	Class load	Semester	Total calculation of classes per semester	Winter			Summer			Total (per semester)	Norm (per semester)
								Class	Practice	Groups	Class	Practice	Groups		
1.															
2.															
3.															
4.															
5.															

Table 5.4. The list of scientific research paper, that is, the list of SCI/SCIE/SSCI/A&HCI indexed paper of the teaching staff in scientific magazines for the previous five years period

No.	Title of the paper	Author's name and surname	Scientific magazine	Year of publishing
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				

Table 5.5. The list of scientific research projects of the institution for the previous five years period

No.	Name of the project	National (N) or international (I)	Source of financing	Participants in the project	Project duration (from – to)
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					

Note: Expert Committee will randomly check the certain number of contracts on project engagement.

Table 5.6. The list of mentors according to the currently applicable regulations with regard to the fulfilment of the conditions for mentors

No.	Mentor's name and surname	Name of the institution/organizational unit in which the mentor is employed	Number of SCI/SCIE/SSCI/A&HCI and indexed paper
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			

Table 5.7. The list of implemented mobilities for teaching and academic staff in the previous five years period

No.	Name and surname	Parent institution of engagement	Institution in which mobility is implemented	Mobility period (from-to)
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				

Table 6.1. The list of areas owned by the institution with areas of facilities (amphitheatres, classrooms, laboratories, reading rooms, halls, libraries, organizational units, services etc.)

No.	Room	Number of units	Total number of places	Area (m2)
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
TOTAL				

Table 6.2. The list of institution owned equipment used in the teaching process and scientific research work

No.	Name and type	Purpose of the equipment	Quantity
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
	TOTAL		

Table 6.3. The list of informatic resources and equipment in the institution

No.	Name of the equipment	Quantity
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
	TOTAL	

Table 6.4. The list of engaged non-teaching staff in the institution (administrative staff)

No.	Name and surname	Name of the organizational unit	Workplace	Employed for an unlimited period of time	Engaged under the contract
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					

Note: Expert Committee will randomly check certain number of employment and engagement contracts

Table 6.5. The list of library items (literature) at students' disposal at the library

No.	Library items	Number
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
	TOTAL	

Table 6.6. The list of scientific bases of magazines and scientific paper

No.	Name of the scientific base	Link	Number and date of the subscription agreement
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			

Table 7.1. Total number of enrolled students in all accredited study programmes for each study cycle for the previous five years period

No.	Type of the study programme	Number of study programmes	Total number of enrolled students in all accredited study programmes for the previous five years period				
			2018/2019	2019/2020	2020/2021	2021/2022	2022/2023
1.	Undergraduate academic						
2.	Master academic						
3.	Doctoral academic						
4.	Undergraduate applied						
5.	Master applied						
6.	Integrated						

Note: The institution will adjust the data per study years, depending on current study year.

Table 7.2. Total number of graduated students compared to the number of enrolled ones in all accredited study programmes for each study cycle for the previous five years period

No.	Type of the study programme	Total number of graduated students compared to the number of enrolled ones in all accredited study programmes for each study cycle for the previous five years period														
		2018/2019			2019/2020			2020/2021			2021/2022			2022/2023		
		Enrolled	Graduated	%	Enrolled	Graduated	%	Enrolled	Graduated	%	Enrolled	Graduated	%	Enrolled	Graduated	%
1.	Undergraduate academic															
2.	Master academic															
3.	Doctoral academic															
4.	Undergraduate applied															
5.	Master applied															
6.	Integrated															
7.	Total															

Note: The institution will adjust the data per study years, depending on current study year.

Table 7.3. Number of enrolled students per study programme within the organizational unit in the institution

No.	Name of the institution	Name of the organizational unit	Name of the study programme	Type of the study programme*	Total number of students approved by the license	Total number of enrolled students in the study programme for the previous five years period				
						2018/2019	2019/2020	2020/2021	2021/2022	2022/2023
1.										
2.										
3.										
N.**										

*Note: Enrol appropriate level of study programme (Undergraduate academic, Master academic, Doctoral academic, Undergraduate applied, Master applied and integrated).

**Note: Continue entering data according to the established Table template.

Table 7.4. The list of defended master thesis in the previous five years period

No.	Name and surname of the candidate	Name of the mentor	Name of the master thesis	Year of defence
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				

Table 7.5. The list of defended doctoral thesis and artistic projects in the institution in the previous five years period with the results that have been published or accepted for publishing

No.	Name and surname of the candidate	Name of the mentor	Name of the doctoral thesis/ artistic project	Year of defence	Published results (magazine/year/link)
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					

Note: Expert Committee will randomly check several doctoral thesis/artistic projects and the above published results.

Table 11.1. Evidence on conducting periodic training of teaching staff and students

	2019	2020	2021	2022	2023
Mechanisms and activities aimed at promoting the significance of strengthening and protecting the academic integrity, non-ethical conduct and similar (lectures, gatherings, seminars, round tables, workshop and similar)					
Number of teachers who attended training					
Number of students who attended training					
If there are online courses on academic integrity, the number of students on the 1st year of studies who passed the course (and the percentage compared to the total number of students of the 1st year of studies)					

Table 11.2. Data related to the checks of master and doctoral thesis

Master thesis					
	2019	2020	2021	2022	2023
Number of received applications for checking plagiarism					
Number of checked master thesis					
Number of master thesis that are sent for the second check					
Number of rejected applications					

Doctoral thesis					
	2019	2020	2021	2022	2023
Number of received applications for checking plagiarism					
Number of checked doctoral thesis					
Number of doctoral theses that are sent for the second check					
Number of rejected applications					

Table 11.3. Number of initiated and closed disciplinary proceedings

	2019	2020	2021	2022	2023
Number of initiated disciplinary proceedings					
Number of closed disciplinary proceedings					