

THEQC INSTITUTIONAL SELF-EVALUATION REPORT (ISER) **WRITING GUIDE**

Complementary to the Institutional External Evaluation
and Accreditation Criteria (**Version 2.0**)

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GENERAL INFORMATION

Introduction

The Institutional Self-Evaluation Report (ISER) is annually submitted by the institution with the aim of following annual self-evaluation processes of the institution and presenting a point of reference for the Institutional External Evaluation Program and/or institutional accreditation processes. This guide sets forth the rules to be applied in writing a self-evaluation report in addition to a list of remarks and recommendations on the subject, a self-evaluation report template (Annex-1) and remarks on the indicators (Annex-2).

Aim

The aim of the report is to help the institution recognize its strengths and areas for further development while contributing to the institution's improvement steps. The drafting process of the report provides the institution with an opportunity to benefit from the Institutional External Evaluation Program and institutional accreditation processes as far as possible. The report must be employed for establishing contact and cooperation among stakeholders, within self-evaluation activities, and for the dissemination and internalization of quality assurance culture. To enhance the contribution of the drafting process to the institution, inclusiveness and participation must be ensured in the activities, a process management approach must be adopted rather than bureaucratic data management, and transparency must be ensured in quality commission works as well as continuous education activities.

Scope

The self-evaluation report is required to be written in compliance with the template presented in the guide and include all the requested information, documents and evidence for the institution's qualitative and quantitative evaluation by the Turkish Higher Education Quality Council (THEQC). The criteria presented in the Institutional External Evaluation and Accreditation Criteria document also constitute the basis of the institution's internal quality assurance.

Since the institution's external evaluation will be conducted in a way to encompass the four main aspects stated below, the self-evaluation report of the institution is expected to answer the following questions:

- What does the institution intend to achieve?
(Mission and objectives of the institution)
- What is the institution's roadmap to achieve its mission and objectives?
(The governance/organizational processes and activities of the institution)
- How does the institution make sure that it has achieved its mission and objectives?
(Quality assurance processes, internal evaluation processes)
- How does the institution plan to improve its processes in future?
(Continuous improvement activities for the institution to protect its competitive advantage within the ever-changing higher education agenda)

Preparation and Publication of the Report

The ISERs are required to be uploaded on the Quality Assurance Management Information System (QAMIS) developed by the THEQC. For the uploading process, the higher education institution's quality commission chair or a person delegated by the commission chair will be authorized to log in to the web-based system. The person authorized to log in to the system as admin can create user accounts and roles for the employees of the institution.

After institutions upload their ISERs on the system, the ISERs will be published on the THEQC's official website www.yokak.gov.tr. Besides, higher education institutions are expected to publish their ISERs on their own websites.

Important Remarks:

- This guide aims to provide an insight into the scope of the evaluations in each section of ISERs and guide the institution by presenting its strengths and areas for further development.
- ISERs are expected to have five main headings (**Quality Assurance System, Learning and Teaching, Research and Development, Social Contribution, Governance System**) and be prepared on the basis of the criteria and sub-criteria listed under these headings.
- While writing a report by means of QAMIS, the remarks should be added for each criterion under the “headings” section, and the maturity levels of sub-criteria should be referred while writing remarks on the related criteria. The maturity level of relevant sub-criteria will be scaled by the institution and logged into QAMIS (Table 1).

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

Heading	B. Learning and Teaching	A set of criteria and sub-criteria are listed under the headings.
Criteria	B.1 Design and Approval of Programs	ISERs will be written on the basis of criteria.
Sub-Criteria	B.1.2. Program’s purpose, outcomes and compliance with NQF-HETR	Sub-criteria will be referred to in the writing of criteria and their maturity level will be supported with evidence and scaled via QAMIS. Any additional remarks for the sub-criteria will not be written.

- The general approach adopted for the determination of maturity levels of sub-criteria is listed below.



Exemplary Implementation

5 Sustainable and matured (properly applied continuous improvement and PDCA cycles) implementations are adopted and guaranteed in the entire institution in line with the institutional goals (continuity, internalization); the institution has specific and innovative implementations, some of which serve as a model for other institutions.

Planning, Implementing, Checking and Acting

4 The results of the implementations that are applied in all the fields (all the units in the institution) and stakeholder opinions are systematically monitored in compliance with the institution's internal quality assurance system and evaluated with stakeholders to take necessary measures (or to manage and improve the internal quality assurance system).

Planning and Implementing

3 The institution has implementations that are applied in all the fields/units and some results have been obtained from these implementations. But the results are not monitored or only monitored to a limited extent (unsystematic monitoring, absence of monitoring mechanisms in some of the implementations, disparities between monitoring activities and the internal quality assurance system).

Planning

2 The institution has developed plans (defined processes); but has not put them into practice (only certain mechanisms are available or the plans to implement them are still in the developmental stage) or the existing implementations are not yet applied in all the fields and/or units.

No Plans/Implementations Available

1 The institution does not have any plans, defined processes, implementations or mechanisms.

Figure 1. General Approach on the Maturity Levels of Sub-Criteria

- The scope of maturity levels regarding the sub-criteria is presented in detail in the institutional self-evaluation report template (Annex 1).
- Information on the evidence required to demonstrate the institution's meeting level of the criteria while writing ISERs is presented in the "*evidence*" section below each sub-criteria.
- Instead of giving short answers such as "this aspect/system is present/not present in our institution", a methodology that will thoroughly illustrate how the relevant process is managed and operates in the institution must be adopted in the writing of the report in consideration of the aspects stated in the guide. It must also be noted that any additional specific situation and/or data peculiar to the institution other than the ones stated in the guide can be included in the report.
- After providing general information on the institution and its quality assurance system, learning and teaching, research and development, social contribution and governance system in the first annual report, these aspects are not required to be stated again in following reports. It would be sufficient to provide statements on the changing and improving aspects and the areas that could not be improved. If the institution is included in the external evaluation program, the report must comprise the improvement activities carried out in line with the feedback provided in the Institutional Feedback Report, the tangible improvement outcomes in this scope, the points that could not be improved, and the underlying reasons impeding improvement.

ANNEX 1 – INSTITUTIONAL SELF-EVALUATION REPORT TEMPLATE

INFORMATION ON THE INSTITUTION

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

1. Contact Information

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

2. Institutional History

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

3. Mission, Vision, Values and Objectives

The institution's mission, vision, values and objectives must be summarized in this section to answer the question "What does the institution intend to achieve?".

A. QUALITY ASSURANCE SYSTEM

In this section, the institution is expected to explain its quality assurance policies as part of its strategic management as well as the methods of determining, practicing, monitoring and improving its strategies to implement these policies.

In line with this purpose, the institution must present information on:

- The institution's quality assurance processes, internal evaluation processes and action plans to answer the question "*What is the institution's roadmap to achieve its mission, vision and objectives?*".
- The assessment and monitoring system as part of the institution's quality assurance and internal evaluation processes to answer the question "*How does the institution make sure that it has achieved*".

its mission and objectives?”.

- Improvements made by the institution to protect its competitive advantage within the rapidly changing higher education agenda, the ways of structuring and managing the completed or ongoing works (or projects) in the institution as part of internal and external evaluation processes of the institution to answer the question *“How does the institution plan to improve its processes in future?”.*
- How the institution has improved its processes according to external evaluation results, how the effects of the improvement activities reflect on operation and working methods of the institution—in other words; how the PDCA cycle is completed—to answer the question *“What is the institution’s roadmap to achieve its mission and objectives?”.*

A.1. Mission and Strategic Objectives

The institution must define and publish its quality assurance policies and strategies for the implementation of the policies as a component of its strategic management.

A.1.1. Mission, vision, strategic objectives and targets

Maturity level

1	2	3	4	5
The institution does not have any mission, vision or strategic objectives that are defined within the scope of the strategic plan.	The institution has a mission, vision and strategic objectives that are defined within the scope of the strategic plan. But no practice is available to implement these or the existing practices do not cover all the fields and/or units.	The institution has some practices implemented in the entire institution in line with the institution's strategic objectives and targets defined within the scope of the strategic plan, and certain results have been obtained from these practices. But necessary mechanisms for the monitoring of the strategic plan have not been formed and/or not been employed in the strategic plan and/or any decision-making process.	The practices that cover all the units and fields in line with the institution's strategic objectives and targets defined within the scope of the strategic plan are systematically monitored in compliance with the institution's internal quality assurance system. The monitoring results are evaluated with stakeholders to take necessary measures.	Matured and sustainable practices to realize the strategic objectives and targets as part of the strategic plan are adopted in the entire institution. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.

Evidence

- *Strategic plan*
- *Strategic objectives*
- *Performance reports*
- *Surveys conducted*
- *Meetings, events and reports periodically organized/designed with internal and external stakeholders within the institution's execution of the strategic plan*
- *Evidence showing the strategic plan and objectives' compliance with the United Nations Sustainable Development Goals*
- *Evidence with regard to the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation*

A.1.2. Policies on quality assurance, learning and teaching, research and development, social contribution and governance system

Maturity level

1	2	3	4	5
The institution does not have any defined policy.	The institution has defined policies in some of the main headings including quality assurance, learning and teaching, research and development, social contribution and governance system. However, these policies have not been employed in any planning or decision-making process.	The institution has practices implemented in all the fields in line with the defined policies, and certain results have been obtained from these practices. But necessary mechanisms to monitor their results are not available.	The relations between the institutional policies in all the fields are established, and this integrated structure guides the internal quality assurance system. The results are monitored and evaluated with stakeholders to take necessary measures.	Matured and sustainable practices in line with the institutional policies in all the fields are adopted in the entire institution and taken as a basis in decision-making processes. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.

Evidence

- *Policy documents (learning-teaching policy documents, distance education should be encompassed [if any].)*
- *Documents proving that the policy documents are prepared with stakeholder participation*
- *Indicators showing that the policy documents are shared on the institution’s website*
- *Statements included in policy documents and application examples that show the integrated relationship (emphasis on research in study programs, emphasis on social contribution in research processes, emphasis on distance education)*
- *Statements and application examples that show the relationship between policy documents and internal quality assurance system*
- *Mechanisms indicating that the policy documents are monitored and evaluated*
- *Performance indicators of policy documents peculiar to the institution*
- *Annual evaluation reports of policy documents*
- *Evidence with regard to the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation*

A.1.3. Institutional performance management

Maturity level

1	2	3	4	5
The institution does not have any performance management practice or performance indicators defined in compliance with the strategic plan.	Some indicators and mechanisms are defined to monitor the performance in the institution. But no practice is available to monitor these indicators or the existing practices do not cover all the fields/processes (quality assurance system, learning and teaching, research and development, social contribution and governance system).	Performance indicators and key performance indicators are defined in all the fields. However, the monitoring of these indicators are not systematic or do not cover all the fields.	All performance indicators related to all the fields/processes are systematically monitored in line with the institution's internal quality assurance system. The results are evaluated with stakeholders and employed in decision-making processes, and necessary measures are taken with regard to performance management.	Matured and sustainable institutional performance management in line with the institutional goals is adopted in the entire institution. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.

Evidence

- *Performance indicators*
- *Key performance indicators*
- *Level of meeting the performance indicators in units and the institution*
- *Monitoring the performance indicators within the Information Management System*
- *Findings about the performance indicators in annual reports*
- *Performance program report*
- *Improvement practices*
- *Evidence showing that the distance education performance is analyzed and monitored within the institutional performance management (if any)*
- *Evidence with regard to the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation*

A.2. Internal Quality Assurance

The institution must establish an internal quality assurance system and enable the continuous improvement of its processes by reviewing them through this system. The authorities, duties and responsibilities of the institution’s quality commission must be clearly defined and quality assurance culture must be disseminated in the institution.

A.2.1. Quality Commission

Maturity level

1	2	3	4	5
The institution does not have a quality commission responsible for maintaining quality assurance processes.	The duties, authorities and responsibilities and the organizational structure of the institution’s quality commission are defined. However, the quality commission does not play an active role in planning and/or decision-making processes related to these duties, authorities and responsibilities.	The quality commission conducts its activities as part of its duties, authorities and responsibilities in an inclusive, participative and transparent manner. However, these practices are not executed as part of the integrated quality management in the institution and the results of the practices are not monitored.	The quality commission and the quality-oriented organizational structures formed to support the commission are systematically conducting their works in line with their duties, authorities and responsibilities and in the scope of the integrated quality management in the institution. The findings obtained from these practices are monitored and the monitoring results are evaluated to enable improvement.	Sustainable and integrated practices of the quality commission and other relevant organizational units that are in line with the institutional goals are adopted in the entire institution. The institution has innovative implementations in quality management, some of which serve as a model for other institutions.

Evidence

- *Working procedures and principles of the quality commission*
- *The quality commission’s organizational structure, distribution of members and ways of representing units*
- *Administrative support organization of the quality commission*
- *Advisory board*
- *Quality organizations and working groups in units*

- *Decisions issued by the senate*
- *Decisions issued by the senior management*
- *Evidence showing the participation of internal and external stakeholders in the works of the quality commission (meetings, events, surveys and reports)*
- *Evidence with regard to the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation*

A.2.2. Internal quality assurance mechanisms (PDCA cycles, calendar, structure of units)

Maturity level

1	2	3	4	5
The institution does not have any internal quality assurance system or mechanisms.	The institution has internal quality assurance mechanisms but they do not cover all the fields/processes (learning and teaching, research and development, social contribution, governance system).	The institution has internal quality assurance mechanisms (processes, PDCA cycles, authorities, duties and responsibilities, quality tools) that cover all the fields and processes; and certain results have been obtained from the applications of these mechanisms. But they are not executed as part of the integrated quality management of the institution and the results of these practices are not monitored.	The internal quality assurance mechanisms that cover all the units and processes in the institution are systematically conducted in line with the defined processes and an integrated quality management approach. The findings obtained from these practices are monitored and the monitoring results are evaluated with stakeholders to enable improvement.	Sustainable and integrated internal quality assurance practices that cover all the units and processes and in line with the institutional goals are adopted in the entire institution. The institution has innovative implementations in quality management, some of which serve as a model for other institutions.

Evidence

- *Quality manual or defined quality processes*
- *Information Management System*
- *Quality-oriented organizational structure*
- *Self-evaluation and peer review approach*
- *Periodically organized information and introductory meetings*
- *Feedback methods*
- *Documents on stakeholder engagement*
- *Decisions issued by the senate and the administrative committee*
- *Annual improvement reports*
- *Calendars on PDCA cycles*
- *Evidence with regard to the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation*

A.2.3. Leadership and quality assurance culture

Maturity level

1	2	3	4	5
The institution does not have an institutional culture or leadership approach that complements the quality assurance culture in the institution.	Some plans have been made to establish an institutional culture and leadership approach that complement the quality assurance culture in the institution. But these plans are not put into practice, or the existing practices do not cover all the fields and units.	The institution has an institutional culture and leadership approach that complement the quality assurance culture in the institution and cover all the units and processes. Certain results have been obtained from the activities conducted in this scope. But these practices are not executed as part of the integrated quality management of the institution and their results are not monitored.	The institution has an institutional culture that enables the permanence of high quality and a leadership approach that enables the coordination of quality efforts in line with the institutional values and expectations and embraces the quality processes. Leadership and quality assurance culture are monitored as part of the integrated quality management perspective of the institution, evaluated with stakeholders, and necessary measures are taken according to the monitoring results.	Sustainable and matured institutional quality culture and leadership approach that cover all the units and processes and in line with the institutional goals are adopted in the entire institution. The institution has innovative implementations for strengthening its quality culture and leadership approach, some of which serve as a model for other institutions.

Evidence

- *The methods employed to assess and monitor the leadership qualifications of the institution's administrators and the practices undertaken to improve these qualifications (leadership programs etc.)*
- *The methods employed to assess and monitor the quality culture in the institution and the practices undertaken to improve the quality culture (improvement reports)*
- *Documents on stakeholder engagement*
- *Evidence with regard to the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation*

A.3. Stakeholder Participation

The institution must ensure the internal and external stakeholders' contribution and participation in the quality assurance system.

A.3.1. Participation of internal and external stakeholders in the processes of quality assurance, learning and teaching, research and development, governance and internationalization

Maturity level

1	2	3	4	5
The institution does not have mechanisms or implementations that would enable stakeholder participation in all the processes maintained in the institution (quality assurance, learning and teaching, research and development, social contribution, governance system, internationalization)	The institution has defined its stakeholders, conducted stakeholder analyses and has a set of defined processes for stakeholder participation. But no practice related to these processes is available or the existing practices do not cover all the processes, fields and stakeholder groups.	Participation of stakeholders, who have been determined in relation to the processes maintained in the institution, in processes and decision-making mechanisms have been enabled and some application results have been obtained from this interaction. But these practices are not executed as part of the integrated quality management of the institution and their results are not monitored.	The stakeholder participation in all the processes and decision-making steps of the institution is maintained as part of the integrated quality management in the institution and the findings obtained from stakeholder participation practices are monitored and evaluated with stakeholders. Necessary measures are taken according to the monitoring results.	The stakeholder participation in all the processes and decision-making steps of the institution is enabled with matured and sustainable practices and adopted in the entire institution. The institution has innovative implementations for strengthening stakeholder participation, some of which serve as a model for other institutions.

Evidence

- *List of internal and external stakeholders*
- *Data collection tools employed in receiving stakeholders' opinions (surveys, focus group meetings, workshops etc.)*
- *Stakeholder analysis report (If any, distance education stakeholders should be included.)*
- *Mechanisms (websites, e-mails, systematic meetings etc.) formed to receive stakeholder feedback (complaints, suggestions etc.)*

- Documents showing that stakeholder representation is enabled in the boards and commissions of senior management bodies and units (in decision-making processes)
- Documents, charts and reports showing that planning, implementing, monitoring and improvement processes take stakeholder opinions into consideration
- Alumni tracking system
- Evidence with regard to the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation

A.4. Internationalization

The institution must periodically review and continuously improve the activities it maintains in line with its internationalization strategy and objectives.

A.4.1. Internationalization policy

Maturity level

1	2	3	4	5
The institution does not have a defined internationalization policy.	The institution has a defined internationalization policy. But no implementation related to this policy is available.	The institution has some practices in line with the internationalization policy that considers the aspects of learning and teaching, research and development and social contribution; and certain results have been obtained from them. But the results of these practices are not monitored.	The practices conducted in line with the institution's internationalization policy are monitored in a systematic manner and in compliance with the institution's internal quality assurance system. These practices are evaluated with stakeholders to take necessary measures.	The institution's specific internationalization model is adopted in the entire institution. The institution has innovative implementations with regard to its internationalization model, some of which serve as a model for other institutions.

Evidence

- *Documents on internationalization policy*
- *International protocols and cooperation practices*
- *Documents related to the monitoring and evaluation of the indicators on internationalization policies*
- *Evidence for stakeholder participation*
- *Evidence with regard to the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation*

A.4.2. Management and organizational structure of internationalization processes

Maturity level

1	2	3	4	5
The institution does not have any plans for the management and organizational structure of internationalization processes.	The institution has plans for the management and organizational structure of internationalization processes. But no implementation with regard to these plans is available.	Some results have been obtained by implementing the management and organizational structure of the internationalization processes in accordance with the institutional preferences. But their results are not monitored.	The outcomes and stakeholder opinions with regard to the management of the internationalization processes in the institution are systematically monitored and evaluated with stakeholders to take necessary measures.	The management of internationalization processes covers all the units/fields in the institution and is adopted and guaranteed in the entire institution with the help of integrative, sustainable and matured practices that are in line with the institutional goals. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.

Evidence

- *Management and organizational structure of internationalization processes*
- *Units conducting internationalization activities*
- *Evidence for stakeholder participation*
- *Evidence with regard to the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation*

A.4.3. Internationalization resources

Maturity level

1	2	3	4	5
The institution does not have sufficient physical, technical and financial resources in terms of quality and quantity to maintain its internationalization activities.	The institution has plans to obtain sufficient physical, technical and financial resources in terms of quality and quantity to maintain its internationalization activities. But these plans are not put into practice, or the existing practices do not cover all the units.	The sufficient physical, technical and financial resources in terms of quality and quantity to maintain the institution’s internationalization activities are provided by setting a balance among all the units. But the results with regard to the use of these resources are not monitored.	The physical, technical and financial resources in the institution are managed in a way to support the internationalization activities and cover all the units. The findings obtained from these practices are systematically monitored and the monitoring results are evaluated with stakeholders to take necessary measures and diversify resources according to the needs and demands.	The sufficient physical, technical and financial resources in terms of quality and quantity are managed in all the units of the institution in line with the institutional goals (internationalization policy and strategy) and in a sustainable manner. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.

Evidence

- *Documents on the management of the resources allocated to international activities (usage rates of budgets allocated to Erasmus and other international programs, documents on the management of budgets and resources allocated to EU projects and bilateral protocols etc.)*
- *Evidence with regard to the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation*

A.4.4. Monitoring and improving the internationalization performance

Maturity level

1	2	3	4	5
The institution does not have any plans or defined processes to monitor and evaluate its internationalization performance.	The institution has plans and defined processes to monitor and evaluate its internationalization performance. But these plans and processes are not put into practice, or the existing practices do not cover all the units.	The practices regarding the monitoring and evaluation of the institution's internationalization performance cover all the fields and units. But their results are not monitored or employed in decision-making processes.	The internationalization performance of the institutional units that work for internationalization goals is monitored, evaluated and employed in decision-making processes. The practices related to this aspect are periodically monitored and the monitoring results are evaluated with stakeholders to take necessary measures.	Sustainable and matured practices regarding the monitoring and evaluation of the internationalization performance of the units working for internationalization goals and institutional goals (internationalization policy, objectives and strategy) are adopted and guaranteed in the entire institution. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.

Evidence

- *Indicators employed by the institution to monitor the internationalization performance*
- *Mechanisms formed to check and monitor whether the internationalization goals have been achieved*
- *Annual self-evaluation reports and improvement works on the internationalization processes*
- *Evidence for stakeholder participation*
- *Evidence with regard to the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation*

B. LEARNING AND TEACHING

The evaluation of the institution’s learning and teaching processes is expected in this section. These processes must be approached in consideration of the following aspects: The designation of the institution’s continuous improvement focus and objectives and the persons to implement these objectives, the practice of educational activities, the evaluation of the objectives both quantitatively and qualitatively with a follow-up process and the improvements made in line with the needs by checking the obtained results.

B.1. Design and Approval of Programs

The institution must design its programs in accordance with the objectives of the study programs and learning outcomes. The competencies of the programs must be defined on the basis of the Turkish Higher Education Qualifications Framework (NQF-HETR). The institution must have defined processes for the design and approval of the programs.

B.1.1. Design and approval of programs

Maturity level

1	2	3	4	5
The institution does not have defined and systematic processes regarding the design and approval of programs.	The institution has defined and systematic processes regarding the design and approval of programs, but they do not cover all the fields/programs.	The institution has conducted some implementations in line with the defined processes related to the design and approval of all the programs and certain results have been obtained from these implementations. But their results are not monitored.	The practices regarding the design and approval of programs are systematically monitored and evaluated with the participation of stakeholders to take necessary measures.	Sustainable and matured practices on the design and approval of programs, which are undertaken with the participation of stakeholders, are adopted in the entire institution. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.

Evidence

- *Defined processes employed for the design and approval of programs*
- *The institution’s educational policy and strategic goals and the evidence showing their implementations*
- *Evidence for stakeholder participation*
- *Evidence with regard to the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation*

B.1.2. Program’s objectives, outcomes and compliance with NQF-HETR

Maturity level

1	2	3	4	5
The programs’ objectives, outcomes and compliance with NQF-HETR are not defined in the institution..	The programs’ objectives, outcomes and compliance with NQF-HETR are defined in the institution. But they are not applied in all the fields/programs.	All the programs’ objectives, outcomes and compliance with NQF-HETR are defined, published and associated with the practices related to learning and teaching. But the results of these practices are not monitored.	The practices that encompass all the fields regarding the programs’ objectives, outcomes and compliance with NQF-HETR are systematically monitored and evaluated with stakeholders to take necessary measures.	Sustainable and matured practices on the programs’ objectives, outcomes and compliance with NQF-HETR are adopted in the entire institution. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.

Evidence

- *The relation of program objectives and outcomes to the NQF-HETR (If any, distance education programs should be included.)*
- *Evidence with regard to the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation*

B.1.3. Alignment of course outcomes with program outcomes

Maturity level

1	2	3	4	5
Course outcomes and program outcomes are not aligned in any of the programs in the institution.	Course outcomes and program outcomes are aligned in some of the programs in the institution.	The course outcomes that clearly specify the cognitive level (Bloom level) of the courses and the program outcomes are aligned in all the programs and this alignment is published and reflected on the practices related to learning and teaching (course profiles and curricula etc.) But the results of these practices are not monitored.	The practices that cover all the fields related to the alignment of course outcomes and program outcomes in all the programs are systematically monitored in compliance with the institution's internal quality assurance system and the monitoring results are evaluated with stakeholders to take necessary measures.	Course outcomes and program outcomes are aligned in a clear, practical and sustainable manner and this alignment is internalized in all the programs. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.

Evidence

- *Alignment of program outcomes and course outcomes*
- *Evidence for the implementations demonstrating the relevance of the online course packages purchased from external service providers and offered as part of the distance education system in terms of program and course outcomes (if any)*
- *Evidence with regard to the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation*

B.1.4. Structure of programs and balance in the distribution of courses

(balance between compulsory and elective courses, balance between field-specific knowledge and liberal arts courses, acquiring cultural competence, opportunities to familiarize students with different disciplines)

Maturity level

1	2	3	4	5
The balance in the distribution of courses is not taken into consideration in any of the programs in the institution.	The institution has developed plans regarding the structure of programs and distribution of courses, but they do not cover all the programs.	Program and course info packages of all the programs are designed in consideration of the program structure and balance in the distribution of courses (balance between field-specific and professional knowledge and liberal arts courses, cultural competence, opportunities to familiarize students with different disciplines etc.). But the results of these practices are not monitored.	The practices on program structure and balance in all the programs are systematically monitored and the monitoring results are evaluated with stakeholders and continuously updated by taking necessary measures.	Sustainable and matured practices on the program structure and balance in line with the institutional goals (learning and teaching policy) are adopted in the entire institution. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.

Evidence

- *Websites that publish program and course info packages*
- *Balance in the distribution of courses (compulsory-elective) and the institution’s policies/principles in this regard*
- *Evidence for stakeholder participation*
- *Evidence with regard to the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation*

B.1.5. Student workload based design

Maturity level

1	2	3	4	5
Student workload based design is not available in any of the programs in the institution.	Some plans have been made for student workload based design in programs, but they do not cover all the programs or are not implemented in all the practices related to learning and teaching.	Student workload is defined in all programs, shared with stakeholders (through program and course info packages) and employed in all practices related to learning and teaching (student mobility, recognition of prior learning etc.). However, its results and related implementations are not monitored.	Student workload practice is applied in all programs, is systematically monitored, and the monitoring results are evaluated with stakeholders to take necessary measures.	Student workload practice is adopted in the entire institution in line with institutional goals and in a sustainable manner. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.

Evidence*

- *Definition of student workload credits in the programs of all levels and their announcement to stakeholders*
- *Additional measures that take into account the student workload of online classes, particularly the asynchronous ones (if any)*
- *Definition of student workload credits in professional practices, exchange programs, internships and projects*
- *Mechanisms ensuring that students can actively participate in the practices of applied courses offered by the distance education system (if any)*
- *Documents and mechanisms showing that student participation is enabled while determining student workload in programs*
- *Diploma supplement*
- *Evidence showing that workload based credits are updated in accordance with feedback*
- *Documents that comprise defined processes regarding the transfer and recognition of workload based credits (Measures taken with regard to potential problems in the credit transfer and recognition of applied courses offered through distance education [if any])*
- *Evidence with regard to the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation*

*Evidence should meet the key principles stated in the ECTS Users' Guide 2015.

B.1.6. Assessment and evaluation

Maturity level

1	2	3	4	5
The institution does not have competency-based assessment and evaluation approach in any of its programs.	The institution has designed a competency-based assessment and evaluation system for its programs. But this design does not cover all the programs.	The design for a competency-based assessment and evaluation system covers all the programs in the institution and some results have been obtained from the implementation of this design. But the results of this system are not monitored.	The findings obtained from the practices related to the assessment and evaluation system designed for all programs are systematically monitored and the monitoring results are evaluated with stakeholders to take necessary measures.	The assessment and evaluation system that is designed for all programs in a sustainable manner and in line with the institutional goals is adopted in the entire institution. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.

Evidence

- *The institution's assessment and evaluation system (directives, procedures and principles, information system etc.)*
- *Assessment and evaluation system for online courses, if any (directive, procedures and principles, information system, mechanisms for secure online exams, processes of originality check etc.)*
- *Mechanisms and original implementations that ensure the validity and reliability of the assessments and evaluations made through distance education*
- *Evidence with regard to the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation*

B.2. Student Admission and Progression

The institution must set out a list of open criteria for student admissions, and consistently and permanently employ the predefined and published rules relating to the recognition and certification of degrees, diplomas and other qualifications.

B.2.1. Student admission and recognition of prior learning (skills and knowledge obtained from formal, informal and non-formal learning)

Maturity level

1	2	3	4	5
The criteria and processes for student admission and recognition of prior learning have not been defined in the institution.	The institution has defined and published a set of criteria and processes for student admission and recognition of prior learning, but they do not cover all the fields in the institution.	The defined criteria and processes for student admission and recognition of prior learning are applied in all the programs of the institution. However, the results of the related implementations are not monitored.	The findings obtained from the practices related to student admission and recognition of prior learning are systematically monitored and evaluated with stakeholders. Necessary measures are taken according to monitoring results.	The practices on student admission and recognition of prior learning are adopted in the entire institution in line with institutional goals and in a sustainable manner. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.

Evidence:

- *Defined processes regarding student admission and recognition of prior learning*
- *Documents showing that student workload based credits are used in the recognition of prior learning (They should meet the key principles stated in the ECTS Users' Guide 2015.)*
- *Evidence showing the practices' continuity and coherence with the defined processes*
- *Mechanisms to inform stakeholders*
- *Evidence with regard to the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation*

B.2.2. Recognition and certification of degrees, diplomas and other qualifications

Maturity level

1	2	3	4	5
The criteria and processes for the recognition and certification of degrees, diplomas and other qualifications have not been defined in the institution.	The institution has defined and published a set of criteria and processes for the recognition and certification of degrees, diplomas and other qualifications, but they do not cover all the programs in the institution.	The criteria and processes that are defined in a clear, comprehensive and consistent manner for the recognition and certification of degrees, diplomas and other qualifications are applied in all the programs in the institution. However, the results of the related implementations are not monitored.	The findings obtained from the practices related to the recognition and certification of degrees, diplomas and other qualifications are systematically monitored and evaluated with stakeholders. Necessary measures are taken according to monitoring results.	Matured practices on the recognition and certification of degrees, diplomas and other qualifications are adopted in the entire institution in line with institutional goals and in a sustainable manner. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.

Evidence

- *Defined processes and criteria regarding the recognition and certification of degrees, diplomas and other qualifications*
- *Defined processes and criteria regarding the recognition and certification of degrees, diplomas and other qualifications acquired through distance education*
- *Defined processes and existing practices for tracking student progression in terms academic and career development*
- *Criteria employed in the student admissions other than centrally-placed student groups, such as foreign student examination (YÖS) placements, lateral transfers, and admissions in double major or minor programs*
- *Documents showing that student workload based credits are recognized in exchange programs without any requirement of extra work (They should meet the key principles stated in the ECTS Users' Guide 2015.)*
- *Diploma supplement*
- *Evidence with regard to the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation*

B.3. Student-Centered Learning, Teaching and Evaluation

The institution must make sure that the students achieve the targeted objectives and learning outcomes of the programs during their study periods and must employ practices that contain active learning strategies and methods during this process. A student-centered and competency-based approach must be adopted in assessment and evaluation processes.

B.3.1. Teaching methods and techniques

(active, interdisciplinary studies; interactive, research/learning-oriented methods)

Maturity level

1	2	3	4	5
The institution does not have student-centered approaches in its learning and teaching processes.	Some plans have been made to implement student-centered approaches in the institution’s learning and teaching processes, but these plans are not put into practice or the existing practices do not cover all the fields.	Up-to-date, research/learning- and student-oriented teaching methods and techniques that promote interdisciplinary studies and provide active and interactive student participation are applied in the learning and teaching processes of all the programs and some results have been obtained from these practices. But their results are not monitored.	The findings obtained from the practices related to up-to-date, research/learning- and student-oriented teaching approach that promotes interdisciplinary studies and provides active and interactive student participation are systematically monitored and evaluated with stakeholders. Necessary measures are taken according to monitoring results.	Matured practices on the teaching methods and techniques are adopted in the entire institution in line with the institutional goals and in a sustainable manner. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.

Evidence

- *Practices on active and interactive teaching methods*
- *Practices on developing teaching material for distance education and online teaching principles, methods and techniques*
- *Practices that promote interdisciplinary studies*
- *Learning and teaching center*
- *Instructors’ certificates and other documents on student-centered teaching*
- *Practices on the student-centered learning and teaching approach in the content of training for trainers program (If any, training for trainers module in the distance education system)*
- *Evidence with regard to the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation*

B.3.2. Assessment and Evaluation (introduction of alternative assessment methods and techniques that are diversified according to students’ qualities and learning skills etc.)

Maturity level

1	2	3	4	5
The institution’s programs do not have plans or defined processes on student-centered assessment and evaluation.	The institution’s programs have some plans and defined processes for student-centered assessment and evaluation, but these plans are not put into practice or the existing practices do not cover all the programs.	Practices on student-centered assessment and evaluation are available in all the programs and some results have been obtained from these practices. But the results of this assessment and evaluation system are not monitored.	The findings obtained from the matured practices related to student-centered assessment and evaluation are systematically monitored and the monitoring results are evaluated with stakeholders to take necessary measures.	Matured practices on the student-centered assessment and evaluation are adopted in the entire institution in line with the institutional goals and in a sustainable manner. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.

Evidence

- *Defined processes employed in the assessment and evaluation of student success*
- *Defined processes employed in the assessment and evaluation of student success in distance education (if any)*
- *Assessment and evaluation methods employed to evaluate whether the learning outcomes of courses have been achieved or not*
- *Evidence with regard to the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation*

B.3.3. Student feedback (Surveys on courses, instructors, programs, satisfaction levels; systems for requests and suggestions)

Maturity level

1	2	3	4	5
The institution does not have any mechanisms to receive student feedback.	The institution has formed a set of mechanisms to receive student feedback (about courses, instructors, degree programs, services and overall satisfaction level etc.). But no practice is available in this regard or the existing practices do not cover all the units.	Student feedback (about courses, instructors, degree programs, services and overall satisfaction level etc.) is systematically received (at the end of each semester or academic year). But the feedback is not employed in the decision-making processes that aim improvement.	The findings obtained from the practices related to receiving feedback from all student groups in all programs (valid and reliable practices that contain different instruments) are systematically monitored and the monitoring results are evaluated with stakeholders to take necessary measures.	Matured practices on receiving student feedback are adopted in the entire institution in line with the institutional goals and in a sustainable manner. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.

Evidence

- *Defined student feedback mechanisms*
- *Practices on the improvements made in the scope of student feedback*
- *Examples of student participation in decision-making mechanisms*
- *Evidence with regard to the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation*

B.3.4. Academic consultancy

Maturity level

1	2	3	4	5
The institution does not have a defined academic consultancy process.	The institution has a defined academic consultancy process. But no practice is available in this regard or the existing practices do not cover all the fields.	The institution has academic consultancy practices and some results have been obtained from these practices, but the results are not monitored.	The findings obtained from the practices related to academic consultancy are systematically monitored and the monitoring results are evaluated with stakeholders to take necessary measures.	Matured practices on academic consultancy are adopted in the entire institution in line with the institutional goals and in a sustainable manner. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.

Evidence

- *Defined processes employed in the academic consultancy system for students*
- *Mechanisms and defined processes employed in the academic and technical consultancy systems for students in distance education (if any)*
- *Mechanisms for students' access to consultants*
- *Evidence for student participation*
- *Evidence with regard to the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation*

B.4. Teaching Staff

The institution must be fair and transparent in all the processes pertaining to the recruitment, appointment, promotion and teaching assignments of the teaching staff, and provide opportunities to continuously improve their teaching skills and competencies.

B.4.1. Recruitment, appointment and promotion criteria

Maturity level

1	2	3	4	5
The institution does not have defined criteria or processes for the recruitment, appointment and promotion of teaching staff.	The institution has defined its criteria for the recruitment, appointment and promotion of teaching staff, but field-specific necessities have not been analyzed in the planning stage.	The institution's recruitment, appointment and promotion criteria, which are defined for all the fields and recognized by stakeholders, are implemented and employed in decision-making processes (teaching staff's recruitment, appointment, promotion, course assignments etc.). But the results of these practices are not monitored.	The results of the practices related to recruitment, appointment and promotion criteria are systematically monitored and the monitoring results are evaluated with stakeholders to take necessary measures.	Sustainable and matured practices on recruitment, appointment and promotion in all the fields are adopted in the entire institution in line with the institutional goals. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.

Evidence

- *Defined processes to monitor the teaching performance of teaching staff (appointment and promotion criteria, regulations, directives, definition of processes, guidelines etc.)*
- *Defined principles for inviting or electing adjunct faculty*
- *Practices ensuring that academic staff are assigned in courses related to their own area of expertise*
- *Evidence for stakeholder participation*
- *Evidence with regard to the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation*

B.4.2. Teaching competence (Active learning, distance education, assessment and evaluation, innovative approaches, material development, skills to equip students with competencies and quality assurance system)

Maturity level

1	2	3	4	5
The institution does not have any plans to improve the teaching competence of its teaching staff.	The institution has developed plans to improve the teaching competence of its teaching staff such as innovative approaches, material development, skills to equip students with competencies, and quality assurance system. But these plans are not put into practice or the existing practices (training for trainers events) do not cover all the units.	The institution has some practices to improve the teaching competence of its teaching staff that cover all the units. But the results of these practices are not monitored.	The findings obtained from the practices aiming to improve the teaching competence of the institution's teaching staff are systematically monitored and the monitoring results are evaluated with stakeholders to take necessary measures.	Sustainable and matured practices aiming to improve the teaching competence of the institution's teaching staff are adopted in the entire institution in line with the institutional goals. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.

Evidence

- Evidence for the practices regarding the training of trainers (their scope, methodology, attendance details etc.)
- Evidence for the practices related to the learning and teaching centers
- Defined processes to monitor the teaching performance of teaching staff (appointment and promotion criteria etc.)
- Evidence for the participation of the teaching staff in the planning and improvement of the processes
- Evidence with regard to the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation

B.4.3 Incentives and rewards for learning and teaching activities

Maturity level

1	2	3	4	5
The institution does not have any incentive or reward mechanism for its teaching staff.	The institution has developed plans to create incentive and reward mechanisms for its teaching staff. But these plans are not put into practice or the existing practices do not cover all the fields.	The incentive and reward practices for the teaching staff are maintained in consideration of the teaching staff's competencies and in a fair and transparent manner and cover all the fields. But the results of these practices are not monitored.	The findings obtained from the practices related to incentive and rewarding mechanisms for the institution's teaching staff are systematically monitored and the monitoring results are evaluated with stakeholders to take necessary measures.	Sustainable and matured practices on incentive and rewarding mechanisms for the institution's teaching staff are adopted in all the units of the institution in line with the institutional goals. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.

Evidence

- *Practices to appreciate-recognize and reward the teaching performance of teaching staff*
- *Evidence with regard to the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation*

B.5. Learning Resources

The institution must have the necessary resources and infrastructure to maintain its educational activities and must guarantee that the learning opportunities are suitable and accessible for all students.

B.5.1. Learning resources

Maturity level

1	2	3	4	5
The institution does not have learning resources of sufficient quantity and quality (classrooms, laboratories, libraries, studios, course books, human resources, learning support etc.) to maintain its learning and teaching activities.	The institution has developed plans to create learning resources of sufficient quantity and quality to maintain its learning and teaching activities. But these plans are not put into practice or the existing practices do not cover all the units.	The institution provides learning resources of sufficient quality and quantity by setting a balance among the units. But the results with regard to the use of these resources are not monitored.	The learning resources in all the units of the institution are managed in a way to ensure their accessibility and suitability in terms of quality and quantity. The findings obtained from these practices are systematically monitored and the monitoring results are evaluated with stakeholders to take necessary measures and diversify resources according to the needs and demands.	The suitable and accessible learning resources are managed in all the units of the institution in line with the institutional goals and in a sustainable manner. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.

Evidence

- *Learning resources and their sufficiency*
- *The distribution of student services expenditure in the budget*
- *Access to learning resources*
- *Remote access to learning resources*
- *Improvement of learning resources in relation to the institutional growth (e.g. the relation between the increase in the number of students and the increase in learning resources)*
- *E-learning practices*
- *Evidence for stakeholder participation*
- *Student feedback tools within the services offered to students (surveys etc.)*
- *Improvement reports*
- *Evidence with regard to the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation*

B.5.2. Social, cultural and sportive activities

Maturity level

1	2	3	4	5
The institution does not have social, cultural and sportive activities of sufficient quality and quantity.	The institution has developed plans to organize social, cultural and sportive activities of sufficient quality and quantity (providing space, funds and guidance support etc.). But these plans are not put into practice or the existing practices do not cover all the units.	The institution organizes social, cultural and sportive activities of sufficient quality and quantity in all the units of the institution by setting a balance among the units. But the results of these practices and activities are not monitored.	The social, cultural and sportive activities of sufficient quality and quantity in all the units of the institution are managed on an institutional level (supports are provided for their execution, administrative organization is available etc.). The findings obtained from these practices are systematically monitored and the monitoring results are evaluated with stakeholders to take necessary measures and diversify resources according to the needs and demands.	The social, cultural and sportive activities of sufficient quality and quantity in all the units of the institution are managed in line with the institutional goals and in a sustainable manner. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.

Evidence

- A system that forms, approves, monitors and evaluates student societies
- Processes and mechanisms that form and manage remote and online student societies (if any)
- Evaluation of student societies' annual activities
- A list of the sportive, cultural and social activities organized for students within the relevant year (Information on the types and subjects of the activities, number of participants etc.)
- The results of the student feedback tools (surveys etc.) related to the services offered to students
- Evidence with regard to the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation

B.5.3. Facilities and infrastructure (cafeterias, dormitories, study halls equipped with technologies, health centers etc.)

Maturity level

1	2	3	4	5
The institution does not have facilities and infrastructure of sufficient quality and quantity (cafeterias, dormitories, study halls equipped with technologies; health, transportation and IT services).	The institution has developed plans to create facilities and infrastructure of sufficient quality and quantity. But these plans are not put into practice or the existing practices do not cover all the units; the balance among the units is not considered.	The institution has established facilities and infrastructure of sufficient quality and quantity by setting a balance among the units. But the results with regard to the use of these facilities and infrastructure are not monitored.	The physical resources and spaces in the institution are managed in an integrative manner in order to provide facilities and infrastructure of sufficient quality and quantity in all the units of the institution. The results obtained with regard to the use of all the facilities and infrastructure are systematically monitored and the monitoring results are evaluated with stakeholders to take necessary measures and diversify resources according to the needs and demands.	The suitable and accessible facilities and infrastructure are managed in all the units of the institution in line with the institutional goals and in a sustainable manner. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.

Evidence

- *Sufficiency of facilities and infrastructure*
- *Accessibility of facilities*
- *Improvement of facilities and infrastructure in relation to the institutional growth (e.g. the relation between the increase in the number of units and the increase in physical spaces)*
- *Infrastructure, facilities, professional human resources, hardware and software means available in distance education programs and practices of the institution (if any)*
- *Defined processes and mechanisms for the improvement of students' IT infrastructure and accessibility in distance education (if any)*
- *Evidence for stakeholder participation*
- *The results of the student feedback tools (surveys etc.) related to the services offered to students*
- *Improvement reports*
- *Evidence with regard to the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation*

B.5.4. Accessible university

Maturity level

1	2	3	4	5
The institution does not have any plans for accessible university practices.	The institution has developed plans for accessible university practices. But these plans are not put into practice or the existing practices do not cover all the units.	The accessible university practices in the institution cover all the units, but the results of these practices are not monitored.	The findings obtained from the accessible university practices that cover all the units in the institution are systematically monitored and the monitoring results are evaluated with stakeholders to take necessary measures.	The accessible university practices that cover all the units in the institution are managed in line with the institutional goals and in a sustainable manner. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.

Evidence

- *Practices related to the students with special needs (their representation in boards, accessible university practices, practices in distance education processes etc.)*
- *Documents showing that the feedback are employed in improvement mechanisms*
- *Accessible university awards*
- *Evidence with regard to the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation*

B.5.5. Guidance, psychological counseling and career services

Maturity level

1	2	3	4	5
<p>The institution does not have any plans to provide guidance, psychological counseling or career services of sufficient quality and quantity.</p>	<p>The institution has developed plans to provide guidance, psychological counseling and career services of sufficient quality and quantity. But these plans are not put into practice or the existing practices do not cover all the fields.</p>	<p>The institution provides guidance, psychological counseling and career services of sufficient quality and quantity in all the units of the institution. But the results of these practices are not monitored.</p>	<p>The guidance, psychological counseling and career services of sufficient quality and quantity that are provided in all the units of the institution are managed in an integrative manner (presence of a center that coordinates these services, and an administrative organization managing this center etc.) The results obtained with regard to these services are systematically monitored and the monitoring results are evaluated with stakeholders to take necessary measures and diversify resources according to the needs and demands.</p>	<p>The guidance, psychological counseling and career services of sufficient quality and quantity that are provided in all the units of the institution are managed in line with the institutional goals and in a sustainable manner. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.</p>

Evidence

- *The results of the student feedback tools (surveys etc.) related to the services offered to students*
- *Documents showing that the feedback are employed in improvement mechanisms*
- *Evidence with regard to the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation*

B.6. Monitoring and Review of Programs

The institution must monitor its graduates on a regular basis to ensure that the programs ultimately reach their educational objectives and answer the needs of students and society. The programs must be reviewed and updated periodically.

B.6.1. Monitoring and review of program outcomes (This also covers foreign language education programs in preparatory schools.)

Maturity level

1	2	3	4	5
The institution does not have any mechanisms for the monitoring and review of program outcomes.	The institution has developed some mechanisms regarding the monitoring and review of program outcomes (process and performance indicators). But no practice is currently available, or the existing practices do not cover all the programs.	The institution has introduced some practices for the monitoring of program outcomes in all programs and certain results have been obtained from them. But the results have not been evaluated or employed in decision-making and updating processes.	All program outcomes in the institution are systematically monitored (annually and periodically at the end of the program period) in line with the institutional goals (learning and teaching policy and objectives). The monitoring results are evaluated and updated with stakeholders.	Monitoring all program outcomes in a sustainable manner and in line with institutional goals is guaranteed in the institution. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.

Evidence

- *Defined processes regarding the monitoring and review of programs, including programs and courses offered through distance education (if any)*
- *Examples of mechanisms the institution has established to review the programs in line with the institution's mission, vision and objectives (annual monitoring calendar, bringing the levels of meeting the program outcomes to the Senate's agenda, monitoring the success levels of the programs)*
- *Annual self-evaluation reports of programs (with a focus on program outcomes)*
- *Systems monitoring whether the program and course learning outcomes are achieved (information management system)*
- *Improvements made on the basis of annual self-evaluations of programs*
- *Practices ensuring that all stakeholders are informed on latest improvements and changes*
- *Evidence proving the social contribution of the program monitoring and review efforts (employment data etc.)*
- *Evidence showing whether the program has achieved its teaching objectives with the inclusion of the opinions of the graduates and the business world*
- *Programs developed on the basis of stakeholder engagement and opinions*
- *Enhancements made in programs on the basis of stakeholder engagement and opinions*
- *Defined processes and practices with regard to the encouragement of accreditation efforts*
- *Evaluation and improvement efforts made in English preparatory schools/programs (if any)*
- *Program accreditation*
- *Evidence with regard to the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation*

B.6.2. Alumni tracking system

Maturity level

1	2	3	4	5
The institution does not have an alumni tracking system.	The institution has developed plans to establish an alumni tracking system. But these plans are not put into practice or the existing practices do not cover all the programs.	The institution has practices related to alumni tracking system that cover all the programs and certain results have been obtained from them. But the results have not been evaluated or employed in decision-making processes.	Graduates in all the programs of the institution are systematically monitored in line with the institutional goals (learning and teaching policy and objectives), and necessary measures that cover all the units and programs are taken according to the monitoring results.	The institution has guaranteed the monitoring of graduates in all the programs in line with the institutional goals and graduates have become a component of the institution's quality assurance system. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.

Evidence

- *Alumni tracking system*
- *Satisfaction level of the graduates and the business world with regard to graduate competencies*
- *Improvement practices as part of the alumni tracking system*
- *Evidence for stakeholder participation*
- *Evidence with regard to the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation*

C. RESEARCH AND DEVELOPMENT

An evaluation of the institution’s research processes is expected in this section. The research processes must be approached in consideration of the following aspects: The definition of the institution’s continuous improvement focus and objectives and the persons to implement these objectives, the practice of research activities, the evaluation of the objectives both quantitatively and qualitatively with a follow-up process and the improvements made in line with the needs by checking the obtained results.

C.1. Research Strategy

The institution must conduct research and development activities that are in line with the academic priorities defined in the framework of its strategic plan, able to create values and turn them into social benefits.

C.1.1. The institution’s research policy, objectives and strategy

Maturity level

1	2	3	4	5
The institution does not have a defined research policy, strategy and objectives.	The institution has a research policy, strategy and objectives that define its research approach, principles adopted in research activities, priorities in research and preferences in managing research resources. But no implementation or mechanism is available to put them into practice.	The institution has some practices carried out in line with its defined research policy, strategy and objectives. But the results of these practices are not evaluated.	The practices related to the research policy, strategy and objectives, which are adopted in all the units of the institution, are systematically monitored and necessary measures that cover all the fields and programs are taken according to the monitoring results.	It is guaranteed in the institution that the research activities of the institution can create values and turn them into societal benefits in line with the institution’s research policy. This has been adopted by stakeholders through matured practices. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.

Evidence

- *Research policy*
- *Research strategy and objectives*
- *Evidence for the implementation of the research policy in study programs*
- *Evidence for stakeholder participation*
- *Research performance indicators*
- *Key performance indicators specific to the institution*
- *Evidence with regard to the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation*

C.1.2 Management and organizational structure of research-development processes

Maturity level

1	2	3	4	5
The institution does not have plans for the management and organizational structure of its research-development processes.	The institution has developed plans for the management and organizational structure of its research-development processes. (the position in the non-interventional/interventional spectrum, the way of designing the motivation and guidance function, how short- and long-term goals are clearly defined, research management team and the definition of their tasks). But these plans are not put into practice or the existing practices do not cover all the fields.	Some results have been obtained by implementing the management and organizational structure of the research and development processes in accordance with the institutional preferences in all the fields. But their results are not monitored.	The outcomes and stakeholder opinions with regard to the management of the research and development processes in the institution are systematically monitored and evaluated with stakeholders to take necessary measures.	The management of research and development processes covers all the units/fields in the institution and is adopted and guaranteed in the entire institution with the help of integrative, sustainable and matured practices that are in line with the institutional goals (research policy, objectives and strategy). The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.

Evidence

- *Management and organizational structure of research and development processes*
- *Research management model*
- *Units conducting research activities*
- *Evidence for stakeholder participation*
- *Evidence with regard to the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation*

C.1.3. Relation of research activities to local/regional/national development goals

Maturity level

1	2	3	4	5
The institution does not consider the local, regional or national development goals and changes in the planning, execution and management of its research activities.	The institution considers the local, regional and national development goals and changes in the planning, execution and management of its research activities. But these practices do not cover all the fields or are not reflected on the institution's research policy, objectives and strategy.	The institution considers the local, regional and national development goals and changes in the planning, execution and management of its research activities in all relevant fields. But the results of these practices are not monitored.	The research outputs in the institution are systematically monitored in accordance with the institution's internal quality assurance system and the local, regional and national development goals. The monitoring results are evaluated with stakeholders to take necessary measures.	The evaluation of the research activities' competition level (national/international) and socio-economic and cultural contributions to local, regional and national development goals is adopted and guaranteed in the entire institution. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.

Evidence

- *Research activities in accordance with development goals*
- *Evidence for stakeholder participation*
- *Evidence with regard to the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation*

C.2 Research Resources

The institution must provide the required physical infrastructure and financial resources for research and development activities and enable their effective use. Research policies of the institution must encourage cooperation between internal and external stakeholders and use of non-institutional funds.

C.2.1. Physical, technical and financial research resources

Maturity level

1	2	3	4	5
The institution does not have physical, technical and financial resources of sufficient quantity and quality to maintain its research and development activities.	The institution has developed plans to create physical, technical and financial resources of sufficient quantity and quality to maintain its research and development activities. But these plans are not put into practice or the existing practices do not cover all the units.	The institution provides physical, technical and financial resources of sufficient quality and quantity by setting a balance among the units in order to maintain its research and development activities. But the results with regard to the use of these resources are not monitored.	The research resources in the institution are managed in a way to support the primary research areas and encompass all the units/fields. The findings obtained from these practices are systematically monitored and the monitoring results are evaluated with stakeholders to take necessary measures and diversify resources according to the needs and demands.	The physical, technical and financial resources of sufficient quantity and quality in all the units of the institution are managed in line with the institutional goals (research policy, objectives and strategy) and in a sustainable manner. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.

Evidence

- Evidence for research-development infrastructure and improvement
- Research-development budget and its distribution
- Budget allocated to primary research areas
- Practices enabling the effective use of research-development resources
- Strategic partnerships made in the scope of research activities (public or private)
- Evidence with regard to the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation

C.2.2. Intra-university resources (scientific research projects)

Maturity level

1	2	3	4	5
The institution does not have intra-university resources for its research and development activities.	The institution has developed plans/defined processes (such as directives on scientific research projects) to create intra-university resources in order to maintain its research and development activities. But these plans are not put into practice or the existing practices do not cover all the units.	The institution provides intra-university resources of sufficient quality and quantity by setting a balance among the units in order to maintain its research and development activities. But the results with regard to the use of these resources are not monitored.	The intra-university resources in the institution are managed in an accessible manner and in a way to support the primary research areas. The findings obtained from these practices are systematically monitored and the monitoring results are evaluated with stakeholders to take necessary measures and diversify resources according to the needs and demands.	The intra-university resources that encompass all the units of the institution are managed in line with the institutional goals (research policy, objectives and strategy) and in a sustainable manner. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.

Evidence

- *Internal resources (scientific research projects)*
- *Distribution of internal resources among the units*
- *Directives on scientific research projects*
- *Evidence with regard to the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation*

C.2.3. Use of extra-university resources (Support units and methods)

Maturity level

1	2	3	4	5
The institution does not use extra-university resources for its research and development activities.	The institution has developed plans to create support units and methods for the use of extra-university resources. But these plans are not put into practice or the existing practices do not cover all the units.	The institution has created support units and methods for the use of extra-university resources in order to maintain its research and development activities in line with the institutional goals, and the practices related to this encompass all the fields. But the results with regard to the practices and the use of these resources are not monitored.	The findings obtained from the practices that support the use of extra-university resources in order to maintain the institution's research and development activities in line with the institutional goals are systematically monitored and the monitoring results are evaluated with stakeholders to take necessary measures.	Sustainable and matured practices for the use of extra-university resources in order to maintain the institution's research and development activities in line with the institutional goals (research policy, objectives and strategy) are adopted and guaranteed in the entire institution. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions

Evidence

- *External resources*
- *Changes in external resources by years*
- *Evidence for support units and their works*
- *Evidence with regard to the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation*

C.2.4. Doctoral programs (graduate numbers, trends) and post-doctoral opportunities

Maturity level

1	2	3	4	5
The institution does not have doctoral or post-doctoral programs that are in compliance with the institution's research policy, objectives and strategy.	The institution has developed plans and defined processes regarding doctoral and post-doctoral programs that are in compliance with the institution's research policy, objectives and strategy. But these plans and processes are not put into practice or the existing practices do not cover all the units.	The institution has doctoral and post-doctoral programs that are in compliance with the institution's research policy, objectives and strategy. But the results of these practices are not monitored.	The outcomes of the doctoral and post-doctoral programs in the institution that are in compliance with the institution's research policy, objectives and strategy are periodically monitored and the monitoring results are evaluated with stakeholders to take necessary measures.	Integrated and matured practices regarding the doctoral and post-doctoral programs in order to maintain the institution's research and development activities in line with the institutional goals (research policy, objectives and strategy) are adopted and guaranteed in the entire institution. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.

Evidence

- *Doctoral programs*
- *Practices on post-doctoral programs*
- *Evidence for stakeholder participation*
- *Evidence with regard to the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation*

C.3. Research Competencies

The institution must provide opportunities to sustain and improve the research competencies of the teaching staff.

C.3.1. Research competencies of teaching staff and improvement of research competencies

Maturity level

1	2	3	4	5
The institution does not have a mechanism for the evaluation and improvement of the teaching staff's research competencies (specialties, background, numbers and distribution).	The institution has developed plans and defined processes for the evaluation and improvement of the teaching staff's research competencies. But these plans and processes are not put into practice or the existing practices do not cover all the units.	The institution's practices for the evaluation and improvement of the teaching staff's research competencies encompass all the fields. But the results of these practices are not monitored.	The institution's practices for the evaluation and improvement of the teaching staff's research competencies are periodically monitored and the monitoring results are evaluated with stakeholders to take necessary measures.	Sustainable and matured practices for the evaluation and improvement of the teaching staff's research competencies in line with the institutional goals (research policy, objectives and strategy) are adopted and guaranteed in the entire institution. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.

Evidence

- *Promotion and appointment criteria and practices*
- *Trainings*
- *Training outcomes*
- *Evidence for stakeholder participation*
- *Evidence for the participation of teaching staff in the planning and enhancement of the processes*
- *Evidence with regard to the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation*

C.3.2. Joint programs and joint research units to improve research competencies of teaching staff

Maturity level

1	2	3	4	5
The institution does not have multiple research activities such as establishing cooperation or participating in intra- or inter-institutional joint programs, joint research units and research networks at national and international levels.	The institution has developed plans and defined processes to have multiple research activities such as establishing cooperation or participating in intra- or inter-institutional joint programs, joint research units and research networks at national and international levels. But these plans and processes are not put into practice or the existing practices do not cover all the units.	The institution's practices regarding multiple research activities such as establishing cooperation or participating in intra- or inter-institutional joint programs, joint research units and research networks at national and international levels encompass all the fields. But the results of these practices are not monitored.	The institution's practices regarding multiple research activities such as establishing cooperation or participating in intra- or inter-institutional joint programs, joint research units and research networks at national and international levels are periodically monitored and the monitoring results are evaluated with stakeholders to take necessary measures.	Sustainable and matured practices for the multiple research activities such as establishing cooperation or participating in intra- or inter-institutional joint programs, joint research units and research networks at national and international levels in line with the institutional goals (research policy, objectives and strategy) are adopted and guaranteed in the entire institution. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.

Evidence

- *Research networks the institution has joined*
- *Joint programs and research units of the institution*
- *Studies produced in joint research activities*
- *Evidence with regard to the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation*

C.4. Research Performance

The institution must periodically assess and evaluate its research and development activities on the basis of relevant data and publish the results. The obtained results must be employed for the periodic review and continuous improvement of the institution's research and development performance.

C.4.1. Performance review of teaching staff

Maturity level

1	2	3	4	5
The institution does not have any practice for the monitoring and review of the teaching staff's research performance.	The institution has developed plans and defined processes (directives, regulations, process definitions, assessment tools, guidelines, appreciation-recognition systems, incentive mechanisms etc.) for the monitoring and review of the teaching staff's research performance. But these plans and processes are not put into practice or the existing practices do not cover all the units.	The institution's practices regarding the defined processes for the monitoring and review of the teaching staff's research and development performance (directives, regulations, process definitions, assessment tools, guidelines, appreciation-recognition systems, incentive mechanisms etc.) encompass all the fields. But the results of these practices are not monitored or employed in decision-making processes.	The institution's practices for the monitoring and review of the teaching staff's research and development performance that encompass all the fields are periodically monitored and the monitoring results are evaluated with stakeholders to take necessary measures.	Sustainable and matured practices for the monitoring and review of the teaching staff's research and development performance in line with the institutional goals (research policy, objectives and strategy) are adopted and guaranteed in the entire institution. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.

Evidence

- *Defined processes for the monitoring of the academic staff's research and development performance*
- *Practices to appreciate-recognize and reward the academic staff's research and development performance*
- *Evidence with regard to the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation*

C.4.2. Review and outcome-based improvement of research performance

Maturity level

1	2	3	4	5
The institution does not have any practice for the monitoring and review of the research performance.	The institution has developed plans and defined processes for the monitoring and review of the research performance. But these plans and processes are not put into practice or the existing practices do not cover all the units.	The institution's practices for the monitoring and review of the research performance encompass all the fields and units (including the research centers). But the results of these practices are not monitored or employed in decision-making processes.	The research performance of all the units in the institution is monitored, reviewed and employed in decision-making processes (performance-based incentive-appreciation mechanisms etc.). The practices related to this aspect are periodically monitored and the monitoring results are evaluated with stakeholders to take necessary measures.	Sustainable and matured practices for the monitoring and review of the research performance in all the units in line with the institutional goals (research policy, objectives and strategy) are adopted and guaranteed in the entire institution. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.

Evidence

- *Mechanisms formed to monitor the achievement levels of research-development objectives*
- *Annual self-evaluation reports and improvement works related to research-development processes*
- *Evidence used by the institution to monitor its research and development performance (university rankings, institutional external evaluation reports etc.)*
- *Evidence for stakeholder participation*
- *Evidence with regard to the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation*

C.4.3. Research budget performance

Maturity level

1	2	3	4	5
The institution does not have any practice for the monitoring of the research budget performance.	The institution has developed plans and defined processes for the monitoring of the research budget performance. But these plans and processes are not put into practice or the existing practices do not cover all the units.	The institution has practices for the monitoring and review of the research budget performance. But the results of these practices are not monitored or employed in decision-making processes.	The research budget performance of all the units in the institution is monitored, reviewed and employed in decision-making processes (budget distribution etc.). The practices related to this aspect are periodically monitored and the monitoring results are evaluated with stakeholders to take necessary measures.	Sustainable and matured practices for the monitoring and review of the research budget performance in all the units in line with the institutional goals (research policy, objectives and strategy) are adopted and guaranteed in the entire institution. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.

Evidence

- *Defined processes and practices related to the monitoring of research budget performance*
- *Budget distribution*
- *Changes by years*
- *Evidence for stakeholder participation*
- *Evidence with regard to the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation*

D. SOCIAL CONTRIBUTION

D.1. Social Contribution Strategy

The institution must carry out its social contribution activities in accordance with its objectives, strategy and local, regional and national development goals.

D.1.1. Social contribution policy, objectives and strategy

Maturity level

1	2	3	4	5
The institution does not have a defined social contribution policy, objectives and strategy.	The institution has a social contribution policy, objectives and strategy that express its principles, priorities and preferences in the management of its resources in the context of its social contribution activities. But any mechanisms or practices to implement these are not available.	The institution has some practices regarding its defined social contribution policy, objectives and strategy. But the results of these practices are not evaluated.	The practices related to the institution's social contribution policy, objectives and strategy that are adopted by all the units in the institution are systematically monitored. Necessary measures that encompass all the fields and programs are taken according to the monitoring results.	It is guaranteed in the institution that the social contribution activities of the institution can create values and turn them into societal benefits in line with the institution's social contribution policy. This has been adopted by stakeholders through matured practices. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.

Evidence

- *Social contribution policy*
- *Social contribution strategy and objectives*
- *The alignment of social contribution policy with learning-teaching and research policies*
- *Social contribution activities undertaken by various units of the university other than the continuing education centers*
- *Evidence for stakeholder participation*
- *Social contribution activities carried out in accordance with local, regional and national development goals*
- *A list of the primary areas determined in the university's social contribution processes and documents showing how they are determined*
- *Evidence with regard to the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation*

D.1.2. Management and organizational structure of social contribution processes

Maturity level

1	2	3	4	5
The institution does not have plans for the management and organizational structure of its social contribution processes.	The institution has developed plans for the management and organizational structure (processes, definition of tasks etc.) of its social contribution processes in relation to the local, regional and national development goals and in integration with the other processes (learning and teaching, research). But these plans are not put into practice or the existing practices do not cover all the units.	Some results have been obtained in the institution by implementing the management and organizational structure of the social contribution processes in accordance with the institutional preferences in all the fields. But their results are not monitored.	The outcomes and stakeholder opinions with regard to the management of the social contribution processes in the institution are systematically monitored in compliance with the institution's internal quality assurance system and evaluated with stakeholders to take necessary measures.	The management of social contribution processes covers all the units/fields in the institution and is adopted and guaranteed in the entire institution with the help of integrative, sustainable and matured practices that are in line with the institutional goals. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.

Evidence

- *Management and organizational structure of social contribution processes*
- *Social contribution management model*
- *Units conducting social contribution activities*
- *Evidence for stakeholder participation*
- *Evidence with regard to the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation*

D.2. Social Contribution Resources

The institution must have the required physical, technical and financial resources with suitable quality and quantity and enable their effective use in order to maintain its social contribution activities.

D.2.1. Resources

Maturity level

1	2	3	4	5
The institution does not have physical, technical and financial resources of suitable quantity and quality to maintain its social contribution activities.	The institution has developed plans to create physical, technical and financial resources of suitable quantity and quality to maintain its social contribution activities. But these plans are not put into practice or the existing practices do not cover all the units.	The institution provides physical, technical and financial resources of suitable quality and quantity by setting a balance among the units in order to maintain its social contribution activities. But the results with regard to the use of these resources are not monitored.	The physical, technical and financial resources in the institution are managed in a way to support the social contribution activities and encompass all the units. The findings obtained from these practices are systematically monitored and the monitoring results are evaluated with stakeholders to take necessary measures and diversify resources according to the needs and demands.	The physical, technical and financial resources of suitable quantity and quality in all the units of the institution are managed in line with the institutional goals (social contribution objectives and strategy) and in a sustainable manner. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.

Evidence

- *Research and application centers and other units that conduct social contribution activities*
- *The budget allocated to social contribution works and its change by years*
- *Resources provided by regional institutions for social responsibility projects*
- *Evidence with regard to the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation*

D.3. Social Contribution Performance

The institution must periodically review and continuously improve the activities it maintains in line with its social contribution strategy and objectives.

D.3.1. Monitoring and improvement of social contribution performance

Maturity level

1	2	3	4	5
The institution does not have any practice for the monitoring and improvement of its social contribution performance.	The institution has developed plans and defined processes for the monitoring and improvement of its social contribution performance. But these plans and processes are not put into practice or the existing practices do not cover all the units.	The institution's practices for the monitoring and improvement of its social contribution performance encompass all the fields and units. But the results of these practices are not monitored or employed in decision-making processes.	The social contribution performance of all the units in the institution is monitored, reviewed and employed in decision-making processes. The practices related to this aspect are periodically monitored and the monitoring results are evaluated with stakeholders to take necessary measures.	Sustainable and matured practices for the monitoring and review of the social contribution performance in all the units in line with the institutional goals (social contribution policy, objectives and strategy) are adopted and guaranteed in the entire institution. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.

Evidence

- *Mechanisms formed to monitor the achievement levels of social contribution objectives*
- *Annual self-evaluation reports and improvement works related to social contribution processes*
- *Evidence used by the institution to monitor its social contribution performance*
- *Evidence for stakeholder participation*
- *Evidence with regard to the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation*

E. GOVERNANCE SYSTEM

The institution is expected to explain and evaluate its governance/organizational processes and activities.

E.1. Structure of Management and Administrative Units

The institution must have an administrative structure that guarantees realizing the institution's strategic goals both qualitatively and quantitatively. The administrative board must be able to function as a constructive leadership while the administrative staff should have the required competencies.

E.1.1. Management model and administrative structure

Maturity level

1	2	3	4	5
The institution does not have a management model and organizational structure that are in compliance with its mission and enable the achievement of the strategic objectives.	The institution's management model and administrative structure that guarantee the achievement of its mission and strategic objectives have been defined with a clear explanation of all the processes and authorities, duties and responsibilities in accordance with the processes. But this model has not been put into practice or the existing practices related to this model do not cover all the units.	The institution's management model and administrative structure that guarantee the achievement of its mission and strategic objectives have been formed in accordance with the processes and encompass all the fields/units (including the board of trustees in foundation higher education institutions and vice rectors and consultants in all higher education institutions). Some results have been obtained from the related practices but these results are not monitored.	The findings obtained from the practices related to the institution's management model and administrative structure that encompass all the units and fields are systematically monitored and stakeholder opinions are received in this regard. The monitoring results are evaluated with stakeholders to take necessary measures and make updates according to the needs and demands.	The institution's management model and administrative structure (institutional approach, traditions and preferences in the framework of legislative regulations), which guarantee diversity, effective decision-making, adaptability and stakeholder representation and provide suitable ground for the realization of the institutional goals, are adopted in the entire institution. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.

Evidence

- *Management model and organizational chart*
- *The institution's policy and strategic objectives regarding the management and administrative fields*
- *Practices/evidence showing that the institution implements its policy and strategic objectives regarding the management and administrative fields*
- *Working principles of the board of trustees and senate and the relations between them in foundation higher education institutions*
- *Evidence for stakeholder participation*
- *Evidence with regard to the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation*

E.1.2. Process management

Maturity level

1	2	3	4	5
The institution does not have defined processes for its practices regarding learning and teaching, research-development, social contribution and governance system.	The institution has defined processes for its practices regarding learning and teaching, research-development, social contribution and governance system. But the existing practices in this regard are not compatible with the processes or do not cover all the units.	All the processes in the institution are defined in a way to encompass all the units and fields and all the practices are implemented in line with the processes. But the process performance results are not monitored or employed in decision-making processes.	The results regarding the processes that are managed in a way to encompass all the units and fields in the institution are systematically monitored with performance indicators and stakeholder opinions are received in this regard. The monitoring results are evaluated with stakeholders to take necessary measures and make updates according to the needs and demands.	The institution's process management model that is in compliance with the strategic objectives and encompasses all the fields is adopted and guaranteed in the entire institution through sustainable and matured practices. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.

Evidence

- *Manual on process management*
- *Process management model and practices, related systems, management mechanisms*
- *Relation between processes and management model*
- *Process performance indicators, monitoring system and examples of the review of results*
- *List of process improvements*
- *Process review reports*
- *Evidence for stakeholder participation*
- *Evidence with regard to the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation*

E.2. Resource Management

The institution must have a management system guaranteeing that the human resources, financial resources and all the estates and assets are used efficiently and productively.

E.2.1. Human resources management

Maturity level

1	2	3	4	5
The institution does not have a defined policy or process for the management of human resources.	The institution has a defined policy and processes for the management of human resources. But no implementation or mechanism is available to put them into practice.	The institution has some practices for the management of human resources in accordance with its human resources policy and strategic objectives and certain results have been obtained from them. But the results of these practices are not monitored or employed in decision-making processes.	The results regarding the processes for the management of human resources that encompass all the units in the institution are systematically monitored and stakeholder opinions are received in this regard. The monitoring results are evaluated with stakeholders to take necessary measures.	The institution's human resources management model that is in compliance with the strategic objectives and encompasses all the fields is adopted and guaranteed in the entire institution through sustainable and matured practices. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.

Evidence

- *Human resources policy and objectives and related practices*
- *Evidence showing that the administrative staff has the necessary competencies in recruitment processes*
- *In-service training practices for the improvement of the current qualifications of the administrative staff and their adaptation to the expected tasks*
- *Defined processes employed in evaluating the performance of the administrative staff*
- *Reward mechanisms and application examples for the administrative staff*
- *Employee (academic and administrative) satisfaction surveys, application systematics, survey results and improvement examples*
- *Evidence for stakeholder participation*
- *Evidence with regard to the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation*

E.2.2. Management of financial resources

Maturity level

1	2	3	4	5
The institution does not have defined processes for the management of financial resources.	The institution has defined processes for the management of financial resources. But these processes are not put into practice, or the existing practices do not cover all the fields.	The institution has some practices for the management of financial resources in accordance with its strategic objectives and defined processes and certain results have been obtained from them. But the results of these practices are not monitored or employed in decision-making processes.	The results regarding the practices for the management of financial resources that encompass all the fields in the institution are systematically monitored and stakeholder opinions are received in this regard. The monitoring results are evaluated with stakeholders to take necessary measures.	The institution's management of financial resources that is in compliance with the strategic objectives and encompasses all the fields is adopted and guaranteed in the entire institution through sustainable and matured practices. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.

Evidence

- *Defined processes and practices related to the management of financial resources*
- *The distribution of financial resources (separately on the basis of income and expenses) and its compliance to the institution's strategy*
- *Evidence showing that financial resources are used efficiently*
- *Diversity in financial resources*
- *Alignment of financial resources' planning, using and monitoring practices with the institution's strategic plan*
- *Evidence for stakeholder participation*
- *Evidence with regard to the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation*

E.3. Information Management System

The institution must have an integrated information management system that can be employed to periodically collect, store and analyze the required data and information in order to guarantee the effective management of the administrative and operational activities and enhance institutional processes.

E.3.1. Integrated information management system

Maturity level

1	2	3	4	5
The institution does not have any information management system to support the acquisition, storage and usage of information.	The institution has information management systems to support the acquisition, storage and usage of information. But these systems are not integrated to each other or do not cover all the fields.	The institution has an integrated information management system that covers all the fields and supports all the processes (learning and teaching, research and development, social contribution, quality assurance) and some practices are available for the use of this system. But the information system is not employed in decision-making processes and the results regarding the use of the system are not monitored.	The results regarding the use of the integrated information management system that supports all the processes are systematically monitored and stakeholder opinions are received in this regard. The monitoring results are evaluated with stakeholders to take necessary measures and make updates according to the needs and demands.	A sustainable and matured integrated information management system that is in line with the institutional goals is adopted and guaranteed in the entire institution. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.

Evidence

- *Information management policy and institutional information management model*
- *Information management system and its functions*
- *Defined processes for obtaining, recording, updating and sharing of information*
- *Practices for monitoring the analysis results of the information management system and their use in improvement works*
- *Evidence for stakeholder participation*
- *Evidence with regard to the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation*

E 3.2. Information security and reliability

Maturity level

1	2	3	4	5
The institution does not have any practice to provide information security and reliability.	The institution has defined processes and plans to provide information security and reliability. But these processes and plans are not put into practice or the existing practices do not cover all the fields.	The institution has integrated practices to provide information security and reliability and some results have been obtained from these practices. But the results of these practices are not monitored or used in decision-making mechanisms.	The practices to provide information security and reliability in the institution are systematically monitored and the monitoring results are evaluated with stakeholders to take necessary measures.	The security and reliability of the institutional information is adopted and guaranteed in the entire institution with sustainable and matured practices. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.

Evidence

- *Processes and practices to provide information security and reliability*
- *Commission established for the protection of personal data*
- *Defined copyright and ethics mechanisms regarding the software and course contents used in distance education*
- *Defined processes and practices to ensure the security of students, instructors and course information in distance education*
- *Evidence with regard to the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation*

E.4. Support Services

The institution must guarantee the suitability, quality and continuity of the outsourced support services.

E 4.1. Suitability, quality and continuity of goods and services

Maturity level

1	2	3	4	5
The institution does not have any defined criteria or processes to evaluate the suitability and quality of the outsourced goods and support services.	The institution has defined processes and mechanisms (procurement process, suitability and quality criteria etc.) to guarantee the suitability, quality and continuity of the outsourced goods and support services. But these processes are not put into practice or the existing practices do not cover all the fields.	The institution has practices for the planning, evaluation and improvement of the quality levels of all the outsourced goods and support services in accordance with the internal quality assurance system. But the results of these practices are not monitored or employed in decision-making processes.	The institution maintains close cooperation with suppliers to guarantee the quality of all the outsourced goods and services. The performance and satisfaction levels of suppliers are systematically monitored and evaluated with stakeholders to take necessary measures.	The institution manages a supply chain to guarantee the quality levels of the outsourced goods and services in line with the institutional goals. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.

Evidence

- *Institutional policies for the management of relations with suppliers*
- *List of outsourced goods and services and their suppliers*
- *Defined processes to evaluate suppliers' performance*
- *Supplier performance evaluation method and examples of using performance results*
- *Examples of meetings held with suppliers, mechanisms for their participation in processes, evaluation and cooperation practices involving suppliers*
- *Results of the surveys conducted to assess suppliers' satisfaction*
- *Evidence with regard to the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation*

E.5. Public Information and Accountability

The institution must publish information on all its activities, including its study programs and research and development activities, in a transparent, accurate, updated and easily accessible way. The institution must have a set of approaches that can enable assessing and evaluating the productivity of the administrative and managerial staff and ensure their accountability.

E.5.1. Public information

Maturity level

1	2	3	4	5
The institution does not have defined principles and mechanisms for informing the public on its activities.	The institution has designated its public information methods and processes and defined a policy to adopt informing the public on its activities as a principle. But this policy and the processes are not put into practice or the existing practices do not cover all the fields.	Some results have been obtained from the practices of public information that cover all the fields in line with the principles and processes designated to inform the public. But the results of these practices are not monitored or employed in decision-making processes.	The findings regarding the institution's public information activities are monitored and stakeholder opinions are received in this regard. The monitoring results are evaluated with stakeholders to take necessary measures.	The institution's public information activities are guaranteed and adopted in the entire institution with sustainable and matured practices in line with the institutional goals and values. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.

Evidence

- *Institutional policies and principles for public information*
- *Information shared with public and the sharing platforms*
- *Evidence for stakeholder participation*
- *Satisfaction and feedback of internal and external stakeholders on public information mechanisms*
- *Evidence with regard to the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation*

E.5.2. Accountability methods

Maturity level

1	2	3	4	5
The institution does not have accountability methods or mechanisms.	The institution has adopted accountability as a principle and designated its accountability methods and processes. But these principles and processes are not put into practice or the existing practices do not cover all the fields.	Some results have been obtained from the practices related to the institution's accountability principles and processes. But the results of these practices are not monitored or employed in decision-making processes.	The findings obtained from the institution's accountability activities are monitored and stakeholder opinions are received in this regard. The monitoring results are evaluated with stakeholders to take necessary measures.	The institution's accountability principles are guaranteed and adopted in the entire institution with sustainable and matured practices in line with the institutional goals and values. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.

Evidence

- *Institutional policies and principles for accountability*
- *Mechanisms guaranteeing accountability and application examples*
- *Evidence for stakeholder participation*
- *Satisfaction and feedback of internal and external stakeholders on accountability methods*
- *Evidence with regard to the specific approaches and practices developed by the institution in line with the institutional needs along with standard practices and legislation*

CONCLUSION

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

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