



**PHILIPPINE ACCREDITING ASSOCIATION OF SCHOOLS,
COLLEGES, AND UNIVERSITIES
(PAASCU)**

**ARTS, SCIENCES, EDUCATION, AND BUSINESS (ASEB)
ADDITIONAL GRADUATE PROGRAMS
SURVEY INSTRUMENT**

2024

Philippine Accrediting Association of Schools, Colleges, and Universities

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GUIDELINES TO ACCREDITATION

INTRODUCTION

The Philippine Accrediting Association of Schools, Colleges, and Universities (PAASCU) aims to support member schools in their journey toward quality improvement founded on the institution's educational philosophy and unique vision and mission. This purpose is grounded on the fundamental principle that quality is primarily the school's responsibility and that the external quality assurance initiative complements this. PAASCU envisions accreditation as a continuous development process that engages the entire school community and its stakeholders in carefully and thoroughly evaluating its objectives, plans, programs, systems, resources, and results through self-survey and an external review done by peer educators.

The accreditation process involves assessing different areas: Leadership and Governance, Quality Assurance, Resource Management, Teaching-Learning, Student Services, External Relations, Research, and Results. The interrelationship among these areas is vital in ensuring the quality of the school's programs and in achieving the school's vision and mission. PAASCU believes that the quality of the school's programs and services determines the overall quality of the institution that offers such programs and services.

In recent years, local and international agencies have defined standards for quality assurance processes. PAASCU now shifts to principles-based standards in the accreditation process that focus on principles rather than a list of good practices in the various areas to be assessed in the accreditation process.

ACKNOWLEDGMENT

The PAASCU Board of Trustees (BOT) acknowledges the diligent work done by the Institutional Accreditation Working Group, which drafted the instrument, and the BOT's Standards Committee.

This survey instrument was drafted based on the Institutional Accreditation Instrument by the Commission on Graduate Education members.

1. ACCREDITATION OF GRADUATE EDUCATION PROGRAMS

1.1. Quality Assurance

PAASCU has adopted a four-fold definition of quality as:

1. Achievement of minimum standards based on learning outcomes
2. Achievement of evidenced excellence based on learning outcomes
3. Implementation of the vision, mission, and goals of the school
4. Responsiveness to stakeholders

1.2. Accreditation

Educational accreditation is a quality assurance process where an external body evaluates the operations of educational institutions or programs to determine if standards are met as the basis for granting an accreditation status. Accreditation is the formal and public statement by an external body resulting from a quality assurance procedure that an institution or program meets agreed standards of quality (Van Damme, UNESCO Higher Education in the Age of Globalization, 2001).

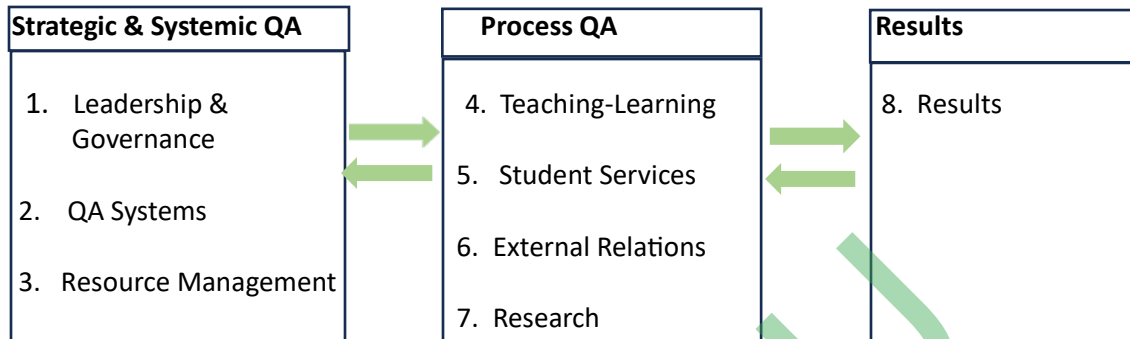
An accredited status from PAASCU indicates that an educational institution or program has met its defined standards. There is a sufficient basis for assuming that the educational institution or program will continue doing so.

The PAASCU accreditation process does not prescribe any specific way of proceeding. It seeks to encourage institutions or programs to aspire for and work towards higher levels of excellence as defined in its quality standards. The focus is on the context and needs of the institution or program under survey; hence, the process allows these institutions and programs to be innovative in exploring solutions to their challenges.

2. ACCREDITATION FRAMEWORK

2.1. Accreditation Framework

In conducting institutional accreditation, the following framework is adopted:



The framework shows eight areas to be assessed. These include three areas under Strategic and Systemic Quality Assurance, four under Process Quality Assurance, and the area covering Results. The arrows denote the constant interplay among the different areas in continuously upgrading educational quality and services.

2.2. Program Accreditation Framework

The eight areas and twenty-three sub-areas were all looked into when the school initially had its Arts and Sciences, Business, and Education programs or any program accredited by the PAASCU considering all areas and sub-areas. Accreditation of these programs is necessary before accreditation for arts and sciences, education, and business programs. This practice is the reason why, in conducting the certification for these programs, only the following areas are considered:

Area 1: Leadership and Governance (2 sub-areas)

Sub-area 1.2. Leadership and Management

Sub-area 1.5. Risk Management

Area 3: Resource Management (3 sub-areas)

Sub-area 3.1. Human Resources

Sub-area 3.2. Financial Resources

Sub-area 3.3. Learning, Physical, and IT Resources

Area 4: Teaching-Learning (3 sub-areas)

Sub-area 4.1 Curricular Programs

Sub-area 4.2 Teaching and Learning Methods

Sub-area 4.3 Assessment Methods

Area 5: Student Services (1 sub-area)

Sub-area 5.1 Student Recruitment, Admission and Placement

Area 7: Research (1 sub-area)

Sub-area 7.1. Research Management and Collaboration

Area 8: Results (2 sub-areas)

Sub-area 8.1 Educational Results

Sub-area 8.3 Research Results

However, it should be noted that the survey visit will be limited to the above areas and subareas when an institution has been awarded "clean" accreditation in any of the programs previously visited (i.e., Arts, Sciences, Business, and Education, etc.). Please refer to the GED Commission guidelines (**Appendix A - GUIDELINES FOR "PIGGY-BACKING" IN THE ACCREDITATION OF GRADUATE PROGRAMS**) on programs seeking accreditation for the first time (i.e., a preliminary visit).

2.3. Alignment of PAASCU Framework with other QA Frameworks

The framework adopted by PAASCU is aligned with regional and international frameworks on quality assurance. The following were used as benchmarks in the preparation of the instrument:

1. ASEAN Quality Assurance Framework (AQAF) Internal Quality Assurance Principles
2. ASEAN University Network (AUN) Guide to Assessment at the Program Level
3. Commission on Higher Education (CHED) Institutional Sustainability Assessment Self-Evaluation Document (ISA-SED)
4. Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG) Standards and Guidelines for Internal Quality Assurance

2.4. Development of the 2021 Program Standards

The evolving and challenging higher education landscape globally and the continuing evolution of accreditation in form and substance served as an impetus in pivoting PAASCU's approach to program accreditation from functional to one that uses principle-based standards. The program accreditation standards are designed to ensure the provision of high-quality educational experiences. These standards reflect principles of good practice and are supported by criteria that subscribe to the Plan-Do-Check-Act (PDCA) cycle. The standards are not prescriptive, as PAASCU understands that high-quality education can be achieved in various ways. However, the standards and how the program executes them should allow for consistency in the quality of program delivery. The program standards define the quality, effectiveness, and continuous improvement expected of accredited programs. They indicate a program's ability to fulfill its unique purpose, deliver quality education, and promote student achievement, all comprehensively examined.

Each of the standards articulates a dimension of the quality of a program. In applying the standards, PAASCU assesses and decides the program's overall effectiveness. A program that meets the standards indicates that:

- its purposes are clearly defined and appropriate to an institution of higher learning;
- defined learning outcomes are achieved;
- its practices are aligned with defined standards and criteria and
- it is unceasingly striving for continuous improvement.

Therefore, it is essential to understand that a program must substantially comply with the standards regardless of location or delivery modalities to earn accreditation.

2.5. The Survey Instrument

The survey instrument consists of the following:

1. the main area for review and evaluation;
2. the standards under each area;
3. a set of criteria against which the achievement of the standard is measured;
4. a brief explanation of the standard;
5. a series of guide questions to assist the institution in assessing its compliance with the standards and criteria and
6. a suggested list of evidence.

The set of criteria will be rated using the guidelines provided below in the Self-Survey Report section of this guideline.

3. PROGRAM ACCREDITATION

Program accreditation applies to academic programs, departments, institutes, or schools that are part of an institution. The accredited unit may be as large as a college or school within a university, academic program, or course within a discipline. The accredited status of one department or specific program/course does not extend to other programs within the same department or departments in the institution.

This survey instrument is for program accreditation.

4. THE SELF-SURVEY REPORT

The first and critical component of the accreditation process is a rigorous and comprehensive self-evaluation of the institution's educational resources, methods, and results. Self-evaluation aims to understand, evaluate, and improve, not merely defend what already exists. A well-conducted self-evaluation should result in a renewed effort to reflect on quality assurance practices and

outcomes toward ongoing school improvement. Self-evaluation is expected to be an inclusive process. It becomes optimally effective when completed by a diverse group of key stakeholders (i.e., administrators, faculty, students, staff, alums, etc.) knowledgeable about the institution and its academic programs. Stakeholder engagement allows for a fair and objective assessment of how well the institution has achieved its vision, mission, and objectives for self-improvement. The self-survey report and supporting evidence allow the institution to demonstrate to the survey team that it has complied with the standards.

The self-survey report (SSR) accounts for the institution's QA practices. The institution here refers to the college, school, or department managing the programs under accreditation. The criteria checklist under each standard guides what to account for in the institution's quality system.

The SSR is written following the sequencing of the area and standards. The write-up mainly describes how the institution meets the criteria under each standard. Therefore, only the set of criteria under each standard will be rated. The SSR should be submitted in softcopy to the PAASCU Secretariat two months before the scheduled survey visit.

Contents of the Self-Survey Report

The SSR has six parts: School Profile, Follow-up Action on the Recommendations of Previous Survey (only for formal and resurvey visits), Analysis of School/Program Practices Using the Survey Instrument, Conclusion, Appendices, and Summary of Ratings.

PART 1: School Profile

This section provides the following information about the school:

1. A brief history of the school
2. Vision, mission, goals, objectives, and core values of the school
3. Organizational structure
4. Governing Board and list of top executives
5. Educational programs, including student population for each program and accreditation level
6. Enrollment data per year level of the program under survey (3-year data for a preliminary visit, 2-year data for a formal visit, and 5-year data for a resurvey visit)
7. Description of the regulatory environment in which the institution operates
8. Identified strategic challenges, including planned and implemented strategies to address the same

PART 2: Follow-up Action on the Recommendations of the Previous Survey (only for formal and resurvey visits)

PART 3: Analysis of the School/Program Practices Using the Standards and Criteria

A write-up describes the program quality practices using the criteria under each standard. The write-up should meet the following requirements:

1. It should provide information that focuses on how the school meets the criteria under each standard. If the school partially or did not comply with the criteria, an explanation should be provided.
2. The information should be presented based on the sequencing of the criteria. They should be written in whole sentences but straightforward, concise, and factual. More importantly, the information should be based on evidence presented immediately after such information. The evidence should be clickable to ensure immediate access. Each standard provides a checklist of suggested evidence. The institution may present other additional evidence to support its claim.
3. In the presentation of evidence, the following guidelines should be considered:
 - a. Where statistical data, graphs, tables, or matrices are used, label the same and present them within the narrative or attach them to the SSR with appropriate reference. Where a policy statement is used, summarize the policy or attach the same to the SSR with proper reference.
 - b. The documents and any other evidence used to support the information provided should be listed per standard and attached to the SSR. If the same evidence supports multiple standards, attach the proof once and list it under each relevant standard.
4. The write-up should be descriptive and analytical, citing the practice's strengths and weaknesses related to the criteria. The guide questions and explanations can assist in analyzing the institution's quality practices. When analyzing the institution's quality practices, it is also important to benchmark with the practices of other reputable institutions or those considered 'good' practices.
5. The school should provide a rating for each criterion under each standard based on the following scale:

RATING	MEANING	REMARKS
5	Excellent	The practice is exemplary and serves as a model to others. Implementing the criterion has led to excellent results.
4	Very Good	The criterion has been effectively implemented, leading to very good results.
3	Good	The criterion has been implemented adequately and has led to good results.

2	Needs Minor Improvement	The criterion has been implemented but needs minor improvement. In addition, the implementation has led to inconsistent or limited results.
1	Needs Major Improvement	The criterion has been inadequately implemented and needs significant improvement. The implementation has led to insignificant or unsatisfactory results.
0	Not Implemented	The criterion has not been implemented. Furthermore, no evidence shows that initiatives have been carried out to implement it.

PART 4: Conclusion

This section provides the following:

1. An overall assessment of the program's compliance with the standards
2. Summary of the strengths per area
3. Summary of planned initiatives to address weaknesses identified per area

PART 5: Appendices

This section contains the evidence that is identified in the self-survey report. This section consists of the following:

1. List of the supporting evidence
2. The actual evidence

These supporting documents are accessed using the school's digital storage facility for virtual visits. Therefore, when evidence is cited in the narrative, the reference to that evidence is clickable, so the actual evidence can immediately be viewed.

PART 6: Summary of Ratings

5. THE SURVEY VISIT

The site visit, whether blended, online, or purely onsite, will be scheduled in advance and not earlier than two months after submitting the SSR to the PAASCU Secretariat. External accreditors assigned by PAASCU will undertake the two-day visit.

The typical PAASCU Survey Team will be composed of accreditors who will usually be assigned to handle the following areas:

Accreditor 1a	Leadership and Governance Results: Financial and Competitiveness
Accreditor 1b	QA Systems Resource Management
Accreditor 2a	Teaching-Learning Results: Educational
Accreditor 2b	Student Services
Accreditor 3a	External Relations Results: Community Engagement and Service
Accreditor 3b	Research Results: Research

The number of accreditors may change depending on the number of accredited programs and the areas covered in the survey visit for additional programs.

The visit usually includes the following activities:

1. Accrediting Team meetings
2. Interviews and meetings with various stakeholder groups
3. Class observations and for accreditors onsite, a visit to school facilities
4. Review of digital documents and exhibits
5. Report writing
6. Wrap-up session
7. Debriefing to school management
8. Post-visit meeting of the survey team

6. PAASCU SURVEY REPORT

The site visit will result in a survey report representing the institution's assessment against the checklist. The report is used to determine the accreditation status to be granted. The Chair will collate each accreditor's input to create a coherent, concise report corresponding to the team's visit assessment.

The survey report should contain the following:

1. Chair's report containing the following:
 - a. Introduction
 - b. Summary of Area Reports
 - c. Preparation of the Program Self-Survey by the Institution
 - d. Recommendation of the Team
 - e. Conclusion
2. Summary of Ratings
3. Write-up per area containing the following:
 - a. Evidence – a short description of the evidence gathered
 - b. Analysis – a consideration of the extent of practice alignment with the criteria based on the evidence presented
 - c. Commendations, if any
 - d. Recommendations, if any

The criteria ratings under each standard are averaged to arrive at the **average rating per standard**. The average ratings per standard in an area are averaged to arrive at the **average area rating**. The eight area average ratings are averaged to determine the **overall survey rating**.

7. COMMISSION REVIEW AND BOARD APPROVAL OF ACCREDITING TEAM'S DECISION

Additional Requirements to Pass a Formal Survey or Resurvey Visit:

The following criteria need to be complied with to pass a survey or resurvey visit:

I. Academic Qualifications of Program Administrators (Dean, Program Chair, Program Head or Coordinator)

Program administrators must possess the required academic degrees/qualifications stipulated in the accredited program's most recent CHED Policies, Standards, and Guidelines (PSGs).

II. Faculty Requirements and Teaching Assignments

Regardless of status (full-time, part-time, adjunct), faculty members must possess the required academic qualifications stipulated by the most recent CHED's PSGs of the accredited program.

III. Performance in the Licensure Examination

For programs with licensure examinations, graduates' performance must consistently be above the national passing average or at par with the national average. The PAASCU guidelines on performance in licensure examinations will be followed.

Please refer to **APPENDIX B – Exclusion/Eligibility Criteria for the Grant of Accreditation for Graduate Programs.**

The team's report is submitted to the Commission and the Board for review and final approval.

8. FAAP CERTIFICATION OF THE ACCREDITATION LEVEL

The Board of Trustees' decision will be forwarded to the Federation of Accrediting Agencies of the Philippines (FAAP), which will certify the level of accreditation.

9. RELEASE OF ACCREDITATION DECISION TO THE INSTITUTION WITH THE SURVEY TEAM REPORT

The PAASCU Secretariat will inform the school of the accreditation decision and provide the accreditation report after the Board's approval and the FAAP certification.

SURVEY INSTRUMENT FOR ADDITIONAL GRADUATE PROGRAMS

AREA 1: LEADERSHIP AND GOVERNANCE

Sub-area 1.2. Leadership and Management

STANDARD 2.

The institution practices responsible management and models leadership that results in effective and efficient operations.

NOTE: Criteria for this standard are pertinent to program administrators.

CRITERIA	RATING
1. Systematic leadership processes are implemented to promote performance excellence, enabling dynamic and continuous improvement of program offerings, services, and operations.	
2. Program administrators are empowered and given sufficient operational independence consistent with the institution's vision, mission, and objectives to successfully enable the program to achieve its goals and objectives.	
3. Program administrators (i.e., Dean, Head, Chair, or Coordinator) are academically qualified and possess relevant education, industry experience, and practice to provide effective leadership for the program, its faculty, and students.	
4. Program administrators effectively supervise faculty and students to achieve program goals and learning outcomes.	
5. Program administrators undergo a feedback-based review/appraisal process to assess their work performance based on set indicators.	
6. Leadership development and succession planning programs are in place.	
7. Program administrators are proactive, exercise good governance, and administer essential activities such as faculty evaluation, program assessment and planning, monitoring of students' academic progress, fiscal management, and resource allocation, among others.	
8. Stakeholders are given meaningful roles in the program's planning, review, evaluation, and decision-making processes, promoting participation, responsibility, and ownership.	
Average Rating	

Explanation:

Leadership and governance are critical factors for the smooth operations of the institution and its program offerings. A governance structure is in place that exhibits transparency, inclusiveness, and autonomy with leadership responsibilities and authority assigned, delegated, and shared. Leadership roles are clear and designed to facilitate decisions supporting teaching, learning, and efficient operations. Good governance is promoted, and leadership is proactive in responding to environmental changes. All sectors are clear on the substantive roles they play and the influence they have in program governance. A review and evaluation of the governance structure are periodically conducted with stakeholder participation and collected feedback used for improvement. Management development and succession planning are in place.

Guide Questions:

- How qualified and experienced are the Graduate School administrators (i.e., Dean, Chair, Coordinator)? [***Please use the PAASCU Faculty Profile Template to provide data on this***]
- How do administrators demonstrate proactive, transparent, consultative, ethical leadership responsibility with accountability?
- What mechanisms or processes are in place to gather feedback from different stakeholders on the effectiveness and efficiency of programs, services, and activities? What mechanisms are in place to ensure a culture of participation, responsibility, and ownership?
- How are the governance or management structure or processes and system of program leadership reviewed, evaluated, and improved? How often is this done, and who participates in the review and evaluation?
- How are administrators assessed of their work performance?
- What structure is in place (i.e., management/leadership development program) to enhance leadership skills and competencies and keep administrators up-to-date with new trends in leadership and governance?
- What are the program's significant strengths related to this standard?
- What concerns prevent the program from achieving satisfactory compliance with this standard?
- What significant changes or improvements are needed to ensure quality improvement vis-à-vis this standard?

Supporting Evidence:

- Current institutional and program (graduate school) organizational charts
- Qualifications of vital administrative officials and mid-level supervisors (i.e., program chairs, coordinators, or heads, etc.)
- Teaching assignments of program administrators at the institutional and program levels, if any (please indicate all teaching assignments regardless of office, unit, or college represented - undergraduate and graduate) [refer to **APPENDIX C – Program Faculty Profile Template**]
- Samples of evaluation of administrative performance of Dean, Chair, or Head, if any, including the tool/metrics used for evaluation/assessment of performance
- Samples of appointment papers of administrative personnel (especially at the program level)

- List of Committees, Councils, and the like where stakeholders, especially of the program under survey, are represented
- Training Needs Analysis conducted for administrators, leadership/management development programs for institutional and program administrators, including budget allotment
- Sample evaluation of outcomes (i.e., improvement in management and supervisory performance, enhancement of leadership skills and competencies, etc.) of administrators' development programs
- Succession program for administrators, including budget allotment
- Formal and documented evaluation surveys/studies (i.e., student satisfaction surveys, learning management system evaluation, faculty and leadership development programs, etc.)
- Samples of evaluation of teaching performance done by the Dean, Program Chair, etc.)
- Relevant minutes of meetings of the Graduate School (GS) administrative team, GS Council and committees, GS faculty association, if any, and the like (*please identify sector represented by an attendee, i.e., administrator, faculty, graduate student, alums, etc.*)
- Samples of documented consultations/dialogues made by GS administration with faculty, students, alums, industry partners, etc. (*please identify the sector represented by an attendee, i.e., administrator, faculty, graduate student, alums, etc.*)
- Budget performance reports of the GS
- Administrative, GS Faculty, GS Student Manual/Handbook, etc.

PAAASOS

AREA 1: LEADERSHIP AND GOVERNANCE

Sub-area 1.5. Risk Management

STANDARD 5. A risk management system is in place to ensure that the institution is aware of and manages present and future risks.

CRITERIA	RATING
1. The institution has a risk operating model/management system with clear and well-documented plans, programs, and strategies to prevent, manage, and mitigate present, emerging, and future unforeseen events/disruptions.	
2. Risk management programs, policies, protocols, and strategies are implemented with budgetary support and communicated to stakeholders.	
3. Stakeholders participate in implementing the risk management plans, policies, and protocols guided by leaders who assume primary responsibility for proactively identifying, effectively managing, and mitigating present, emerging, and unforeseen risks.	
4. Safeguards and adequate risk controls are in place to ensure that the institution's resources are protected, effectively utilized, and insured to attenuate the impact of unforeseen events.	
5. Risk management plans, policies, and protocols are regularly revisited and evaluated with stakeholder participation to assess their effectiveness and with results used to guide improvement efforts.	
Average Rating	

Explanation:

Institutions need to be aware of present and future disruptions. Disruptions can result in risks to any undertaking if not foreseen, identified, evaluated, and addressed. It is the responsibility of top management and the Board to manage risks. Risk management requires risk assessment, communication of such risks, and implementation of initiatives that will monitor, mitigate, and control the impact of risks. It also involves the effective use and safeguarding of institutional assets. A risk management program should have supporting policies, structures, resources, and monitoring systems.

Guide Questions:

- What are the risk management programs that identify, communicate, and mitigate current and potential risks?
- What are the policies and established protocols to forestall any identified risks?
- Who takes primary responsibility for risk management?
- Which office(s) or office head(s) take(s) the lead and support(s) the institution's actions in addressing risks?

- How are the various sectors of the community, including key stakeholders, made aware of identified risks?
- What provisions are in place to effectively safeguard the assets and resources of the institution against present and potential risks?
- How is the implementation of the risk management program monitored and improved?
- What are the institution's significant strengths related to this standard?
- What concerns prevent the institution from realizing more than satisfactory compliance with this standard?
- What significant changes or improvements are needed to ensure quality improvement vis-à-vis this standard?

Supporting Evidence:

- Risk management plan and program
- Risk management policies and protocols
- Crisis preparedness and response documents
- Risk registers/risk-specific frameworks (e.g., financial, non-financial, strategic)
- Institution/Business continuity plan
- Preventive Maintenance and Emergency Preparedness Plans, including orientation documents / Crisis and Disaster Management Manual
- Safety, health, environmental, and maintenance policies and procedures
- Maintenance, inspection, and calibration schedules
- Incident response plan
- Risk assessment reports, audit reports, EQA reports, and the like
- Internal safeguards and risk control system
- Policies on safety, maintenance, and insurance
- Minutes of meetings where risk management, reporting, and assessment are discussed (e.g., Board level, GS level, relevant councils or committees, etc.)

AREA 3: RESOURCE MANAGEMENT

Sub-Area 3.1. Human Resources

STANDARD 8. The institution has adequate and qualified teaching and non-teaching human resources that enable it to perform its teaching, research, and community service functions. It has programs for recruiting, selecting, hiring, deploying, training, and retiring personnel.

CRITERIA	RATING
1. Human resources (HR) policies and programs are aligned with the institution's HR plans and implemented to achieve its teaching, research, and community service objectives. They are regularly monitored and evaluated according to set goals.	
2. Teaching and non-teaching personnel are adequate and possess the required academic and professional experience and understanding, expertise, and skills to serve the needs of the learners and the program effectively	
3. a considerably diverse mix of specializations among qualified faculty to carry out a substantive share of the institution's teaching, research innovation, and service activities.	
4. Policies and procedures for recruitment, hiring, selection, ranking, and promotion are articulated, documented, widely disseminated, consistently applied, and regularly updated.	
5. Training needs analyses are regularly conducted, and training and development programs are provided to teaching and non-teaching personnel supported by an adequate budget.	
6. A comprehensive career pathing program/roadmap is in place and serves as the basis for personnel skills development, career advancement, and transition to different roles within the institution.	
7. A multi-source and feedback-based performance appraisal/assessment system is in place that measures the work performance of all personnel/staff based on set indicators.	
8. Unit heads conduct timely and individual (one-on-one) performance feedback sessions, which are used as the basis for personnel decisions (e.g., retention, promotion, administrative appointment, merit, etc.) and the delivery of support programs (e.g., coaching, mentoring, etc.).	
9. To attract and retain qualified and deserving personnel, a rationalized and competitive compensation, incentives, and benefits package is implemented, regularly reviewed, and upgraded if needed.	
10. Retirement, resignation, and termination from employment policies and procedures are in place, regularly updated, published, and applied fairly.	

11. Human resource policies and procedures comply with regulatory requirements and are implemented to ensure a safe and risk-free work environment.	
12. Human resource plans, processes, policies, and procedures are periodically reviewed and evaluated by concerned stakeholders for improvement and updates on monitored developments and accomplishments.	
Average Rating	

Explanation

The institution ensures a good mix and sufficient human resources that effectively perform and support the core functions of teaching, research, and service. Full- and part-time teaching and non-teaching personnel possess the required educational background, field experience, and skills to match institutional and program requirements. Clear policies and criteria for hiring, retention, promotion, recognition, evaluation, resignation, and termination are established, disseminated, and implemented. A performance management system with feedback mechanisms ensures the systematic assessment of personnel performance and nurtures personnel development through coaching and mentoring. Adequate and equitably administered incentives, compensation and fringe benefits, and relevant training, capacity building, and career-pathing programs are provided that can attract and retain qualified and needed personnel. Human resources policies, processes, and procedures are periodically evaluated with the participation of stakeholders, and evaluation results are used for their improvement and future planning.

Guide Questions:

- How are the HR plans, policies, and programs defined, communicated, and supportive of the institution's vision-mission, goals, and program?
- What are the processes and the criteria for recruiting, selecting, deploying, and promoting personnel (e.g., administrators, faculty, and staff)? Who is involved in these processes?
- How are recruitment, hiring, selection, deployment, promotion, resignation, retirement policies, and provisions formulated, disseminated, and applied?
- To what extent do stakeholders develop, monitor, review, and evaluate human resources/personnel plans, processes, policies, and strategies?
- How does the institution or program ensure that teaching and work assignments match personnel qualifications and capabilities, both teaching and non-teaching?
- How are the development, growth, career path, career-life balance, and other personnel needs determined and met?
- What performance management system is in place, and what are the components (i.e., performance evaluation, coaching and mentoring, rewards and recognition, etc.)?
- How often are personnel evaluated? How are performance results fed back to them?
- How often are the compensation and benefits package, incentives, and rewards revisited and evaluated? Who participates in the review and evaluation?
- What are the provisions for orientation/reorientating new and regular personnel and discussing personnel-related issues and concerns?

- How are the HR plans, programs, and policies evaluated for improvement? What evaluation cycle is followed, and who participates in the evaluation process?
- What are the institution's significant strengths related to this standard?
- What concerns prevent the institution from realizing more than satisfactory compliance with this standard?
- What significant changes or improvements are needed to ensure quality improvement vis-à-vis this standard?

Supporting Evidence:

- Vision-mission and core values of the institution
- Current institutional and program (graduate school) organizational charts
- Human resources plan/s, programs, and policies
- Employee profiles (administrative, teaching, and non-teaching. [for teaching staff, use **APPENDIX C – Program Faculty Profile Template**])
- Samples of employment contracts of faculty and non-teaching personnel
- Turnover ratios across program levels (administrators, faculty, staff)
- Training Needs Analysis conducted for teaching and non-teaching staff, including documented faculty and staff training and development plans, activities, and budget
- Sample evaluation of outcomes (i.e., improvement in work performance, instructional delivery, research and publication, community service, etc.) of faculty and staff development programs
- Personnel orientation program and budget
- Career path program for teaching and non-teaching personnel
- Tools/instruments for hiring, regularization, ranking, promotion, and recognition
- Samples of 201 files
- Personnel awards, recognition
- Salary table/plantilla (institutional and program levels)
- Performance management system and appraisal/evaluation tools (faculty and staff)
- Sample teaching performance evaluation results and other relevant teaching and non-teaching staff reports for teaching personnel, including those made by the different raters (e.g., Dean, Chair, students, etc.).
- Stakeholder surveys (needs assessment, satisfaction surveys, employer surveys, exit interviews, and the like)
- Current Manuals (i.e., Faculty, Personnel/Non-teaching, Student Handbook, etc.)
- Sample minutes of meetings called by the Dean, Chair, or Coordinator (please identify the sector represented by an *attendee*, i.e., *administrator, faculty, graduate student, alums, etc.*)
- Budget allotment for faculty and staff development

AREA: RESOURCE MANAGEMENT

Sub-area 3.2: Financial Resources

STANDARD 9. A system is in place to manage the institution's financial resources, including efficient sourcing, allocation, use, safeguarding, and accounting.

CRITERIA	RATING
1. The financial management system and plans are designed to provide sufficient resources for realizing the institution and program's vision, mission, and goals, mainly the core functions of teaching, research, and service.	
2. Adequate financial support is made available, and fund-sourcing strategies are in place to ensure the program's viability and continuity of operations.	
3. Accountabilities and responsibilities for the care, use, and control of program assets and resources are clearly defined and communicated.	
4. The graduate school's budgeting process is participative and includes regularly releasing analyzed budget performance reports to crucial program administrators.	
5. Accounting internal controls are in place to sustain the successful and cost-effective delivery of programs and services and show compliance with regulatory requirements.	
6. Internal and external audits are regularly conducted to ensure the completeness and reliability of the program's financial reports.	
7. The financial plan, policies, protocols, practices, and utilization of funds are monitored, regularly evaluated with stakeholder participation, and improved.	
Average Rating	

Explanation:

Financial resources are vital to any institution to realize its vision, mission, goals, and objectives and ensure the viability and sustainability of its program offerings, activities, and operations. Its financial resources must be sufficient to support its operations and its strategic and operational plans. Financial controls require developing a system that includes a financial budget, identifying financing sources, the proper use and management of assets, and the reliable recording and reporting of financial results. Financial policies, procedures, strategies, and utilization of funds are regularly evaluated by stakeholders and improved.

Guide Questions:

- How does the institution promote the efficient and effective use of financial resources to support its goals and programs?
- How adequate are the institution's financial resources to sustain its operations and programs?

- How defined are lines of authority for the management of financial resources?
- What systems are in place to ensure that program administrators utilize financial resources efficiently and that all financial reporting requirements are met?
- What financial contingency plans are based on the program's risk assessment to mitigate identified and possible future risks?
- What is/are the processes/es followed in budgeting, program funding, and funds disbursement at the Graduate School level?
- How regularly are internal and external audits done to ensure that recording and reporting standards are in order?
- How is the effectiveness of financial procedures, policies, and strategies assessed?
- How are assessment results communicated to critical managers, especially at the program level? For what purpose/s are assessment results utilized?
- How are critical assets protected?
- What are the institution's significant strengths related to this standard?
- What concerns prevent the institution from realizing more than satisfactory compliance with this standard?
- What significant changes or improvements are needed to ensure quality improvement vis-à-vis this standard?

Supporting Evidence:

- Audited financial reports
- Internal and external audit reports
- Annual GS and program/budget and budget performance analysis reports
- Policies on fiscal authority and responsibility
- Financial plans (institutional and program, where applicable)
- Conflict of interest policies
- Finance Manual and Operations Manual of the Business/Finance Office
- Risk assessment reports (institutional and program levels), including contingency plans, if any
- Evaluation/assessment data of financial procedures, policies, strategies, etc.
- Sample minutes of meetings (institutional and program levels) related to budget preparation and hearings

AREA: RESOURCE MANAGEMENT

Sub-area 3.3: Learning, Physical, and IT Resources

Standard 10: The institution has adequate, conducive, up-to-date, well-maintained, and safe facilities to support teaching-learning, research, and community service.

CRITERIA	RATING
1. The program has physical, learning, and IT resource development plans with appropriated budgets that are documented, implemented, regularly updated, and include provisions for individuals with special needs.	
2. The program has access to appropriate learning and physical resources and available facilities and equipment to satisfactorily meet its mission, objectives, goals, and learning outcomes.	
3. The program is strongly supported by a flexible, reliable, and secure ICT infrastructure and information management system.	
4. A Learning Management System (LMS) is available, efficiently managed, and regularly upgraded to support users' e-learning and other needs and requirements.	
5. The institution's internet speed and bandwidth capacity adequately respond to users' needs and improve operational efficiency.	
6. The library's print, non-print, and online resources are sufficient in quality, diversity, and currency, utilized, regularly updated, and with a budget for developing its collections.	
7. Information technology (IT) support and library resources and services are readily available and delivered by knowledgeable staff regardless of the modality used to effectively support teaching-learning activities, research, and community service requirements.	
8. The adequacy, availability, quality, currency, and effective utilization of the facilities, learning, and IT resources are regularly evaluated by users for improvement and greater user satisfaction.	
Average Rating	

Explanation:

Planning for needed physical facilities, learning, and IT resources is vital in providing the educational experiences and opportunities required to fulfill the institution's needs and programs. With adequate budget commitment, the institution sees that these resources are accessible to all, sufficient in quality and quantity, updated and upgraded over time to effectively support the institution's traditional and flexible teaching-learning activities, research, and community service requirements. A periodic review to assess the adequacy and efficient utilization of these resources is regularly implemented. Stakeholders participate in this evaluation.

Guide Questions:

- How are physical, learning, and IT resource needs identified?
- What policies and procedures exist for physical facilities, learning, and IT resources?
- How adequate is the budget to ensure that physical facilities, learning, and IT resources address users' needs or requirements?
- How sufficient are the IT support, hardware, software, and internet bandwidth to respond to teaching, learning, research, innovation, and service requirements?
- How adequate, qualified, and trained are the library, IT, and laboratory personnel?
- How accessible are the library and laboratories, and how up-to-date or current are the collections?
- How do the learning and technology resources support the program's teaching-learning modality?
- How regular are safety, cleanliness, and maintenance inspections of facilities?
- What kind of training and development is provided to the staff in charge of learning, physical, and IT resources to address the various needs of users?
- How and how often are these resources evaluated for effectiveness?
- What are the institution's significant strengths related to this standard?
- What concerns prevent the institution from realizing more than satisfactory compliance with this standard?
- What significant changes or improvements are needed to ensure quality improvement vis-à-vis this standard?

Supporting Evidence:

- Physical, learning, and IT resources development plans
- Policies and Procedures Manual/SOPs for these resources
- Qualifications of the library, IT, and laboratory staff
- Library, IT, and laboratory budget and budget performance analysis reports
- Staff and user orientation, training, and continuing education documents, including who participated
- Inventory of the acquisitions from the last survey visit (library, laboratories, IT hardware, software, etc.) as evidence for improvements made
- List of library and audio-visual collections
- List of Laboratory equipment (where appropriate)
- List of software and hardware
- List of classrooms and unique rooms dedicated for the use of graduate students
- Documents showing partnerships, linkage, and consortium arrangements with other libraries, etc., for resource-sharing purposes
- Samples of Reports (e.g., inspection, maintenance, safety and security, health, and the like)
- Stakeholders' feedback/satisfaction survey results
- Certificates of compliance with regulatory agencies
- Utilization of data from these resources

- Sample minutes of meetings of offices that supervise and oversee these resources (*please identify the sector represented by an attendee, i.e., administrator, faculty, graduate student, alums, etc.*)

AREA 4: TEACHING-LEARNING

Sub-area 4.1. Curricular Programs

STANDARD 11. A system to design, develop, and review the program offerings is established, ensuring alignment with the institutional vision-mission and goals, with program objectives and learning outcomes, and relevant to meeting stakeholders' needs.

Criteria	Rating
1. Program development and design are innovative, creative, and forward-thinking to ensure that the program proactively responds to emerging developments and trends in the discipline and field.	
2. Academic officials ensure that program objectives and learning outcomes are aligned and consistent with the school's vision and mission, and program offerings are regularly reviewed and evaluated based on stakeholders' needs and requirements.	
3. Faculty, students, alums, and other key stakeholders participate in designing, developing, and evaluating program offerings.	
4. The program objectives and learning outcomes are clearly articulated, cascaded, translated into course learning outcomes, and integrated into instruction and course requirements.	
5. Program objectives and learning outcomes are periodically assessed with stakeholder participation to ensure the realization of the institution's and program's vision, mission, and goals.	
6. The program of studies complies with regulatory requirements. It ensures mastery of core and specialized fields of study, including various problem-solving skills that equip graduate students with professional, technical, and lifelong learning skills and competencies.	
7. Courses are logically structured and sequenced, progressing from foundation to advanced studies appropriate for graduate education.	
8. The contribution of each course in achieving program learning outcomes is stipulated in the syllabi and adequately communicated to students.	
9. Program delivery plans are developed, and all course syllabi are prepared following the institution's required format. They are then approved and communicated to students.	
10. The program development system and objectives and learning outcomes are revised, as appropriate, and improved based on the current trends and needs of the discipline and profession.	

11. The program of studies and program delivery are regularly monitored, evaluated, and improved with the participation of stakeholders.	
Average Rating	

Explanation:

A system is in place to ensure that program offerings align with the institution’s vision, mission, and goals and that they are designed and developed, considering stakeholders’ needs and expectations. The program of study must show the interdependence among the foundation and advanced / specialization courses that realize the program's learning outcomes. Overall, the courses offered exhibit range, depth, coherence, content, and rigor characteristic of graduate education and the level of skills and competencies needed for problem-solving, innovative and critical thinking, and life-long learning. Developing the program includes determining its structure and content, defining the expected learning outcomes, and regularly reviewing the curriculum design, process, courses, and learning outcomes in collaboration with concerned stakeholders for improvement, updating, and keeping abreast/attuned to current trends and industry needs.

Guide Questions:

- What process is followed in the design, development, review, and evaluation of the program of studies? Who is involved in this process?
- How does the development and review cycle ensure a relevant, attractive, and updated curriculum?
- How are evaluation data and feedback from stakeholders utilized?
- Who has the primary responsibility for implementing the curriculum?
- How are the institution and program vision-mission and goals reflected in the various curricula/course offerings?
- How are the learning/expected program outcomes and objectives established and communicated?
- How does the sequencing of courses show the progression from acquiring foundation skills to more complex competencies and skills?
- What are the considerations in the selection and offering of cognate courses?
- What recent improvements have been made to the program/s of studies, and what were the reasons for the changes?
- What benchmarking activities does the institution or program engage in to ensure its curricula are at par with comparable institutions?
- What are the institution’s significant strengths related to this standard?
- What concerns prevent the institution from realizing more than satisfactory compliance with this standard?
- What significant changes or improvements are needed to ensure quality improvement vis-à-vis this standard?

Supporting Evidence:

- Program curriculum/curricula (for multiple programs), both previous and current
- Curricular design, development, review, and evaluation process
- Curriculum implementation or delivery plan
- Curriculum committee composition, functions, terms of office, etc.)
- Faculty, students, alums, industry partners, etc., documented feedback on the curriculum and course offerings
- Curriculum evaluation reports
- Reports of external QA reviews
- GS Bulletin of Information / Graduate Viewbook/Brochure/Catalogue
- Sample minutes of Curriculum Committee meetings (*please identify the sector represented by an attendee, i.e., administrator, faculty, graduate student, alums, industry representative, employer, etc.*)
- Sample minutes of meetings called by the Dean, Chair, or Coordinator and relevant committees or councils [Academic Council, etc.] to discuss curriculum matters (*please identify sector represented by attendee, i.e., administrator, faculty, graduate student, alums, industry representative, employer, etc.*)

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AREA 4: TEACHING-LEARNING

Sub-area 4.2. Teaching and Learning Methods

STANDARD 12. A system to select, develop, and evaluate the appropriate teaching and learning methods and activities is established to achieve the desired learning outcomes.

Criteria	Rating
1. There is a system for selecting, developing, using, and evaluating appropriate teaching and learning methods and activities suitable for graduate-level learning and the teaching modality existing in the institution.	
2. The institution's educational philosophy and program vision, mission, and purpose are well articulated and guide the teaching-learning process.	
3. Teaching methods and strategies are adapted to graduate level, outcomes-focused, appropriate to the course content and delivery modality, and afford the students a broad conceptual mastery of the field of professional practice.	
4. Stakeholders' feedback is considered when selecting, developing, and using teaching and learning methods and activities.	
5. The teaching-learning modalities, strategies, and activities promote expected learning outcomes, problem-solving skills, and life-long learning.	
6. Teaching-learning activities include social involvement and independent study opportunities, academic consultation to address difficulties, and mentoring to encourage advanced or specialized studies.	
7. Evidence-based and comprehensive policies and guidelines on the responsible and ethical use of new technology-mediated/enhanced teaching and learning tools are in place to improve the quality of learning and make education more accessible to a broader population of students.	
8. To improve the teaching-learning process, stakeholders monitor and evaluate implemented teaching-learning modalities, methods, strategies, and activities, including the effectiveness of the learning management system.	
Average Rating	

Explanation:

The teaching and learning approach, methods, activities, and tools are at the core of implementing the program. Thus, guided by the institution's educational philosophy and program mission and purpose, their appropriate selection and use are of particular importance in ensuring alignment with the vision and core values of the institution as well as the program objectives and outcomes. A system should provide relevant stakeholders with opportunities to select, deploy, and regularly evaluate proper and innovative teaching and learning technology tools, methods, and approaches, including those used for non-traditional or alternative modalities. Feedback from stakeholders, especially the students, is regularly gathered, analyzed, and used to improve further the teaching-learning approach, delivery methods, and activities.

Guide Questions:

- What process is undertaken to select, develop, deploy, and evaluate teaching and learning modalities, approaches, strategies, and activities? Who is involved in the process?
- What teaching and learning innovations along the lines of strategies and activities have been introduced and used to increase the engagement of graduate students in their learning?
- How are these innovations aligned to the learning outcomes?
- How are users trained using the institution's learning management system (LMS)?
- What steps have been taken to evaluate the effectiveness of the LMS in meeting the requirements of users? Who participates in the evaluation?
- What policies and guidelines are in place on using new technology-mediated instructional and learning tools in the institution? How are these disseminated to concerned stakeholders (i.e., faculty, students, academic administrators, etc.)?
- How proactive are administrators and faculty in addressing ethical concerns related to using new technologies to safeguard the interests of all stakeholders involved?
- How are academic managers, faculty, students, and staff oriented and trained on the responsible and ethical use of new technology-mediated tools in teaching and learning?
- What steps have been taken to evaluate the delivery mode (i.e., purely online, blended, hybrid, etc.) used in the GS? Who participates in the evaluation?
- What are the institution's significant strengths related to this standard?
- What concerns prevent the institution from realizing more than satisfactory compliance with this standard?
- What significant changes or improvements are needed to ensure quality improvement vis-à-vis this standard?

Supporting Evidence:

- The educational philosophy, vision-mission, and core values of the institution and program, where applicable
- Sample of different course syllabi (master's and doctoral levels if doctoral programs are being assessed)
- Samples of e-learning course design, synchronous, and asynchronous tasks
- Monitoring and evaluation reports/stakeholder feedback on the effectiveness of teaching and learning modalities, methodologies, strategies, and activities (i.e., exit interviews, tracer studies, data culled from student and administrator's evaluation of teaching performance, etc.)
- Training sessions with faculty, students, and other users of the digital platform being used for teaching and learning
- Formal evaluation reports on the effectiveness of the learning management system
- Samples of students' and administrators' accomplished evaluation of the teaching performance of faculty
- Policies and guidelines on the use of new technology-mediated teaching and learning tools and documentation on how these are disseminated to concerned sectors

- Documented orientation and training on the use of new technology-mediated tools
- Stakeholder surveys (needs assessment, satisfaction surveys, employer surveys, exit interviews, and the like)

AREA 4: TEACHING-LEARNING

Sub-area 4.3. Assessment Methods

STANDARD 13. A system is in place to plan and select the most appropriate assessment types to achieve the expected learning outcomes.

Criteria	Rating
1. An established system has been implemented to track students' progress from admission to one level to the next and up to graduation.	
2. The student assessment scheme is constructively aligned with achieving expected learning outcomes using various assessment methods.	
3. The assessment scheme communicated to students includes clear timelines, methods, regulations, rubrics, and grading.	
4. Provisions, including procedures for appeal, are in place to ensure the integrity and fairness of student assessments.	
5. Feedback on student assessment is timely to improve learning.	
6. Exit interviews of graduating students are regularly conducted, documented, and analyzed to provide input for assessment methods and course improvements.	
7. Assessment results are analyzed to improve the assessment scheme and its constructive alignment with expected learning outcomes.	
Average Rating	

Explanation:

The assessment of learning outcomes logically follows from the teaching-learning approach, methods, and activities to deliver the program of studies. While assessment types and practices vary, the objective and fair evaluation of student achievement of learning outcomes are critical in designing, selecting, and utilizing a combination of student assessments. These assessment methods must be constantly reviewed by those concerned and evaluated to ensure their integrity, validity, reliability, and fairness.

Guide Questions:

- What is the process used in designing assessment methods/tools?
- What are the types and methods of assessment used?
- How are the assessment methods differentiated considering the variation in students' abilities, the learning outcomes across the courses in the program of studies, and the modality used?
- How is assessment done during admissions for new students?
- How is exit assessment done on graduating students?
- Who conducts the assessment, and what controls are instituted to ensure validity, reliability, and fairness?
- How satisfied are the students and key stakeholders with the assessment methods?
- How often are the types and assessment methods reviewed, evaluated, analyzed, and improved? Who participates in these activities? How are evaluation results utilized?
- What provisions are in place to address appeals on assessment results?
- What is the process of getting student feedback related to assessing their achievement of learning outcomes?
- How is the achievement of required competencies by all students assessed and assured on completion of the program?
- What mechanism or process is in place to monitor or track students' academic progress from entry into the program until program completion or graduation?
- What are the institution's significant strengths related to this standard?
- What concerns prevent the institution from realizing more than satisfactory compliance with this standard?
- What significant changes or improvements are needed to ensure quality improvement vis-à-vis this standard?

Supporting Evidence:

- Samples of assessment used from student admission, progression up to exit before graduation
- Assessment plan, if any, which details program assessment guidelines, resources, coordination, and support for assessment, as well as assessment activities and initiatives that are presently underway
- Program and course specifications, including learning outcomes
- Guidelines/Policies on the use of e-assessment/e-testing
- Progression, attrition, and completion rates
- Rubrics and grading system
- Official reports on board examination results (the last 3 – 5 years, where applicable)
- Stakeholder surveys (needs assessment, tracer studies, satisfaction surveys, employer surveys, exit interviews, and the like)
- Results of evaluation done to assess the effectiveness of assessment methods used
- Relevant minutes of department/faculty meetings, etc., on matters related to assessment of learning outcomes (please identify sector represented by an attendee, *i.e.*, administrator, faculty, graduate student, alums, industry representative, employer, etc.)

AREA 5: STUDENT SERVICES

Sub-area 5.1. Student Recruitment, Admission, and Placement

STANDARD 14. The institution effectively recruits, admits, and places students using valid and reliable criteria.

Criteria	Rating
1. Policies and procedures are appropriately updated to support achieving student recruitment, selection, and admission objectives in compliance with regulatory requirements.	
2. Selection and admission criteria are well defined to ensure proper matching of students' qualifications, skills, aptitude, and interests to their programs.	
3. Retention and graduation policies and criteria are delineated, widely disseminated, consistently applied, comply with regulatory requirements, and regularly monitored and evaluated.	
4. Student admission, drop-out, and completion rates are regularly monitored/tracked, documented, analyzed, and disseminated to concerned officers for appropriate action.	
5. Key stakeholders regularly appraise the effectiveness of recruitment, selection, admission, retention, and graduation policies, criteria, and procedures and effect upgrades and improvements as needed.	
6. Evaluation results measure goal achievement and are used to improve policies and procedures for greater student satisfaction and future planning.	
Average Rating	

Explanation:

The quality of graduates is significantly affected by the quality of students that an institution recruits and admits. The students are correctly selected and placed where their academic, technical, and professional requirements match their programs. Recruitment, admission, retention, promotion, graduation policies, criteria, and requirements reflect the institution's and the different programs' objectives. Likewise, these are transparent, inclusive, disseminated to all concerned stakeholders, consistently applied, and comply with regulatory requirements. Provisions are in place to track the student's academic progress and monitor the attrition and completion rates. Stakeholders evaluate these policy criteria and conditions, and results are utilized for improvement.

Guide Questions:

- What process is followed in formulating, evaluating, and updating the recruitment, selection, admission, retention, promotion, and graduation policies, procedures, and criteria? Who is involved in the process?
- How are these policies and criteria disseminated to stakeholders?

- Who defines the selection criteria for incoming and regular students and those in special groups?
- What offices/persons are responsible for student recruitment, selection, admission, retention, and graduation?
- How are new students oriented and regular students reoriented in the recruitment, selection, admission, retention, and graduation policies and procedures?
- What other matters are covered in student orientation activities so students know expectations and requirements well?
- What indicators are used to monitor student progress and performance?
- What monitoring system is implemented to determine student attrition, retention, and completion rates? Which office or offices are given these monitoring reports?
- How are monitoring data utilized?
- How are learners given feedback on their progress and performance? What support is provided to improve their performance?
- How often are recruitment, admission, selection, retention, promotion, and graduation processes, policies, procedures, and guidelines evaluated? Who participates in this activity?
- How are evaluation results utilized?
- What are the institution's significant strengths related to this standard?
- What concerns prevent the institution from realizing more than satisfactory compliance with this standard?
- What significant changes or improvements are needed to ensure quality improvement vis-à-vis this standard?

Supporting Evidence:

- Student Handbook/Viewbook/Catalogue and Bulletin of Information
- Recruitment Plan or program including marketing collaterals
- Enrollment data (3-year data for a preliminary visit, 2-year data for a formal visit, and 5-year for a resurvey visit) per degree program under survey to include several applicants who were accepted vis-à-vis number of those who enrolled
- Student recruitment, admission, selection, retention, and graduation criteria, policies, and procedures
- Office and committee reports on student recruitment, admission, selection, retention, and graduation
- Records of attrition and completion rates per degree program (last five years regardless of type of survey – preliminary, formal, or resurvey)
- Evaluation results of/stakeholder feedback on the effectiveness of the recruitment, admission, retention, and graduation process/es, policies, criteria, etc.
- Sample office/committee minutes of meetings (i.e., Admissions, Registrar, Marketing, etc.)

AREA 7: RESEARCH

Sub-area 7. 1. Research Management and Collaboration

STANDARD 18. The institution implements a research program aligned with its mission and vision, supports its teaching-learning and community engagement functions, and addresses local and national development needs.

Criteria	Rating
1. A well-crafted research agenda with defined plans, goals, and activities at the institutional and program levels has been determined.	
2. Administrative officials ensure that the program’s research, creative work, scholarship, innovation thrusts, and plans align with the institution and program’s research agenda.	
3. Stakeholders participate in the planning and developing the program’s research, creative work, scholarship, innovation thrusts, plans, and activities.	
4. The program's institutional policies, quality framework, standards, and procedures for research and publication, creative works, and innovation are updated, disseminated, and consistently applied.	
5. A functional research structure with qualified staff is in place.	
6. A needs-based research capacity-building program with adequate support resources (human, financial, etc.) is in place and periodically evaluated for effectiveness.	
7. Resources, grants, and incentives, among others, are adequately provided to innervate faculty, students, and staff to undertake research, publish, and disseminate their research.	
8. Completed, presented, and published research, creative works, and scholarship are used to rank, promote, award, and recognize faculty researchers.	
9. Linkages, networks, and partnerships are established to facilitate research collaboration, access to resources, and strengthening of research activities, publication, dissemination, and output utilization.	
10. Completed, presented, and published research, creative works, scholarship, and innovation agenda, thrusts, plans, and activities, among others, are regularly evaluated using measurable quality indicators.	
11. Assessment/Evaluation results are used to continuously improve research and research-related programs and activities and ensure relevance to stakeholders and the needs of the profession and industry.	
Average Rating	

Explanation:

The institutional agenda or strategic directions for research, creative work, scholarship, and innovations are adapted to the program's goals and learning outcomes. The research initiatives and activities of the program are accomplished by having a robust structure with qualified staff, adequate resources, and policies and guidelines. Local and international linkages and partnerships among educational institutions and agencies encourage more faculty, students, and staff to research and publish their works. Incentives, awards, and benefits are provided for meritorious research and scholarly achievements. To ensure that a climate of research is achieved, all research and research-related plans, programs, activities, and incentives, among others, are assessed with stakeholder engagement for improvement and to sustain a research culture.

Guide Questions:

- What process is followed, and what factors are considered in developing the institution's research agenda and various academic programs?
- Who is involved in the formulation of the institutional and program agenda?
- How is alignment between the institutional and program agenda ensured?
- How is alignment among the program research agenda, program thrusts, and learning outcomes ensured?
- What structure is in place, or which office takes care of research and publication activities of the school and program?
- What process is followed, and who evaluates the research, creative work, innovation thrusts, and plans?
- How adequate are the budget and support resources for research and publication activities?
- What incentives and benefits are provided to recognize meritorious achievements in faculty, student, and staff research and publication?
- What avenues are provided to enhance the research and publication competencies and skills of faculty, students, and staff?
- What opportunities are given to faculty, students, and staff to engage in collaborative, interdisciplinary, and intradisciplinary research?
- What linkages or partnerships have the school and program established to support their research and publication plans, programs, and activities?
- How are the research and publication activities monitored and evaluated? Who is involved in the process?
- How are the review and evaluation results utilized for improvement?
- What are the institution's significant strengths related to this standard?
- What concerns prevent the institution from realizing more than satisfactory compliance with this standard?
- What significant changes or improvements are needed to ensure quality improvement vis-à-vis this standard?

Supporting Evidence:

- Research, creative works, and innovation agenda
- Research, creative work, and innovation thrusts and plans
- Research Manual
- Policies and guidelines on the development, review, and evaluation of program research and creative work thrusts and plans
- The organizational chart of the office/s tasked to oversee research activities, including the job description of the staff
- Research budget over the last five years, including the budget performance reports of the office in charge of research and publication activities
- List of relevant institutions and organizations with established research partnerships and collaboration
- Composition and functions of committees tasked to evaluate the research and publication thrusts, activities, plans, outputs, etc., including minutes of meetings of these committees
- List of research activities completed in the last five years (separate list for faculty, students, and staff, where appropriate) - use **APPENDIX D – Graduate Education Research, Scholarly, and Creative Works Template** for needed information)
- List of program faculty, student, and staff publications in the last five years (separate list)
- List of ongoing research, including those awaiting publication
- Research capacity-building activities attended by program faculty, students, and staff
- Evaluation results on the following: research plans, programs, thrusts, quality of research and publication activities, research utilization, and capacity building activities,
- Tool used to assess the quality of research and publication, including research utilization, if any
- Sample minutes of meetings of office/s and committees in charge of all matters related to research (*(please identify sector represented by attendee, i.e., administrator, faculty, graduate student, etc.)*)

Area 8. RESULTS

Sub-area 8.1. Educational Results

STANDARD 20. The educational process results include the achievement of the expected learning outcomes, pass rates, dropout rates, the average time to graduate, employability of graduates, pass rates of graduates in board examinations of board-related program offerings, and the satisfaction levels of graduates, among others.

Criteria	Rating
1. The expected institutional, program, and course learning outcomes are clearly defined, regularly monitored, and evaluated for improvement.	
2. Student attrition and retention rates are identified, systematically tracked, and evaluated for improvement.	
3. The student's average time to graduate and completion rate (within the prescribed time) are identified, systematically tracked, and evaluated for improvement.	
4. The employment advancement of graduates is established, systematically monitored, and evaluated for improvement.	
5. The institution regularly collaborates with the hospitality, travel, and tourism industries and relevant professional associations to support student learning and advance improvement efforts.	
6. Key stakeholders' satisfaction levels with the quality of students and graduates are established, systematically monitored, and evaluated for improvement.	
Average Rating	

Explanation:

Educational results are the indicators of the quality of education the institution provides. Results are the outputs of the transformation process the student underwent. In assessing the quality system, it is essential to establish, monitor, and evaluate indicators of the quality of graduates. These include the achievement of learning outcomes, pass and dropout rates, the average time to graduate, the career advancement of graduates, the pass and failure rates in board examinations, and the satisfaction levels of key stakeholders on graduates. The information is gathered, analyzed, and used to improve the programs.

Guide Questions:

- How do the institution and program use the indicators and methods in determining, monitoring, and assessing the quality of graduates?
- What measures are utilized to determine whether learning outcomes set on the institutional and programmatic level are achieved when students graduate?
- How do the institution and program collaborate with industry partners and relevant professional bodies to align learning outcomes with professional and industry needs?
- What measures are undertaken if the results of the pass and dropout rates are unsatisfactory so improvements can be realized?
- How satisfactory are the graduation rates of the program?
- What measures have been undertaken when graduation rates are low?
- How does the institution track the faculty, students, alums, and employers' satisfaction with the program of studies, teaching-learning process, resources provided, competencies acquired, strengths of graduates, etc.?
- What measures are taken to gather information on graduates' quality, career advancement, etc.?
- What are the institution's significant strengths related to this standard?
- What concerns prevent the institution from realizing more than satisfactory compliance with this standard?
- What significant changes or improvements are needed to ensure quality improvement vis-à-vis this standard?

Supporting Evidence:

- Performance reports – attrition/drop-out rates, graduation rates
- Documented interventions to improve pass, drop-out, and graduation rates
- Stakeholders' satisfaction results
- Tracer studies of graduates
- Employment surveys and statistics
- Graduates, alums, and employer surveys
- Sample minutes of consultation meetings with industry partners, professional bodies, etc. *(please indicate the name of the attendee and sector represented – i.e., administrator, faculty, industry representative, etc.)*

AREA 8: RESULTS

Sub-area 8.3. Research Results

STANDARD 22. The institution has produced research outputs through new knowledge embodied in publications, citations, journals, research-informed teaching, technology transfers, innovations, inventions, creative works, etc.

Criteria	Rating
1. The nature/type, quality, and quantity of program faculty, staff, and student intellectual contributions are documented, monitored, and evaluated for improvement.	
2. The nature/type, quality, and quantity of interdisciplinary, intradisciplinary, and collaborative research are documented, monitored, and evaluated for improvement.	
3. The nature, quality, quantity, and reach of published and disseminated research reports and other technical publications are identified, monitored, and evaluated for improvement.	
4. The nature, quality, quantity, and reach of creative work and intellectual properties are documented, monitored, and evaluated for improvement.	
5. The nature and number of external research funding and grants are identified, monitored, and evaluated for improvement.	
6. The number of faculty, staff, and students receiving external research awards and recognition is identified, monitored, and evaluated for improvement.	
7. The number of research outputs utilized by beneficiaries and industry is identified, monitored, and evaluated for improvement.	
8. Relevant stakeholders' satisfaction with research and publication activities is determined and utilized further to develop these activities at the institution and program levels.	
Average Rating	

Explanation:

Research is one of the core functions of any educational institution. Thus, it becomes imperative to drive quality research and publication to establish and maintain its good reputation. Results in research and publication may be measured based on widely accepted indicators such as the creation of new knowledge, invention, or innovation. The indicators may also include the variety, quality, and quantity of research outputs or other target outcomes, including their “reach” and the extent and breadth of the audience, communities, or sectors that benefit from research outcomes. Results are identified, monitored, and assessed for improvement and impact.

Guide Questions:

- What is the nature of the institution's research activities?
- What criteria were used in selecting these types of research activities?
- What steps are taken to ensure research activities align with the institution's and program's research agenda?
- To what extent has the institution or program enjoyed external research funding and grants due to its track record in research?
- What indicators have the institution and program selected to assess the “reach” and impact of research and publication activities?
- How does the institution or program monitor the utilization of research?
- What benefits have these activities had on the target beneficiary of the research, the institution, and the research proponents?
- How are research, intellectual contributions, and publication activities monitored and evaluated vis-à-vis nature/type, quality, quantity, reach/impact, etc.? Who is involved in monitoring and evaluation?
- What are the institution's significant strengths related to this standard?
- What concerns prevent the institution from realizing more than satisfactory compliance with this standard?
- What significant changes or improvements are needed to ensure quality improvement vis-à-vis this standard?

Supporting Evidence:

- Performance reports on research and publication activities of the institution/program (*please provide separate lists for single-authored research and publication by faculty, staff, student, if any, co-authored/collaborative research, etc.*)
- Document showing the types of research conducted (i.e., multi-, inter-, trans-disciplinary, etc.), including the names of research proponents (*please identify the proponent if program faculty or student*)
- Research Agenda at the institutional and program levels
- Research budget, internal research funds, and related resource support
- List of those who were given research and publication awards by the institution and by outside agencies
- List of those who received external funding and grants and the research they conducted
- List of commissioned research requested by external groups or agencies done by the institution/program within the last five years (*please indicate if completed or ongoing and the researchers conducting the study*)
- List of publications and citations
- Research utilization reports
- Registration of copyrights, trademarks, and patents
- Documented feedback on the satisfaction of relevant stakeholders in the institution and program's research, scholarly works, and publication activities

Statistical Summary

Statistical Summary of Ratings	Ratings (in two decimal places)
Area 1. Leadership and Governance	
Sub-area 1.2 Leadership and Management	
Sub-area 1.5 Risk Management	
Area 1 Average Rating	
Area 3. Resource Management	
Sub-area 3.1 Human Resources	
Sub-area 3.2 Financial Resources	
Sub-area 3.3 Learning, Physical, and IT Resources	
Area 3 Average Rating	
Area 4. Teaching-Learning	
Sub-area 4.1 Curricular Programs	
Sub-area 4.2 Teaching and Learning Methods	
Sub-area 4.3 Assessment Methods	
Area 4 Average Rating	
Area 5. Student Services	
Sub-area 5.1 Student Recruitment, Admission, and Placement	
Area 5 Average Rating	
Area 7. Research	
Sub-area 7.1 Research Management and Collaboration	
Area 7 Average Rating	
Area 8. Results	
Sub-area 8.1 Educational Results	
Sub-area 8.3 Research Results	
Area 8 Average Rating	
Overall Average Rating	

APPENDIX A

GUIDELINES FOR “PIGGY-BACKING” IN THE ACCREDITATION OF GRADUATE PROGRAMS

“*Piggy-backing*” in accreditation is the process where additional programs being submitted for certification (at any level) will utilize only applicable supplements (covering areas or standards specific to programs) instead of using the complete PAASCU instrument and preparing complete self-assessment reports.

It should be noted that Level I (Initial) Accreditation is valid for three (3) years, and succeeding reaccreditations (Levels II, III, or IV) are valid for five (5) years.

In addition, a program must have government recognition and have graduated at least two batches of students, and where applicable, two batches must have taken licensure exams to be eligible for a preliminary survey.

1. For an institution offering graduate programs to be eligible for “piggy-backing,” it must have at least one graduate program that had completed a formal survey using PAASCU’s [new] entire instrument. This program shall be referred to as the “anchor program.”

Note: In most cases, anchor programs in Graduate Schools are the Master of Arts in Education (MAED), Master in Public Administration (MPA), or Master in Business Administration (MBA) since the first PAASCU instruments were developed for these programs. However, institutions may have anchor programs in other disciplines (e.g., Master of Arts in Nursing).

If the anchor program is only on Level I (Initial) accreditation, approved applications for preliminary surveys of other (additional or new) programs must be scheduled during the first two years of the anchor program’s period of accreditation¹. These different programs shall be referred to as “piggy-backing” programs.

2. If the anchor program is on at least Level II (i.e., has completed at least one resurvey), approved applications for preliminary, formal, or resurveys of piggy-backing programs must be scheduled no later than the third year of the validity of accreditation of the anchor program(s). Otherwise, the institution shall be required to prepare follow-up action reports on the previous recommendations for the anchor program(s) in the areas or standards not covered in the supplements (for the piggy-backing programs). These follow-up action reports must be submitted with the self-survey reports for the piggy-backing programs. Still, the status of their implementation will only be noted and utilized as critical contexts for evaluating the piggy-backing program(s) but not officially assessed by or included in the observation reports of the PAASCU Survey Team.

¹. If the requested schedule for the piggybacking program's preliminary visit is in the final (3rd) year of the anchor program’s accreditation, simultaneous preliminary and resurvey visits may be the more efficient option.

3. If the anchor program is accredited but requires an Interim Visit, the visits to piggy-backing programs shall preferably be scheduled with the Interim Visit. Suppose the piggy-backing visit is scheduled after the Interim Visit. In that case, the PAASCU Survey Team shall have access to the report of the Interim Visit (if already available) or the school's self-survey report for the Interim Visit; however, if the schedule after the Interim Visit is also after the 3rd year of the validity of accreditation of the anchor program(s), #3 above will apply for the areas or standards neither covered in the Interim Visit nor the supplement for the piggy-backing programs.
4. If the accreditation of the anchor program is deferred, any application for preliminary, formal, or resurvey visit of piggy-backing programs will be for deliberation by the Graduate Education Commission. Ideally, such piggybacking visits cannot proceed until the accreditation status of the anchor program(s) is cleared. Thus, for such accreditation visits to proceed while the accreditation of the anchor programs remains deferred, a favorable recommendation by the Commission and approval by the PAASCU Board shall be required.
5. If the accreditation of the anchor program(s) has lapsed, no piggy-backing surveys shall be allowed until the accreditation status of the anchor program(s) is regained. The institution, however, may still be allowed to have the preliminary, formal, or resurvey of other programs provided that it completes a self-survey report using the full instrument² for the program.

² The entire instrument may be the Graduate Program Instrument (for Arts/Science/Education), with some standards replaced by those from the appropriate supplement instrument (e.g., for Health Sciences, etc.).

APPENDIX B

PAASCU GRADUATE EDUCATION COMMISSION EXCLUSION/ELIGIBILITY CRITERIA FOR THE GRANT OF ACCREDITATION

Accreditation is a confirmation of the quality of an accredited program. The Graduate Education Commission considers the guidelines enumerated in this document essential and that institutions seeking accreditation or reaccreditation should strictly comply with them. It is to be noted that the guidelines may change over time based on new policies, standards, and procedures made by PAASCU and the Commission on Higher Education (CHED).

A. ADMINISTRATION

1. Graduate School (GS) Dean

- 1.1. For institutions with a separate/stand-alone Graduate School, the GS Dean or Academic Head shall have a doctoral degree in the discipline or allied fields.
- 1.2. For institutions where the graduate programs are vertically aligned (i.e., the same Dean overseeing tertiary and graduate school programs), the doctoral degree will not be required of the Dean. However, at the very least, the graduate program head or program chair should hold a doctoral degree in the discipline or allied fields.

2. GS Department Chair / Program Head / Coordinator

A Department Chair, Program Head, or Coordinator must hold a doctoral degree in the discipline or allied fields.

3. **For a Professional Master's Program**, the Dean or Head shall hold a doctoral degree in the discipline or allied fields or at least a master's degree in the discipline or allied fields with relevant professional practice outside of academe.

B. ACADEMIC QUALIFICATIONS AND NUMBER OF FACULTY

1. For Doctoral Programs

All faculty teaching in the doctoral program, whether full-time, part-time, or adjunct, should have postgraduate degrees in the discipline or allied fields per program.

2. For Master's Programs

a. For the Thesis Track

- 1) At least four (4) full-time faculty with doctoral degrees in the discipline per program; **or**
- 2) In instances where there is a shortage of doctoral degree holders in the discipline, one (1) full-time doctoral degree holder in the discipline **and** at least three (3) full-time faculty with master's degrees in the discipline

b. For the Non-Thesis Track

- 1) At least four (4) full-time faculty with doctoral degrees in the discipline per program; **or**
- 2) In instances where there is a shortage of doctoral degree holders in the discipline, one (1) full-time doctoral degree holder in the discipline **and** at least three (3) full-time faculty with master's degrees but with doctoral units in the discipline.
- 3) For industry-oriented programs, at least three (3) full-time faculty with master's degrees and extensive industry experience.

NOTE: If a faculty member does not possess the required academic qualification (e.g., doctoral or master's degree), the team can consider levels of equivalency (i.e., the stature of the faculty in terms of awards received, reputation/recognition in their field—reputation for outstanding research, scholarship or artistic creativity, distinguished record of teaching and service to the profession, and the like). The institution should provide evidence of this for the team to assess compliance with the academic requirements of faculty.

C. PERFORMANCE IN LICENSURE EXAMINATIONS AND LICENSE OF FACULTY

1. For programs requiring graduates to take a licensure examination, the GED Commission will use the PAASCU BOT-approved guidelines on licensure examinations
2. The Commission will require the updated license of concerned faculty teaching courses covered by the PRC board examinations (i.e., faculty teaching in undergraduate and graduate programs where licensure examinations are required).

For example, faculty teaching the following subjects listed below in the graduate programs in Psychology and Guidance and Counseling should have their license renewed per PRC requirements.

- Advanced Theories of Personality
- Advanced Abnormal Psychology
- Advanced Psychological Assessment
- Psychological Counseling and Psychotherapy

The exact requirement (current license) holds for programs where faculty members must update their license where appropriate (i.e., those teaching professional courses in their respective programs as defined by the institution, such as Education, Nursing, etc.).

NOTE: The institution/program is responsible for guaranteeing that concerned faculty members have their updated licenses *during the accreditation visit*.

GED Commission 2024

PAASCU

APPENDIX C. FACULTY PROFILE TEMPLATE

Arts, Sciences, Education, and Business

GRADUATE PROGRAM FACULTY PROFILE¹

_____ Semester/Term, Academic Year _____

Department of _____

Name of Faculty (Please list faculty alphabetically by last name)	Years of Service	Area of Specialization	Educational Qualifications / Credentials (Please indicate the school where the degree was earned)			License, if any (Please indicate latest renewal date)	Specialized Training and Certification Received, if any (Please indicate date of completion)	Current Membership in Professional Association/s (Please indicate the name of association or organization, position, and membership number, when applicable)	Teaching Load and Other Responsibilities/Assignments [Please indicate course code and name/s of subject/s, and other responsibilities/ assignments, if any (e.g., Administrator, Counselor, Senior HS Faculty)]								
			Earned Master's Degree	Earned Doctoral Degree	On-going Doctoral Studies				Graduate Program Subjects	Units	Undergraduate Program Subjects, if any	Units	Number of Preparations	Other Responsibilities / Assignments ²	Equivalent Units, if any	Total No. of Units, if any	
FULL-TIME																	
PART-TIME																	

NOTES:

¹ For multiple programs, please prepare a separate table for each program under the survey (for example, one table each for MAEd, MSMath, MBA, etc.).

²For administrators with teaching loads, please indicate the position and unit equivalent for the position, if any.

The data in this table will be used only for accreditation purposes, and data confidentiality will be respected at all times.

Prepared by: GED Commission

APPENDIX D. GRADUATE EDUCATION RESEARCH, SCHOLARLY, AND CREATIVE WORKS TEMPLATE
RESEARCH, SCHOLARLY AND CREATIVE WORKS

Name of Institution: _____

_____ Semester/Term, Academic Year _____

Department of _____

Faculty Member (Please list faculty alphabetically by the last name)	Status (FT/PT)	Portfolio of Research/Scholarly Contributions					Types of Scholarly Contributions							
		Basic/Discovery Research (Scholarship of Discovery)	Applied or Action Research (Scholarship of Application)	Academic Research (Scholarship of Teaching)	Interdisciplinary Research (Scholarship of Integration)	Total	Paper/s Presented		Unpublished Articles, Monographs, Manuscripts, Books, etc.	Peer-Reviewed Studies/Articles	Conference Publications	Published Monographs, Manuscripts, Books, Novel, Essays, etc.	Creative Works and Other Contributions (Exhibits, Inventions, Theater Play, etc.)	Total
							International	Local						

NOTES:

- (1) The research summary and scholarly contributions are from the most recent completed accreditation survey.
- (2) Please prepare a table on a per-program basis.
- (3) Please include details of paper presentations (when and where presented) and titles of published and unpublished works, including the name of the journal where published.
- (4) Creative works in the arts and humanities should be included as appropriate, and details should also be provided.
- (5) Scholarship of discovery involves engaging in research activities that expand knowledge.
- (6) Scholarship of application involves discovering ways that new knowledge can be used to solve real-world problems.
- (7) Scholarship of teaching involves the search for innovative approaches and best practices to develop teaching and learning skills.

The data in this table will be used only for accreditation purposes, and data confidentiality will be respected at all times.

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