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Higher Education Evaluation and
Accreditation Council of Taiwan

Second Cycle of Institutional Accreditation Handbook (2017–2018)

Higher Education Evaluation and Accreditation Council of Taiwan

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I. Second Cycle of Institutional Accreditation

The second cycle of institutional accreditation took place between 2017 and 2018. This chapter introduces the background, goals, and philosophy of accreditation, so that all educational institutions involved have a clear idea of what the process entails.

1. Quality Assurance Concept/Approach

The aim of the second cycle of institutional accreditation is to guarantee institutional quality, demonstrate the institution's distinct features and institutional effectiveness, and promote institutional improvement. In other words, every university or college is a unique institution of higher education, with its distinct self-positioning and educational goals. To respect this reality, the accreditation standards for the second cycle of institutional accreditation have been designed to allow a high degree of flexibility in the practices employed by institutions to demonstrate their distinct nature. An institution can thus conduct self-assessment in a manner appropriately reflective of its unique character. In definite terms, the main features of the philosophy underpinning accreditation are as follows:

(1) Professional accreditation model:

The second cycle of institutional accreditation employs a professional accreditation model aligned with specific quality assurance guidelines and principles. Experts and academia with administrative experience collectively review the quality of university education. Institutions are not ranked based on a set of quantitative indicators; instead, institutions are encouraged to develop their own identities, features, and internal quality assurance mechanism.

(2) Use of the Plan-Do-Check-Act (PDCA) iterative method:

The second cycle of institutional accreditation guides institutions in using the PDCA method to continuously improve

and effectively increase institutional quality.

(3) Importance of institutional effectiveness

The first cycle focuses on the “input” dimension at the program level, emphasizing that a high-quality learning environment should be provided to students. In the first cycle of institutional accreditation, the focus was on “process,” with importance conferred to developing mechanisms to measure the learning outcomes of students. In the second cycle of program accreditation, the focus shifted to “students learning outcome,” with reviewers examining how the institution implemented its educational objectives and measuring the core competencies of students. In the second cycle, the practices used to ensure learning outcomes based on the mechanisms created by the institution are examined. To ensure a consistent and systematic accreditation process, the core philosophy of the first cycle of institutional accreditation will continue to be applied for the second cycle of institutional accreditation.

The emphasis is twofold: to implement a quality assurance system that displays the institutional effectiveness and social responsibility of the institution and to implement mechanisms and practices that ensures the learning outcomes of students and demonstrates their employability.

2. Background

Article 5 of the University Act states the following:

“Universities shall regularly carry out self-assessment of their teaching, research, services, counseling and guidance, academic affairs, administration, and student participation; regulations governing the evaluation shall be formulated by each university.”

“To promote the development of every university, the Ministry of Education shall organize an Assessment Committee, or commission academic organizations or professional accreditation bodies, to carry

out regular assessments of the universities, and it shall make the results public. The assessment results shall be referred to for making changes to, and developing universities. The assessment shall be undertaken in accordance with the principles of incorporating diversity and professionalism, and the associated regulations governing assessment shall be formulated by the Ministry of Education.”

Article 5 establishes the Taiwan Ministry of Education (MOE) as the competent authority for evaluating institutions of higher education. Accreditation results have since become widely recognized as a measure of institutional performance and a guarantee of quality education.

The main objective of higher education is the pursuit and dissemination of knowledge—a pursuit that is rooted in commitment to value, truth, and social responsibility. Under this vision, the Higher Education Evaluation and Accreditation Council of Taiwan (hereinafter “the Council”) has been established, and it serves as the national accreditor for institutions of higher education in Taiwan (R.O.C.).

According to a survey conducted by the European Commission, approximately one-half of member countries have already begun to employ an accreditation system in their designs and plans to evaluate universities. To date, several higher education quality assurance mechanisms have been established, such as evaluation, review, audit, accreditation, and others. However, according to the needs of higher education in Taiwan, diversification of higher education is required in Taiwan.

In response to international trends and to ensure that the system for evaluating and accrediting institutions of higher learning in Taiwan remains updated with global developments, the Council has adopted an accreditation system similar to that used in the United States. The United States has established an accreditation system for institutions of higher education to evaluate educational goals and

guarantee high-quality education; this system has been adopted by many major countries worldwide and has been adapted to the corresponding local circumstances. Currently, it has become the primary method used by developed countries to evaluate their institutions of higher education.

The Accrediting Commission for Senior Colleges and Universities of the Western Association of Schools and Colleges (WASC) in the United States released *Handbook of Accreditation* in 2013. The commission lists three core commitments indispensable to the accreditation process: Core Commitment to Student Learning and Success; Core Commitment to Quality and Improvement; and Core Commitment to Institutional Integrity, Sustainability, and Accountability. By affirming the core commitments, WASC hopes that an institution will “create learning environments that continuously strive for educational excellence and operational effectiveness in order to serve both students and the public good.”

Accreditation is defined as an evaluation process in which an institution and its programs are reviewed, and the review is conducted by an external authority to guarantee and improve quality and to maintain integrity. The basic goals of accreditation are to enhance and preserve the quality of higher education and to assure the general public of this quality. Moreover, trust, standards, evidence, professional judgment, and evaluation by professional peers are the keys to accreditation. The focus of accreditation can be an academic institution as a whole or one of its programs. The process of accreditation includes self-assessments performed directly by the institutions as well as on-site visits made by teams of peer professionals; in short, it is a process that provides an assurance of quality regarding an academic institution’s performance and integrity.

The Core Commitment to Student Learning and Success means that an institution has established clearly defined educational goals and learning outcomes for students, and that the institution is

constantly seeking ways to improve learning outcomes. The Core Commitment to Quality and Improvement means that an institution assures high quality in all of its educational activities; it uses appropriate evidence to improve teaching, learning, and overall institutional effectiveness. Through comprehensive planning, the institution demonstrates its ability to satisfy its core commitments and future needs. The Core Commitment to Institutional Integrity, Sustainability, and Accountability means that the institution has clear goals, high standards of institutional integrity, and robust financial and operational structures, and it is thus able to uphold an enhanced quality of higher education and fulfill its responsibilities for the good of the public. The end goal of accreditation is not to establish university rankings but to provide assurance of academic quality and to ensure that institutions strive to continuously improve.

The Council conducted the first cycle of institutional accreditation in 2011 and adopted the PDCA method as a part of the accreditation process to assure quality and to help establish practices for improving institutions of higher education. The second cycle of institutional accreditation was planned between 2017 and 2018.

3. Goals

The mission and goals of the second cycle of institutional accreditation can be seen as an extension of the initial cycle: namely, to ensure that institutions of higher education enhance their practices for internal quality assurance and continuous improvement. The process of self-assessment and on-site visits made by an external team of peer professionals aims to ensure that an institution's operational practices support the realization of the institution's founding purpose and goals and to ensure that the institution demonstrates institutional effectiveness and social responsibility. Finally, the analysis of accreditation results can serve as a reference for making recommendations related to formulating policy in higher education. The overall goals of the second cycle of institutional

accreditation are as follows:

- (1) To assess institutional effectiveness: this is based on the institution's governance and management; teaching; research; services; and learning outcomes of students.
- (2) To demonstrate the institution's self-positioning and distinct features: an institution should formulate a development plan based on its self-positioning, conduct regular self-assessments, make adjustments, and actively implement its plan, thereby displaying the institution's distinct features and helping it to reach its educational objectives.
- (3) To fulfill social responsibilities: the second cycle of institutional accreditation should demonstrate the positive impact on higher education institutions and the development of R&D nationwide.
- (4) To provide a reference for policy-making: the overall accreditation results can be used to advise all parties involved in the policy-making process for providing recommendations on the development of higher education.

II. Accreditation Process

The accreditation process involves the following components, which are individually discussed below: (1) list of evaluated institutions; (2) plan and schedule; (3) accreditation standards and indicators; (4) institutional self-assessments; (5) on-site visits; (6) accreditation procedures; and (7) accreditation results.

1. List of Institutions Underwent Accreditation

The second cycle of institutional accreditation was conducted over 2 years, with each year divided into two 6-month evaluation periods. The goal was to evaluate 85 institutions of higher learning between 2017 and 2018. The institutions to be evaluated included 70 public and private universities, 5 religious schools, 8 military and police academies, and 2 open universities. In response to the current operational situation of the institutions, visits were conducted either in the first or second half of an academic year. A list of institutions to be evaluated is as follows:

- (1) A total of 16 institutions were scheduled for evaluation in the first half of 2017:

CTBC Financial Management College, Taiwan Shoufu University, MingDao University, Dharma Drum Institute of Liberal Arts, R.O.C. Air Force Academy, R.O.C. Naval Academy, Aletheia University, Open University of Kaohsiung, National Quemoy University, Taiwan Baptist Christian Seminary, Army Academy R.O.C., Kainan University, University of Taipei, Christ's College Taipei, Toko University, University of Kang Ning.

- (2) A total of 17 institutions were scheduled for evaluation in the second half of 2017:

Tatung University, Central Police University, Chinese Culture University, Air Force Institute of Technology, Fo Guang University, MacKay Medical College, National Chung Cheng University, National Open University, National University of Kaohsiung,

National Taitung University, Tainan National University of the Arts, National Taiwan University of Arts, National Taiwan University of Sport, National United University, National Taiwan Sport University, National Defense Medical Center, R.O.C. Military Academy.

- (3) A total of 25 institutions were scheduled for evaluation in the first half of 2018:

Da-Yeh University, Chung Shan Medical University, Chung Yuan Christian University, Chung Hua University, Yuan Ze University, Hsuan Chuang University, Asia University, Chang Jung Christian University, Nanhua University, National Sun Yat-sen University, National Central University, National Chung Hsing University, National Dong Hwa University, National Pingtung University, National Kaohsiung Normal University, National Chiayi University, National Taipei University of Education, Taipei National University of the Arts, National Taiwan Ocean University, National Defense University, Feng Chia University, Tzu Chi University, I-Shou University, Shih Chien University, Providence University.

- (4) A total of 27 institutions were scheduled for evaluation in the second half of 2018:

China Medical University, I-Kuan Tao College, I-Kuan Tao Chong De School, Shih Hsin University, Taiwan Theological College and Seminary, Soochow University, Tunghai University, Chang Gung University, Kaohsiung Medical University, National Chiao Tung University, National Cheng Kung University, National Ilan University, National Chengchi University, National Tsing Hua University, National Yang-Ming University, National Changhua University of Education, National Chi Nan University, National Taichung University of Education, National Taipei University, National University of Tainan, National Taiwan University, National Taiwan Normal University, Tamkang University, Huafan University, Taipei Medical University, Fu Jen Catholic University,

2. Plan and Schedule

The entire accreditation process is planned to be conducted from April 2016 to June 2021. As stated above, evaluations will be divided into 6-month periods. The accreditation process will be conducted in a total of five stages: (1) Preparatory Stage; (2) Self-Assessment; (3) On-Site Visit; (4) Review and Decision; and (5) Follow-Up.

For further details on the five stages, please refer to Appendix I: *Schedule for the Second Cycle of Institutional Accreditation (2018)*. If any changes are made to the schedule, the Council will provide written notification to all affected institutions.

3. Accreditation Standards and Indicators

Prior to designing accreditation standards for the second cycle of institutional accreditation, the Council held consultations on the practices and mechanisms that major countries employ to guarantee quality in higher education. The aim of these consultations was to ensure that the evaluation and accreditation system for institutions of higher learning in Taiwan was designed to remain updated with international developments.

To improve evaluation, the Council has also adopted the PDCA method throughout the process. Moreover, by combining the evaluation results and philosophy underpinning the first cycle, four main standards have been subsequently established for the second cycle: Governance and Management; Resources and Support Systems; Institutional Effectiveness; and Self-Improvement and Sustainability. For each of these four standards, individual list of indicators have been formulated, and they serve as compulsory components of the accreditation process.

To encourage institutions to develop and demonstrate their distinct features, an institution may choose to be evaluated using one of the following options or may choose both options based on

respective features or policy needs: (1) Accreditation based on the institution's display of distinct features for each indicator and (2) Accreditation based on indicators established by the institution to showcase its features in addition to the existing standards. The standards and corresponding indicators are listed below. For an in-depth explanation, please refer to Appendix II.

Standard I : Governance and Management

- 1.1 Development plans and distinct features correspond with the institution's self-positioning
- 1.2 Practices and mechanisms to ensure quality governance
- 1.3 Collaborative relations with partners in academia, government, and industry, which are relevant to the institution's self-positioning
- 1.4 Guarantee of equal access to educational opportunities; the institution demonstrates social responsibility

Standard II : Resources and Support Systems

- 2.1 Resource plans to support development
- 2.2 Practices and mechanisms to support the development of academic careers and improve the teaching capability of the faculty
- 2.3 Practices and mechanisms to achieve student learning outcomes

Standard III: Institutional Effectiveness

- 3-1 Institutional effectiveness demonstrated based on the institution's self-positioning
- 3-2 Student learning outcomes achieved
- 3-3 Public accessibility of information to stakeholders

Standard IV: Self-Improvement and Sustainability

- 4-1 Practices based on internal and external evaluation results for discussion, improvement, and implementation
- 4-2 Practices and plans for innovation and sustainable development
- 4-3 Practices to protect the rights and interests of the faculty, staff, and students
- 4-4 Practices and mechanisms to ensure the institution's financial sustainability

To simplify the document collection process and avoid unnecessary duplication of work, the Council has provided a chart in Appendix III that outlines the standards and indicators of the second cycle of institutional accreditation that overlap with relevant standards from the Teaching Excellence Project and the Aim for the Top University Project. Institutions may simply add the information they previously prepared for those two projects to their self-assessment.

4. Institutional Self-Assessments

Self-assessment is the key to the entire accreditation process, with the aim of evaluation being accreditation and improvement of institutional quality. Thus, institutions should establish self-assessment mechanisms that are based on the accreditation standards and reflect their self-positioning and development plans. These mechanisms will then be used for self-assessment and for creating the ensuing self-assessment report (SAR), which will serve as the subsequent basis for evaluation during the on-site visit. Using SAR for the accreditation year of 2018 as an example, an institution's development plan should cover 2018 and 2019 (or 2017 and 2018). For more details regarding the self-assessment process, please refer to Appendix IV: *Self-Assessment Reference Guide*.

An institution should familiarize itself with the four standards and evidence required for self-assessment. Based on its self-positioning and

development needs, the institution should employ either quantitative or qualitative data to illustrate its current situation with respect to each of the four standards. Using this as a foundational starting point, the institution should then analyze its strengths and weaknesses, confirm its distinct features, guarantee quality, and propose recommendations for future improvement. Institutions may refer to Appendix V for further instructions on compiling and preparing this information.

Scope of the self-assessment report: An institution scheduled to be evaluated in the first half of the year should include data on its actual performance over five semesters, spanning from the beginning of the 2015–2016 academic year to the first semester of the 2017–2018 academic year. An institution to be evaluated in the second half of the year should include data on its actual performance over six semesters, spanning from the 2015–2016 academic year to the end of the 2017–2018 academic year.

Scope of basic information required for evaluation: Institutions scheduled for evaluation in the first half of the year should include basic information from the 2014–2015 academic year to the first semester of the 2017–2018 academic year; institutions scheduled for evaluation in the second half of the year should include basic information from the 2014–2015 academic year to the end of the 2017–2018 academic year. In addition to the basic financial forms, the Council will also export data from the Higher Education Database established by National Yunlin University of Science and Technology (hereinafter “NYUST Database”). Data will be organized and then provided to the reviewers conducting the on-site visit. Because information from military and police academies is not contained in the NYUST Database, those institutions will submit the basic information forms along with their report to the Council. Please see Appendix VI: *Basic Information Forms*.

After an institution has completed self-assessment, it must then submit a SAR. This will serve as the primary basis for the on-site visit. This report must be uploaded to the Council website and must adhere

to the specified format.

- The institution must also submit hard copies of the report to the Council by the deadline specified in the regulations.
- The SAR must not exceed 120 pages (military and police academies must also submit the other basic information forms).
- The report must be written in 14-point standard font.
- There are no page restrictions for supporting documents that have been produced in CD format.
- An institution with fewer than 6,000 students must submit 16 hard copies of the SAR.
- An institution with more than 6,000 students must submit 20 hard copies of the SAR.
- If an institution also has a satellite campus to be evaluated, it must provide additional 4 copies of the SAR.
- An institution to be evaluated in the first half of the year must submit the SARs before February 15, 2017
- An institution to be evaluated in the second half of the year must submit the SARs and CD of supporting documents by August 31, 2017 (military and police academies must also submit the basic information forms).
- The package containing the reports must be postmarked with the date.

After receiving the reports, the Council will then forward them to the reviewers.

5. On-Site Visits

The most appropriate way to ensure that an institution's self-assessment is credible and objective is for a team of peer professionals to visit and perform an on-site evaluation. The on-site visit panel will confirm the validity of the self-assessment process and provide recommendations regarding the institution's future development.

When selecting members of the on-site visit panel, priority will

be given to professors with administrative experience in an institution of higher education and academia and experts who specialize in academic evaluations. In addition, the panel should comprise professional representatives that have been recommended by the Council, Board of Trustees, and individual academic institutions. To ensure a high level of professionalism, anyone appointed to the on-site visit panel must attend a training seminar hosted by the Council.

To ensure that all reviewers on the panel are objective and impartial, the Council will send the list of recommended reviewers to the institution before the on-site visit. The institution may object to anyone in the list (with cause) and may apply for the removal of the reviewer. When applying for removal, the institution must submit evidence regarding the reviewer's professional qualifications or other relevant issues.

To ensure that the entire accreditation process remains objective and impartial, everyone who agrees to serve as a reviewer on the on-site visit panel must sign the *Reviewer Ethics and Recusal Form*.

An on-site visit to an institution generally takes place over 2 days (if the institution also has a satellite campus to be evaluated, more reviewers may be assigned). The size of the on-site visit panel will be determined based on the size of the institution's student population.

- If the institution has fewer than 300 students, the on-site visit panel will be composed of 4–7 reviewers.
- If the institution has 301–5,999 students, the panel will be composed of 10–12 reviewers.
- If the institution has 6,000 students or more, the panel will be composed of 14–16 reviewers.
- The size of the student population will be calculated based on MOE statistics for the previous academic year.
- If the institution has a satellite campus that has more than 500 but fewer than 6,000 students enrolled in the day division, an

additional 3 reviewers will be added to the on-site visit panel.

- If the number of students enrolled in the day division exceeds 6,000 students, 4 extra reviewers will be assigned to the panel to conduct a 1-day on-site visit.

During the on-site visit, the panel will collect information to evaluate the institution's performance in the four accreditation standards. The primary methods of collecting information include observing facilities, holding meetings, reviewing data, and conducting surveys. Reviewers will also collect information through interactions with deans, directors, professors, administrative staff, and students. If an institution has a student population of 301 students or more, the on-site visit will take place over 2 days; if the student population is 300 or less, the on-site visit will take place over 1.5 days. Please see Appendix VII: *Schedule for On-Site Visit* for relevant details and information.

6. Accreditation Procedures

The principal aim of the second cycle of institutional accreditation is to accredit institutions and assist them to improve their quality. Based on findings from the visit, the on-site visit panel will propose recommendations in its on-site visit report. The report will include the institution's self-assessment as well as documents reviewed at the institution. After the report is approved by the Accreditation Recognition Committee and is reported to the Board of Trustees, it will be submitted to the MOE for record-keeping. The accreditation results will then be officially released to the public and posted on the Council's website. The on-site visit report, institution's Application to Provide Feedback on the on-site visit report, and the reviewers' Feedback Comments Form will also be made available to the public.

An institution will be granted one of three possible results: accredited; conditionally accredited; or denied. The on-site visit panel will make recommendations for each accreditation standard based on

the institution's performance in that respective standard. When determining their recommendations, the panel will also refer to the institution's self-assessment and the documents studied during the on-site visit.

Accreditation results are determined over a two-stage process: (1) the on-site visit and (2) the decision of the Accreditation Recognition Committee. The results are then reported at a meeting of the Board of Trustees. Following this meeting, the Accreditation Result Report is submitted to the MOE for reference in developing policies. Please see the flowchart below for accreditation procedures.

Chart 1: Accreditation Procedures



*The MOE will forward accreditation results for military and police academies to the Department of Internal Affairs and the Department of Defense.

7. Accreditation Results

Institutions are evaluated based on each accreditation standard, with one of three possible results: accredited; conditionally accredited; or denied. Please see Table 1 below for details on the period of validity and how to respond to each result.

Table 1: Validity and Handling of Accreditation Results

Result	Response	Notes
Accredited	The institution will submit its self-improvement plan and progress report to the Council.	<ul style="list-style-type: none"> • Accreditation is valid for 6 years. • Institutions are provided 1 year to complete the response, beginning on the day on which accreditation results are announced. • After an institution has passed the follow-up or re-accreditation, its accreditation will be valid for whatever time remains of the 6-year period that began after initial accreditation results were announced.
Conditionally Accredited	The institution will submit its self-improvement plan and progress report to the Council and will then undergo follow-up evaluation. Follow-up evaluation will only concern the problem areas identified in the on-site visit report.	
Denied	The institution will submit its self-improvement plan and progress report to the Council and then undergo re-accreditation. The institution will complete a new SAR before undergoing the accreditation process again	

Appendix I: Schedule for the Second Cycle of Institutional Accreditation (2018)

Stage	Half of Year	When	What
Preliminary Stage	–	April 2017	Implementation plan for the second cycle of institutional accreditation is announced
Self-Assessment Stage	First Half	Before January 2018	Institutions to be evaluated in the first half of the year conduct self-assessments
		February 15, 2018	Institutions upload their SARs and submit hard copies
		January 2018	Institutions apply to request for the removal of reviewers
		January–March 2018	Reviewers receive training
	Second Half	Before July 2018	Institutions to be evaluated in the second half of the year conduct self-assessments
		August 31, 2018	Institutions upload their SARs and submit hard copies
		August 2018	Institutions apply to request for the removal of reviewers
		August–October 2018	Reviewers receive training
On-Site Visit	First Half	March–May 2018	Reviewers conduct on-site visits
		August 2018	The on-site visit report is sent to institutions
	Second Half	October–December 2018	Reviewers conduct on-site visits
		February 2019	The on-site visit report is sent to institutions
Accreditation Results Stage	First Half	September 2018	Institutions are given the right to provide feedback based on the report according to their needs

Stage	Half of Year	When	What
		October 2018	The on-site visit panel completes the response to feedback
		November 2018	The Accreditation Recognition Committee convenes to make a decision on accreditation
		December 2018	A report is submitted to the Board of Trustees regarding the results of accreditation
		December 2018	The report is finalized and made available to the public
	Second Half	March 2019	Institutions are given the right to provide feedback based on the report according to their needs
		April 2019	The on-site visit panel completes responses to feedback
		May 2019	The Accreditation Recognition Committee convenes to make a decision on accreditation
		June 2019	A report is submitted to the Board of Trustees on the results of accreditation
		June 2019	The report is finalized and made available to the public
Follow-Up Stage	First Half	January–December 2019	Institutions complete plans for self-improvement and perform self-assessment
		February 15, 2020	Institutions upload and submit hard copies of their self-improvement plan and progress report/SAR
		March–May 2020	Institutions that were denied accreditation or were granted conditional accreditation will receive follow-up evaluation or re-accreditation

Stage	Half of Year	When	What
Follow-Up Stage	First Half	August 2020	The follow-up evaluation report or re-accreditation report is sent to institutions
		September 2020	Institutions are given the right to provide feedback based on the report according to their needs
		October 2020	The on-site visit panel completes responses to feedback
		November 2020	The Accreditation Recognition Committee convenes to make a decision on accreditation
		December 2020	The Board of Trustees convenes to finalize reports for those institutions denied accreditation or granted conditional accreditation
		December 2020	Institutions denied accreditation or granted conditional accreditation are announced
	Second Half	July 2018–August 2019	Institutions complete plans for self-improvement and perform self-assessment
		August 2019	Institutions upload and submit hard copies of their self-improvement plan and progress report/SAR
		October–December 2019	Institutions that were denied accreditation or were granted conditional accreditation will receive follow-up evaluation or re-accreditation
		February 2020	The follow-up evaluation report or re-accreditation report is sent to institutions

Stage	Half of Year	When	What
		March 2020	Institutions are given the right to provide feedback based on the report according to their needs
Follow-Up Stage	Second Half	April 2020	The on-site visit panel completes responses to feedback
		May 2020	The Accreditation Recognition Committee convenes to make a decision on accreditation
		June 2020	The Board of Trustees convenes to finalize reports for those institutions denied accreditation or granted conditional accreditation
		June 2020	Institutions denied accreditation or granted conditional accreditation are announced

Note: The Council will inform institutions in writing if any changes are made to the schedule. Please refer to public announcements, which would be accurate.

Appendix II: Evaluation Categories and Standards

In the second cycle of institutional accreditation, there are four major standards. Each standard comprises standards that function as required components of the evaluation. To encourage institutions to develop and demonstrate their distinct features, an institution may choose to be evaluated using one of the following options or may choose to be evaluated using both options based on their features or policy needs: (1) Accreditation based on the institution's display of distinct features for each indicator and (2) Accreditation based on indicators established by the institution to demonstrate its features in addition to the existing standards.

Standard I : Governance and Management

An institution establishes development plans in accordance with its self-positioning and establishes an operational framework and organization to handle administrative decision-making. The institution allocates resources appropriately (at the college level, department level, center level, etc.) and ensures quality governance through mechanisms and management practices that are suitable and effective. Moreover, the institution forms collaborative relationships with partners in academia, government, and industry, which are suitable to its self-positioning and academic purposes. These relationships enable the institution to meet its educational objectives and fulfill its social responsibility. The institution provides equal access to educational opportunities for all students, including appropriate support to disadvantaged students, to guarantee learning outcomes and meet the goal of becoming a high-quality academic institution.

Standard I : Governance and Management

1-1 Development plans and distinct features that correspond with the institution's self-positioning

1-2 Practices and mechanisms to ensure quality governance

1-3 Collaborative relations with partners in academia,

government, and industry, which are relevant to the institution's self-positioning

1-4 Guarantee of equal access to educational opportunities; institution demonstrates social responsibility

Standard II : Resources and Support Systems

Based on its development plans and distinct features, the institution creates appropriate plans and employs appropriate institutional resources (financial, human, and material) to ensure that programs at each level have sufficient resources to meet the demands of the institution's self-positioning and fulfill its educational goals.

To ensure that faculty members are provided opportunities to develop their academic careers and enhance their teaching capability, the institution has created mechanisms to assist, evaluate, and provide incentives for exceptional teaching and academic performance; to boost teaching activities; and to support professional development.

To ensure the student learning outcomes are achieved, the institution creates, implements, and promotes counseling systems and provides comprehensive assistance to students in curricular and co curricular activities. Furthermore, an institution establishes mechanisms to manage admissions and enrollment in order to track and record the abilities, unique qualities, and backgrounds of students. This enables the institution to support students by assessing progress, development, and learning outcomes.

Standard II : Resources and Support Systems

2-1 Resource plans implemented to support development plans

2-2 Practices and mechanisms to ensure the development of academic careers and pedagogical capacity of faculty

2-3 Practices and mechanisms to achieve student learning outcomes

Standard III: Institutional Effectiveness

Institutional effectiveness involves the following areas: governance and management, faculty teaching and academic activity, learning outcomes of students, and publicly accessible information. The institution fulfills its commitments and can accurately predict and meet targets for educational effectiveness.

Standard III: Institutional Effectiveness

3-1 Institutional effectiveness based on the institution's self-positioning

3-2 Learning outcomes of students at the institution

3-3 Effectiveness in making information publicly available

Standard IV: Self-Improvement and Sustainability

The institution establishes procedures to conduct internal evaluations, proactively reviews the administrative and teaching effectiveness of each program, and promotes practices for continuous improvements based on its findings in order to raise educational quality and meet educational goals. In addition, the institution utilizes evaluation results obtained at both institution and program levels as a measure for improving educational effectiveness. In addition, as the institution faces the serious challenges posed by the current higher education environment, it is able to devise innovative practices and policies to ensure sustainability. With stable financial development serving as a foundation, the institution establishes mechanisms to protect the rights and interests of the faculty, staff, and students so that all may contribute to the institution's prosperous development.

Standard IV: Self-Improvement and Sustainability

4-1 Practices to use, discuss, and improve the institution based on the results of internal and external evaluations

4-2 Practices and plans to innovate and sustainably develop

4-3 Practices to protect the rights and interests of the faculty, staff, and students

4-4 Practices and mechanisms to ensure financial sustainability of the institution

Appendix III: Overlapping Standards between the Second Cycle of Institutional Accreditation, the Program for Promoting Teaching Excellence, and the Aim for the Top University Project

Standard I: Governance and Management

Second Cycle of Institutional Accreditation Indicators	Teaching Excellence Initiative	Research Excellence Initiative (Top University Project)
1-1 Development plans and distinct features corresponding with the institution's self-positioning		
1-2 Practices and mechanisms to ensure quality governance		The institution has established reasonable overall and annual goals Other standards are decided by the Review Committee
1-3 Collaborative relations with partners in academia, government, and industry, which are relevant to the institution's self-positioning	The institution has established a system to encourage teaching and research in line with business and social trends	Outputs and robust policies to support business and social development
1-4 Guarantee of equal access to educational opportunities; institution demonstrates social responsibility		

Standard II : Resources and Support Systems

Second Cycle of Institutional Accreditation Indicators	Program for Promoting Teaching Excellence	Aim for the Top University Project
2-1 Resource plans established to support development plans		Robust policies to integrate internal and external resources
2-2 Practices and mechanisms to ensure the development of academic careers and the pedagogical capacity of the faculty	The institution has established a system to help the institution develop its distinct features by enhancing teaching methods, developing certified digital teaching materials, and taking definite measures to improve learning outcomes. Measures include the following: a flexible pay system, guidance for new instructors, formation of a teaching community, reward program for outstanding teaching performance, and mechanisms to effectively follow-up and support improvements for curricula or faculty members that did not perform adequately in the evaluation	Major research achievements and favorable academic standing both domestically and globally. Specific policies that are effective in recruiting and developing outstanding talent (including researchers and students from home and abroad). Robust policies to improve learning outcomes
2-3 Practices and mechanisms to achieve student learning outcomes	The institution holds routine discussions and creates reports to improve curricula in line with its distinct features and development plans.	

Second Cycle of Institutional Accreditation Indicators	Program for Promoting Teaching Excellence	Aim for the Top University Project
	<p>The institution has created robust mechanisms to guide students through course registration and course planning (e.g., E-portfolios and curriculum mapping).</p> <p>The institution implements definite measures to ensure that curricula and teaching content correlate with practical applications and business and social trends.</p> <p>The institution has established an administrative body to provide career counseling, help students obtain internship positions within the industry, and establish institution-wide mechanisms to guide students during their internships. The institution has increased the number of students earning professional qualifications and passing language proficiency tests, and the institution implements other definite measures to promote student competitiveness when seeking employment</p>	

Standard III: Institutional Effectiveness

Second Cycle of Institutional Accreditation Indicators	Program for Promoting Teaching Excellence	Aim for the Top University Project
3-1 Institutional effectiveness based on the institution's self-positioning		<p>Number of faculty members and research fellows who hold the position of assistant professor (or above) or a comparable level, number of instructors and research fellows who have won major international or domestic awards for excellence in teaching and research, number of research fellows and members of international academic associations from home and abroad.</p> <p>Theses published in major domestic and international periodicals, number of citations, high citation index of theses, number of academic monographs.</p> <p>Numbers of international students pursuing an academic degree, international exchange students, domestic students on exchange programs abroad, and foreign instructors teaching specialized curricula.</p> <p>Funding for academic and industrial collaboration, income derived from intellectual property rights, patents and number of new inventions, and authorized</p>

Second Cycle of Institutional Accreditation Indicators	Program for Promoting Teaching Excellence	Aim for the Top University Project
		rights for patents and new products
3-2 Learning outcomes of students at the institution	<p>The institution has established systems to increase student employability.</p> <p>The institution has established systems to support integrated learning and career counseling. The institution has created an atmosphere that encourages active learning, assigns homework, and assesses learning achievements and has created mechanisms to provide academic warnings, guidance, and follow-up support to underperforming students. The institution has established E-portfolios for students, career development accounts, and a database for student learning performance, and the institution has taken other definite measures to help students enhance their learning outcomes.</p> <p>The institution has established graduation requirements and standards to effectively measure</p>	

Second Cycle of Institutional Accreditation Indicators	Program for Promoting Teaching Excellence	Aim for the Top University Project
	<p>learning outcomes.</p> <p>The institution has enhanced the rationale underpinning the curriculum framework as well as curriculum designs and planning in order to meet student demand for specialization and cross-disciplinary learning. The institution routinely discusses current cross-disciplinary programs and has a clear process for realizing these programs.</p>	
3-3 Effectiveness in making information publicly available		

Standard IV: Self-Improvement and Sustainability

Second Cycle of Institutional Accreditation	Program for Promoting Teaching Excellence	Aim for the Top University Project
4-1 Practices to use, discuss, and improve the institution based on the results of internal and external evaluations	The institution has established mechanisms to track the long-term performance of graduates and monitor their employment situation (this includes the employment rate, employer satisfaction, satisfaction of graduates, and feedback from employers and graduates). The institution modifies educational goals and improves curriculum planning and teaching methods based on the received feedback.	
4-2 Practices and plans to innovate and sustainably develop		
4-3 Practices to protect the rights and interests of the faculty, staff, and students		
4-4 Practices and mechanisms to ensure financial sustainability of the institution		Budgeting rationale

Note: Each standard has its basis of design. This chart merely serves to note certain similarities; standards do not necessarily overlap completely.

Appendix IV: Self-Assessment Reference Guide

An institution's self-assessment is the key to the accreditation process. To assist institutions to conduct self-assessments successfully, the Council has surveyed and analyzed the practices employed by developed nations with respect to institutional self-assessments, and the Council has implemented these findings in the program design. The program stages include the following: Preparatory Stage, Organization, Execution, and Write-Up and Discussion of Results. Each institution may adjust these four foundational stages based on its unique situation and practical needs and then accordingly conduct an adjusted self-assessment while maintaining the core elements.

1. Preparatory Stage

This is the preliminary phase of self-assessment, and if completed successfully, this stage will ensure that all other stages run smoothly. The opposite is also true; negligence in this stage will cause complications in the subsequent stages. Please see details below for directions that can be followed for ensuring the smooth performance of the stages:

(1) Establish a Self-Assessment Committee

Forming a Self-Assessment Committee is the first step in the self-assessment process. The committee's goals are to scrutinize the institution before making recommendations on how self-assessment should be designed and what steps should be included. The committee's most important function is to ensure that an overall design has been created before self-assessment begins. In addition, the committee will assume the function of the Self-Assessment Steering Committee as self-assessment progresses.

(2) Secure support from the top management

Certain preconditions must be ensured before an institution undertakes self-assessment. If these preconditions are lacking,

the Self-Assessment Committee must ensure that they are generated. One of these preconditions is called “support from the top.” Once administrative leaders at the institution have a clear understanding of the assessment process and have provided their full support, the committee must request that administrators make available all relevant information.

(3) Ensure an appropriate level of professional expertise

All major participants in the self-assessment process must possess an appropriate level of professional expertise. Institutions may accomplish this by consulting with and visiting other institutions that have similar designs or experience in order to ensure their reviewers possess the necessary skills. Another option is to hold a training seminar to ensure that reviewers are properly equipped to fulfill their duties.

(4) Commit appropriate resources

Self-assessments can only be conducted effectively if an institution commits the necessary resources.

(5) Develop internal motivation

Everyone participating in the self-assessment process should be fully aware that the process results from practical needs. When the Self-Assessment Committee holds discussions with key administrative figures, the committee must secure their commitment to institutional improvement. Similarly, such commitment must be fostered among all participants; everyone at the institution must be made aware of the reasons underpinning self-assessment and what the institution’s participation means.

2. Organization Stage

Following the initial stage of Preparation and Design, personnel required for self-assessment must be arranged. The following work must be prepared or completed at this stage:

(1) Establish a Self-Assessment Steering Committee

The Self-Assessment Steering Committee must be established during this stage. The number of members on the committee should be reasonable to avoid complicating coordination and operations. The suitable number of committee members is between three and seven, although individual institutions can make adjustments based on their size. Most members should have served on the Self-Assessment Committee.

The Steering Committee plays a critical role and serves as centralizer throughout the self-assessment process. This committee must complete the following tasks during this stage: (1) select the leaders for each task force; (2) assemble the task forces; (3) create a chart designating the duties of each task force; (4) provide or arrange necessary training for the task forces (this may include training in leadership, problem-solving, or communication skills); (5) confirm the resources required by each task force to execute their portion of the self-assessment process (this may include funding, administrative and human resources, access to records, and assistance in interpreting data); and (6) help coordinate communication between the task forces, avoid overlap, and propose plans.

(2) Select reviewers and conduct training courses

Task forces must be established to handle specific standards of the assessment process; this will ensure that the institution can effectively meet its objectives. To ensure that task forces operate effectively, their leaders must receive training in advance to ensure they possess the required leadership and planning skills.

(3) Establish communication and coordination mechanisms

The coordinator's work is an extremely important administrative component of the self-assessment process. The coordinator not only directs members of the team as they perform their required tasks but also provides continual

suggestions throughout the assessment process. Generally, the Chair of the Steering Committee serves as the coordinator for the entire self-assessment process.

In addition to being the coordinator, the Steering Committee must also establish mechanisms to facilitate communication between the various task forces in order to ensure that everyone involved in the self-assessment process is aware of the activities and needs of other team members. There are three major communication mechanisms: (1) faculty and staff meetings at which the Steering Committee and task forces may present joint reports, (2) email or other digital communications to share the minutes of meetings for all personnel involved in the assessment, and (3) routine updates reported in the institution's regular newsletter.

(4) Developing various methods for data collection

Different methods must be adopted to collect data during the self-assessment process. Examples include, but are not limited to, surveys, meetings, assessments, document analysis, telephone interviews, and on-site visits.

3. Execution

The execution stage is coordinated and supported by the Steering Committee. Each task force will execute its assigned duties, which are aimed at institutional improvement, problem-solving, and other goals of self-assessment. Such duties include the following:

(1) Main objectives

The structure of a task force and its assigned duties may be adjusted based on the size of the institution. Task forces assess the strengths, weaknesses, problems, and overall situation with respect to the assigned self-assessment standard and then provide recommendations. The primary objectives of the task force vary slightly based on the unique conditions of the individual institution; the task performed generally focus on the

following: objectives (missions or goals), students or clients served by the institution, the faculty and staff (including experts) and the contributions they make, the curriculum, teaching processes, student and client services, institutional or academic services, academic research, administrative services, organization and management, finances, public services, the fulfillment of objectives, and the results thereby produced. An institution may refer to self-assessment standards and indicators, identify key focus areas based on its practical situation and needs, and then establish a special task force to conduct a thorough assessment.

(2) Operating procedures

To facilitate the smooth completion of the final SAR, task forces are typically headed by members of the Steering Committee. The members of a task force are selected from the faculty, staff, and students. How a task force proceeds in its operations is determined by its specific objectives. A task force's work includes the following: (1) establishing the accreditation standard, (2) proposing a plan, (3) collecting documents and related data, (4) analyzing the documents and data, (5) making recommendations, and (6) writing an assessment for the particular standard.

(3) Collecting documents and soliciting opinions

All data collected for the self-assessment process can be classified into two standards: facts and opinions. Facts typically take the form of files, records, and written documents, whereas opinions are collected through meetings, interviews, surveys, and similar methods. Data may cover different levels, such as input, process (procedures and services), or results. Most opinions are provided by the faculty and administrative staff; it is also important to solicit the opinions of students and those outside the institution (alumni, employers, government workers, and other stakeholders). A report will be far more authoritative

and convincing if facts and opinions can be organized as quantitative data.

4. Write-Up and Discussion of Results

Before finalizing the SAR, task forces may discuss the results of self-assessment at an information session held for the faculty, staff, and students. Task forces may also assist the Steering Committee to host a final workshop on the SAR. During this stage, the Steering Committee may request that a particular task force should partially revise its portion of the report or conduct further evaluations, discussions, or include additional data. Finally, the Steering Committee collects the contributions of each task force and combines them into one final SAR for the entire institution.

The SAR may take the form of quantitative data or qualitative data. The institution must provide an overall description of its current situation based on the self-assessment standards. A sample cover and general outline are provided below:

Sample Cover

Second Cycle of Institutional Accreditation
Second Half of 2018

(Institution Name)
Self-Assessment Report

Contact Person:

Contact Number:

Email:

Head Administrator (Seal):

Sample Self-Assessment Report

Abstract

Introduction

- * Institution's history and self-positioning

- * Process of self-assessment

- * Self-assessment results (each standard must include a description of the current situation, distinct features, problems and difficulties, strategies for improvement, and a summary)

Standard I : Governance and Management

(1) Current situation

(2) Distinct features

(3) Problems and difficulties

(4) Strategies for improvement

(5) Summary

Standard II

...

Standard III

...

Standard IV

...

Other information

Appendix V: Breakdown of Standards

Standard I : Governance and Management

Indicator	Descriptor
1-1 Development plans and distinct features correspond with the institution's self-positioning	1. A reasonable link exists between the institution's self-positioning, development plans, and areas of focus
1-2 Practices and mechanisms to ensure quality governance	1. The institution has established an appropriate administrative decision-making body and operational framework 2. The institution allocates resources appropriately based on its development plans (at the college level, department level, center level, etc.) 3. Appropriate practices and mechanisms have been implemented to assess and evaluate institutional governance
1-3 Collaborative relations with partners in academia, government, and industry, which are relevant to the institution's self-positioning	1. The institution has established collaborative relationships with partners in academia, government, and industry, which are appropriate to its self-positioning
1-4 Guarantee of equal access to educational opportunities; institution demonstrates social responsibility	1. The institution provides admission opportunities to disadvantaged students 2. The institution's practices reflect its social responsibility

Standard II : Resources and Support Systems

Indicator	Descriptor
2-1 Resource plans established to support development plans	1. The institution appropriately employs and utilizes institutional resources (financial, human, and material) based on its development plans and distinct features

Indicator	Descriptor
2-2 Practices and mechanisms to ensure the development of academic careers and the pedagogical capacity of the faculty	<ol style="list-style-type: none"> 1. The institution develops and implements systems to support the teaching efforts of the faculty 2. The institution develops and implements systems to support the academic careers of the faculty (including mechanisms for diversified forms of promotion)
2-3 Practices and mechanisms to achieve student learning outcomes	<ol style="list-style-type: none"> 1. The institution establishes mechanisms to manage admission and enrollment, and it is able to support and assess students by assessing progress, development, and learning outcomes 2. The institution establishes systems to counsel and provide comprehensive assistance to students both in curricular and co curricular activities

Standard III: Institutional Effectiveness

Indicator	Descriptor
3-1 Institutional effectiveness based on the institution's self-positioning	<ol style="list-style-type: none"> 1. The institution demonstrates effective governance and management that aligns with its self-positioning 2. The institution demonstrates effective teaching and research based on its self-positioning
3-2 Learning outcomes of students at the institution	<ol style="list-style-type: none"> 1. The institution implements mechanisms to guarantee learning outcomes that promote students' performance and academic achievement
3-3 Effectiveness in making information publicly available	<ol style="list-style-type: none"> 1. The institution provides information routinely or as required by stakeholders 2. The institution writes reports on institutional business, promotes its effectiveness in management and operations, and publishes that information.

Standard IV: Self-Improvement and Sustainability

Indicator	Descriptor
4-1 Practices to use, discuss, and improve based on the results of internal and external evaluations	<ol style="list-style-type: none"> 1. The institution implements quality assurance mechanisms that align with its distinct features. 2. The institution discusses and utilizes the results of the previous accreditation cycle to create and implement an action plan for improvement 3. The institution discusses and utilizes the results of the previous cycle of program accreditation to create and implement an action plan for improvement (this includes institutions that performed self-assessments and those that did not)
4-2 Practices and plans to innovate and sustainably develop	<ol style="list-style-type: none"> 1. The institution creates plans and practices to encourage innovation 2. The institution creates plans and practices to ensure sustainability
4-3 Practices to protect the rights and interests of the faculty, staff, and students	<ol style="list-style-type: none"> 1. The institution respects the professional autonomy and working rights of the faculty in accordance with the law 2. The institution guarantees the legal rights and interests of students in learning and working 3. The institution successfully implements a system to provide emergency financial aid to the faculty, staff, and students
4-4 Practices and mechanisms to ensure financial sustainability of the institution	<ol style="list-style-type: none"> 1. The institution has established comprehensive systems and practices for the management and use of finances 2. The institution has established legal mechanisms and practices to ensure that finances are used toward fulfilling the institution's development needs 3. The institution reviews its financial situation routinely and implemented mechanisms and practices to respond to the related needs.

Appendix VI: Basic Information Forms

To simplify the document collection process, institutions need only prepare basic financial forms (see below) that match the format of the forms in the NYUST Higher Education Database (public institutions: Fin. 1, Fin. 2, Fin. 3, Fin. 4, and Fin. 5; private institutions: Fin. 6, Fin. 7, Fin. 8, Fin. 9, Fin. 10, Fin. 11, Fin. 12, and Fin. 13), and institutions can then submit these forms along with their self-assessment report. Other forms will be exported from the database by the Council. However, because police and military academies do not store information in the database, they must complete the forms provided to them by the Council. Please see the list of required forms below:

1. Public and Private Institutions

(1) Forms provided by institutions:

Fin. 1	National University Endowment Fund-Budget and Financial Statement of Revenues and Expenditures
Fin. 2	National University Endowment Fund-Statement of Surplus Distribution and Deficit Compensation
Fin. 3	National University Endowment Fund-Cash Flow Budget
Fin. 4	National University Endowment-Balance Sheet
Fin. 5	National University Endowment Fund-Cost Breakdown
Fin. 6	Private Institutions-Forecasted Excess/Deficiency of Revenue
Fin. 7	Private Institutions-Fixed and Intangible Assets
Fin. 8	Private Institutions-Revenues and Expenditures
Fin. 9	Private Institutions-Income Chart
Fin. 10	Private Institutions-Expenditure Chart
Fin. 11	Private Institutions-Cash Flow Statement
Fin. 12	Private Institutions-Excess/Deficiency of Revenue
Fin. 13	Private Institutions-Balance Sheet

(2)Forms exported from the NYUST Higher Education Database

Stud. 1	Currently Enrolled Regular Students
Stud. 2	Breakdown of Enrollment
Stud. 3	Aboriginal Students
Stud. 4	Overseas Chinese Students and Students from Hong Kong, Macau, and Mainland China
Stud. 5	International Exchange Students
Stud. 6	Students in Dual-Degree Programs
Stud. 8	Domestic Students on Exchange Programs Abroad
Stud. 9	Students Enrolled in Minors, Double Majors, and Credit Programs and in Courses at Another Institution
Stud. 12	Students on Leave of Absence
Stud. 13	Students Who Have Withdrawn from Studies
Stud. 17	Students Who Have Passed Civil Service Examinations/Earned Professional Qualifications
Stud. 18	Students Who Have Passed Foreign Language Proficiency Tests
Stud. 19	Students Who Have Attended Competitions or Published Articles
Fac. 1-1	Full- and Part-Time Instructors-Academic Ranks
Fac. 1-2	Full- and Part-Time Instructors-Categories
Fac. 2	Full-Time Instructor Evaluations
Admin. 1	Staff and Technicians
Admin. 3	Student Counselors/Advisers
Admin. 4	Details of Counseling
Admin. 5	Full-Time and Postdoctoral Research Fellows
Res. 2	Faculty Members Who Have Won Academic Awards or Competitions
Res. 4	Funding for Academic Research Projects
Res. 5	Institutional Funding for Research and Further Education of Full-Time Instructors

Res. 6	Institutional Participation in Activities for International Academic Exchange
Res. 7	International and Cross-Strait Conferences Hosted by an Institution
Res. 8	International and Cross-Strait Activities for Academic Exchange Hosted by an Institution
Res. 9	Funding for Collaborative Research Projects with the Government and Industry
Res. 10	Collaborative Research Projects with the Government and Industry
Res. 11	Number of Partners Engaged in Collaborative Research Projects
Res. 12	Patents, New Products, and Licensing Rights
Res. 13	Total Income Derived from Intellectual Property Rights
Res. 16	Faculty Articles Published in Academic Periodicals and Scholarly Journals
Res. 17	Faculty Articles Presented at Conferences
Res. 18	Monographs Published by Faculty (including creative works)
Res. 19	Exhibitions Attended by Faculty
Res. 20	Promotion of Innovation and Technology Transfer
Res. 21	New Industries and Start-Ups Created by Faculty and Students
Inst. 2	Campus Area
Inst. 3	Dormitories Owned by the Institution
Inst. 4	Dormitories Rented by the Institution
Inst. 5	Students Living in Dormitories
Inst. 6	Library Collections (Books, Resources, and Current Newspapers and Periodicals)
Inst. 7	Library Services and Interlibrary Cooperation
Inst. 8	Book Purchases/Donated Books

Inst. 9	Tuition Waivers/Deductions/Reductions
Inst. 10-1	Funding for Disadvantaged Students
Inst. 10-2	Other Measures for Disadvantaged Students
Inst. 16	Continuing Education and Noncredit Programs
2. Military and Police Academies	
Stud. 1	Currently Enrolled Regular Students
Stud. 2	Breakdown of Enrollment
Stud. 3	Aboriginal Students
Stud. 5	International Exchange Students
Stud. 6	Students in Dual-Degree Programs
Stud. 8	Domestic Students on Exchange Programs Abroad
Stud. 12	Students on Leave of Absence
Stud. 13	Students Who Have Withdrawn from Studies
Stud. 17	Students Who Have Passed Civil Service Examinations/Earned Professional Qualifications
Stud. 18	Students Who Passed Foreign Language Proficiency Tests
Stud. 19	Students Who Have Attended Competitions or Published Articles
Fac. 1-1	Full- and Part-Time Instructors-Academic Ranks
Fac. 1-2	Full and Part-Time Instructors-Categories
Fac. 2	Full-Time Instructor Evaluations
Admin. 1	Staff and Technicians
Admin. 3	Student Counselors/Advisers
Admin. 4	Details of Counseling
Admin. 5	Full-Time and Postdoctoral Research Fellows
Res. 2	Faculty Members Who Have Won Academic Awards or Competitions
Res. 4	Funding for Academic Research Projects
Res. 5	Institutional Funding for Research and Further Education of Full-Time Instructors

Res. 6	Institutional Participation in Activities for International Academic Exchange
Res. 7	International and Cross-Strait Conferences Hosted by an Institution
Res. 8	International and Cross-Strait Activities for Academic Exchange Hosted by an Institution
Res. 9	Funding for Collaborative Research Projects with the Government and Industry
Res. 10	Collaborative Research Projects with the Government and Industry
Res. 11	Number of Partners Engaged in Collaborative Research Projects
Res. 12	Patents, New Products, and Licensing Rights
Res. 13	Total Income Derived from Intellectual Property Rights
Res. 16	Faculty Articles Published in Academic Periodicals and Scholarly Journals
Res. 17	Faculty Articles Presented at Conferences
Res. 18	Monographs Published by Faculty (including creative works)
Res. 19	Exhibitions Attended by Faculty
Inst. 2	Campus Area
Inst. 3	Dormitories Owned by the Institution
Inst. 5	Students Living in Dormitories
Inst. 6	Library Collections (Books, Resources, and Current Newspapers and Periodicals)
Inst. 7	Library Services and Interlibrary Cooperation
Inst. 8	Book Purchases/Donated Books
Inst. 9	Tuition Waivers/Deductions/Reductions
Fin. 1	Budget and Financial Statement of Revenues and Expenditures
Fin. 2	Statement of Surplus Distribution and Deficit Compensation

Notes: If any changes are made to the required forms, the Council will provide written notification to all institutions being evaluated.

Appendix VII: Schedule for On-Site Visit

Based on the number of students at the institution, an on-site visit will last between 1.5 and 2 days. The Council will convene a meeting with the on-site visit panel 1 day before the on-site visit to discuss preparations. Please see the chart below for the complete schedule. The Council will inform institutions in writing if any changes are made to the schedule and will also publicly announce the changes. Please refer to public announcements, which would be accurate.

1. Task Force A: Responsible for standards I and IV

Task Force B: Responsible for standards II and III

2. Two-Day On-site Visit

(1) Day Before the Visit

Time	Tasks
20:00–21:30 Preparatory meeting	1. The on-site visit panel will hold a preparatory meeting to discuss methods and procedures for the on-site evaluation. 2. The on-site visit panel will discuss the institution's self-assessment report, so that all reviewers share a consensus for the on-site visit.

(2) First Day

Time	Task Force A	Task Force B
08:30–09:00 Reviewers arrive at the institution	1. The Council will arrange for transportation or provide assistance to reviewers in commuting to the institution if needed. 2. The institution will arrange a reception area and provide road directions for reviewers who arrive early. 3. Attendants from the institution will guide reviewers to the briefing room.	
09:00–09:30 Preliminary meeting of reviewers	1. The Council-appointed panel chair will host the meeting. 2. The panel chair will read the code of ethics and memorandum (written directives). 3. Reviewers will confirm the delegation of duties and evaluation	

Time	Task Force A	Task Force B
	<p>procedures for the period of review.</p> <p>4. Reviewers will review the institution's response to the Issues Requiring Clarification Form.</p>	
09:30–10:40 Introductions; address by the president; institution briefing	<p>1. The president of the institution will introduce all staff members participating in the evaluation.</p> <p>2. The panel chair will introduce each reviewer.</p> <p>3. The president will make an address.</p> <p>4. The institution will make a brief report.</p>	
10:40–12:40 Survey	<p>10:40–11:40</p> <p>Discussions with program directors</p> <p>Meeting between the panel chair and president</p> <p>Work to be done</p> <p>1. Reviewers will hold discussions with the heads of programs and administrative divisions.</p> <p>2. The institution will arrange for a suitable location for group discussions.</p>	<p>10:40–11:40</p> <p>Meetings with administrative representatives</p> <p>Work to be done</p> <p>1. Reviewers will meet with administrative representatives.</p> <p>2. The institution will arrange for suitable locations for one-on-one meetings based on the number of reviewers.</p> <p>3. Each reviewer will interview three members of the administrative staff.</p>
	<p>11:40–12:40</p> <p>Discussions with faculty representatives</p> <p>Work to be done</p> <p>1. Reviewers will meet with faculty representatives.</p> <p>2. The institution will arrange for suitable locations for one-on-one meetings based on the number of reviewers.</p> <p>3. Each reviewer will speak with three faculty representatives.</p>	<p>11:40–12:40</p> <p>Document review</p> <p>Work to be done</p> <p>1. Reviewers will review written documents.</p> <p>2. The institution will prepare all written documents in a briefing room in advance.</p>
12:40–14:00 Lunch break	<p>The institution will provide a simple meal and a place for reviewers to eat and rest.</p>	
	<p>14:00–15:40</p> <p>Document review</p> <p>Work to be done</p>	<p>14:00–15:00</p> <p>Meeting with instructors</p> <p>Work to be done</p>

Time	Task Force A	Task Force B
	1. Reviewers will review written documents. 2. The institution will prepare all written documents in a briefing room in advance.	1. Reviewers will meet with faculty representatives. 2. The institution will arrange for suitable locations for one-on-one meetings based on the number of reviewers. 3. Each reviewer will speak with three faculty representatives.
		15:00–16:00 Document review Work to be done 1. Reviewers will review written documents. 2. The institution will prepare all written documents in a briefing room in advance.
	15:40–16:40 Meetings with student representatives Work to be done 1. Reviewers will meet with student representatives. 2. The institution will arrange for suitable locations for one-on-one meetings based on the number of reviewers. 3. Each reviewer will speak with three student representatives.	16:00–16:40 Inspection of facilities (The route taken may be adjusted based on the accreditation standards) Work to be done Personnel from the institution will accompany reviewers as they survey educational facilities.
16:40–16:50 Flexible time	Reviewers will decide how to optimally use this time.	
16:50–17:30 Reviewers will organize their recommendations and submit the Issues Requiring Clarification Form	1. Attendants from the institution will guide reviewers to the briefing room. 2. Reviewers will discuss their findings for the day and organize their recommendations. They will submit the Issues Requiring Clarification Form to the institution for any topic or issue that remains unclear. 3. The administrative assistant from the on-site visit panel will prepare the form.	

Time	Task Force A	Task Force B
17:30 Departure	1. The institution will provide a simple dinner for reviewers. 2. The Council will ask reviewers about their accommodation requirements in advance. Rooms will be booked once the Council has inspected the hotel accommodation and dining facilities.	

(3) Second Day

Time	Task Force A	Task Force B
08:30–09:00 Reviewers return to the institution	Reviewers will either take the transportation arranged by the Council or arrange their own transportation to the venue. This decision should be communicated to relevant Council members to facilitate organization.	
09:00–09:30 Document review	1. Reviewers will review written documents. 2. The institution will prepare all written documents in a briefing room in advance.	
	09:30–10:30 Meeting with administrative representatives Work to be done 1. Reviewers will meet with administrative representatives. 2. The institution will arrange for suitable locations for one-on-one meetings based on the number of reviewers. 3. Each reviewer will speak with three members of the administrative staff.	09:30–10:20 Discussions with program directors Work to be done 1. Reviewers will hold discussions with the heads of programs and administrative divisions. 2. The institution will arrange for a suitable location for group discussions.
		10:20–10:30 Flexible time Work to be done Reviewers will decide how to optimally use this time.
	10:30–11:10 Inspection of facilities (The route taken may be adjusted based on the accreditation standards) Work to be done Personnel from the institution will accompany reviewers as they survey educational facilities.	10:30–11:30 Meeting with student representative Work to be done 1. Reviewers will meet with students. 2. The institution will arrange suitable locations for one-on-one meetings based on the number of reviewers. 3. Each reviewer will speak with three student representatives.
	11:10–11:30 Flexible time Work to be done Reviewers will decide how to optimally use this time.	

Time	Task Force A	Task Force B
11:30–12:30 The institution will respond to the Issues Requiring Clarification Form	The institution will either provide additional documents or respond verbally to the Issues Requiring Clarification Form.	
12:30–14:00 Lunch break	The institution will provide a simple meal and a place for reviewers to eat and rest.	
14:00–14:30 Additional document review	Reviewers will review the additional documents provided in response to the Issues Requiring Clarification Form. If no new documents are provided, reviewers will begin writing up their official report.	
14:30–15:10 Reviewers separate into groups for discussion	Task forces will write up their portion of the on-site visit report, and all reviewers will then confirm the contents of the report.	
15:10–17:00 Discussion and writing of the report	<ol style="list-style-type: none"> 1. The panel chair will convene a meeting to confirm the contents of the on-site visit report. 2. Reviewers will discuss the results of the evaluation and make recommendations for accreditation. 3. The administrative assistant from the on-site visit panel will handle the writing task. 	
After 17:00 Depart institution	<ol style="list-style-type: none"> 1. The panel chair and president of the institution will confirm that the 2-day on-site visit is complete and will sign the On-site Visit Completion Form. 2. The Council will arrange for transportation or provide assistance to reviewers to commute from the institution if needed. 	

3. 1.5 Day On-Site Visit

Time	Work to be done	First Day
0830–09:00	Reviewers arrive at the institution	<ol style="list-style-type: none"> 1. The Council will arrange for transportation or provide assistance to reviewers in commuting to the institution if needed. 2. The institution will arrange a reception area and provide road directions for reviewers who arrive early.

Time	Work to be done	First Day
		3. Attendants from the institution will guide reviewers to the briefing room.
09:00–09:30	Preliminary meeting of reviewers	<ol style="list-style-type: none"> 1. The Council-appointed panel chair will host the meeting. 2. The panel chair will go over the code of ethics and memorandum (written directives). 3. Reviewers will confirm the delegation of duties and evaluation procedures for both days. 4. Reviewers will review the institution's response to the Issues Requiring Clarification Form.
09:30–10:10	Introductions; address by the president; institution briefing	<ol style="list-style-type: none"> 1. The president of the institution will introduce all staff members participating in the evaluation. 2. The panel chair will introduce each reviewer. 3. The president will make an address. 4. The institution will make a brief report.
10:10–11:00	Surveys; meetings with program directors; meeting between panel chair and president of institution	<ol style="list-style-type: none"> 1. Reviewers will hold discussions with the directors of programs and administrative divisions. 2. The institution will arrange for a suitable location for group discussions. 3. Reviewers will conduct surveys.
11:00–11:20	Discussions with faculty representatives	<ol style="list-style-type: none"> 1. Reviewers will meet with faculty representatives. 2. The institution will arrange for suitable locations for one-on-one meetings based on the number of reviewers. 3. Each reviewer will speak with one faculty representative.
11:20–11:40	Discussions with administrative representatives	<ol style="list-style-type: none"> 1. Reviewers will meet with administrative representatives. 2. The institution will arrange for suitable locations for one-on-one meetings based on the number of reviewers. 3. Each reviewer will speak with one administrative representative.
11:40–12:40	Discussions with	1. Reviewers will meet with student

Time	Work to be done	First Day
	student representatives	<p>representatives.</p> <p>2. The institution will arrange for suitable locations for one-on-one meetings based on the number of reviewers.</p> <p>3. If the student population size is 101–300, each reviewer will interview three students; if the student population size is 100 or less, each reviewer will interview two students.</p>
12:40–14:00	Lunch break	The institution will provide a simple meal and a place for reviewers to eat and rest.
14:00–15:00	Inspection of facilities	Personnel from the institution will accompany reviewers as they survey educational facilities.
15:00–16:30	Document review	<p>1. Reviewers will review written documents.</p> <p>2. The institution will prepare all written documents in a briefing room in advance.</p>
16:30–17:30	Reviewers will organize their recommendations and submit the Issues Requiring Clarification Form	<p>1. Attendants from the institution will guide reviewers to the briefing room.</p> <p>2. Reviewers will discuss their findings for the day and organize their recommendations. They will submit the Issues Requiring Clarification Form to the institution to address any unclear issues.</p> <p>3. The administrative assistant from the on-site visit panel will prepare the form.</p>
17:30	End of visit	<p>1. The institution will provide a simple dinner for reviewers.</p> <p>2. The Council will ask reviewers about their accommodation requirements in advance, and the Council will then book rooms for them at a hotel after inspecting the rooms and dining facilities.</p>
Time	Work to be done	Second Day
08:30–09:00	Reviewers return to the institution	Reviewers will either take the transportation arranged by the Council or will arrange for their own transport to the venue. This decision should be communicated to the Council to facilitate organization.

Time	Work to be done	First Day
09:00–09:10	Flexible time	Reviewers will discuss how to optimally use this time.
09:10–10:10	The institution will respond to the Issues Requiring Clarification Form	The institution will either provide additional documents or respond verbally to the Issues Requiring Clarification Form.
10:10–12:30	Discussion and writing of the report	<ol style="list-style-type: none"> 1. The panel chair will convene a meeting to confirm the contents of the evaluation report. 2. Reviewers will discuss the results of the evaluation and make recommendations for accreditation. 3. The administrative assistant from the on-site visit panel will handle the writing task.
12:30	End of visit	<ol style="list-style-type: none"> 1. The panel chair and president of the institution will confirm that the on-site visit is complete and sign the On-site Visit Completion Form. 2. The Council will arrange for transportation or provide assistance to reviewers to commute from the institution if needed.

4. One-day On-site Visit to Satellite Campus

Time	Standards II and III	Work to be done
08:30–09:00	Reviewers arrive at the institution	<ol style="list-style-type: none"> 1. The Council will arrange for transportation or provide assistance to reviewers in commuting to the institution if needed. 2. The institution will arrange a reception area and provide road directions for reviewers who arrive early. 3. Attendants from the institution will guide reviewers to the briefing room.
09:00–09:20	Preliminary meeting of reviewers	<ol style="list-style-type: none"> 1. The Council-appointed panel chair will host the meeting. 2. The panel chair will go over the code of

Time	Standards II and III	Work to be done
		ethics and memorandum (written directives). 3. Reviewers will confirm the delegation of duties and evaluation procedures for both days. 4. Reviewers will review the institution's response to the Issues Requiring Clarification Form.
09:20–10:00	Introductions; address by president; institution briefing	1. The president of the institution will introduce all staff members participating in the evaluation. 2. The panel chair will introduce each reviewer. 3. The president will make an address. 4. The institution will make a brief report.
10:00–10:40	Inspection of facilities (The route taken may be adjusted based on the evaluation categories)	Personnel from the institution will accompany reviewers as they survey educational facilities.
10:40–11:40	Interviews with administrative representatives	1. Reviewers will meet with administrative representatives. 2. The institution will arrange three suitable locations for one-on-one meetings. 3. Each reviewer will speak with three members of the administrative staff.
11:40–12:30	Document review; reviewers organize their recommendations and submit the Issues Requiring Clarification Form	1. Attendants from the institution will guide reviewers to the briefing room. 2. Reviewers will discuss their findings for the day and organize their recommendations. They will submit the Issues Requiring Clarification Form to the institution for any issue or topic that remains unclear. 3. The administrative assistant from the on-site visit panel will prepare the form.
12:30–13:30	Lunch Break	The institution will provide a simple meal

Time	Standards II and III	Work to be done
		and a place for reviewers to eat and rest.
13:30–14:30	Interviews with student representatives	Reviewers will hold individual interviews with student representatives. The institution will arrange three suitable locations for one-on-one meetings. Each reviewer will speak with three student representatives.
14:30–15:30	Interviews with faculty representatives (may include administrators and academic directors)	1. Reviewers will meet with faculty representatives. 2. The institution will arrange three suitable locations for one-on-one meetings. 3. Each reviewer will speak with three faculty representatives.
15:30–16:20	Document review	1. Reviewers will review written documents. 2. The institution will prepare all written documents in a briefing room in advance.
16:20–17:00	The institution will respond to the Issues Requiring Clarification Form	The institution will either provide additional documents or respond verbally to the Issues Requiring Clarification Form.
17:00–18:00	Discussion and writing of the report	1. The panel chair will convene a meeting to confirm the contents of the on-site visit report. 2. The administrative assistant from the on-site visit panel will handle the writing task.
18:00	End of visit	1. The panel chair and president of the institution will confirm that the on-site visit is complete and sign the On-site Visit Completion Form. 2. The Council will arrange for transportation or provide assistance to reviewers to commute from the institution if needed.



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