



## Application Form for Program Accreditation

### Program Details

Institution			
Status of institutional accreditation	<input type="checkbox"/> Full <input type="checkbox"/> Conditional <input type="checkbox"/> In progress		
Date of institutional accreditation:	From ..... To.....		
Program Main Location (and branches, if any):			
College:		Academic Department:	
Program name according to the establishment decision (in Arabic):			
Program Name (English):			
Medium of instruction:	<input type="checkbox"/> Arabic <input type="checkbox"/> English <input type="checkbox"/> Other .....(Specify)		
Request type:	<input type="checkbox"/> New accreditation <input type="checkbox"/> renewal of accreditation		
Program accreditation date "If the accreditation request type is renewal"	From ..... to.....		
Date of establishment/final licensing decision:		Date of first cohort of graduation:	

### Eligibility requirements (for signing the contract):

No	items	Availability	Notes
1	Program establishment decision (for public institutions)/Final program licensing decision (for private institutions)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
2	Accredited institution or the institution has met the eligibility requirements (review visit has been scheduled)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
3	Students graduated (One cohort at least)	<input type="checkbox"/> Yes <input type="checkbox"/> No	

\* Attach a copy of the establishment decision/final license of the program.

### If the program is offered in multiple locations:

#### A. Branches Details:

No	Location	College	Establishment/final licensing decision:	Date of first cohort of graduation	Notes (For NCAAA official use)
1	Main Campus				
2	Branch 1				
3	Branch 2				
4	Branch ...				





### B. Administration and organization:

No.	Items	Program response	Notes
1	Is the organizational structure of the program that directs all branches identical?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
2	Is the qualification awarded by the program in all the branches (according to the graduation certificate) identical?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
3	Does the program apply a unified study plan in all the branches?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
4	Does the program apply a unified program specification in all the branches?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
5	Does the program apply unified course specifications in all the branches?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6	Do the program branches report to different Deans?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
7	Do all branches of the program have a centralized leadership in which a single head of department makes all the decisions?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
8	Are teaching staff in the program in charge of teaching in other branches to ensure the quality of student experience?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

### Contact Details:

<b>Name:</b>	
<b>Position:</b>	
<b>E-mail:</b>	
<b>Mobile:</b>	

The Accreditation Standards, policies and procedures of the NCAAA-ETEC were acknowledged, read, and understood.



### Signature of competent authority:

Name: .....

Position: .....

Signature: .....



### For NCAAA official use:

Based on the details provided above the Program:

Eligible to sign the accreditation contract (number of program .... )

Illegible to sign the accreditation contract for the following reasons:

Name: .....

Signature: .....

