

# SAKARYA UNIVERSITY FACULTY OF THEOLOGY MONITORING REPORT (MR)

**(Normal Education Theology Programme)**

## **Monitoring Report**

- Assoc. Prof. Dr. Bahar Çelik (IAA Monitoring Evaluator)

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### A.1. Mission and Strategic Objectives

The practices that cover all the fields in line with the faculty’s strategic objectives and targets defined within the scope of the strategic plan are systematically monitored in compliance with the faculty’s internal quality assurance system and the monitoring results are evaluated with stakeholders to take necessary measures. The relations between the institutional policies in all the fields are established, and this integrated structure guides the internal quality assurance system and the results are monitored and evaluated with stakeholders to take necessary measures. All performance indicators related to all the fields/processes are systematically monitored in line with the faculty’s internal quality assurance system. The results are evaluated with stakeholders and employed in decision-making processes, and necessary measures are taken with regard to performance management.

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

##### *Maturity level*

1	2	3	4	5
The institution does not have any mission, vision or strategic objectives that are defined within the scope of the strategic plan.	The institution has a mission, vision and strategic objectives that are defined within the scope of the strategic plan. But no practice is available to implement these or the existing practices do not cover all the fields.	The institution has some practices implemented in the entire institution in line with the institution’s strategic objectives and targets defined within the scope of the strategic plan, and certain results have been obtained from these practices. But necessary mechanisms for the monitoring of the strategic plan have not been formed and/or strategic plan have not been employed in any decision-making process.	The practices that cover all the fields in line with the institution’s strategic objectives and targets defined within the scope of the strategic plan are systematically monitored in compliance with the institution’s internal quality assurance system. The monitoring results are evaluated with stakeholders to take necessary measures.	Matured and sustainable practices to realize the strategic objectives and targets as part of the strategic plan are adopted in the entire institution. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.
			Member 1	
			Member 2	
			Member 3	
			Member 4	
			Member 5	
			Member 6	
			CC Decision	
			IAC Decision	
			Monitor Decision	

### **Program's 2025 Goals**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Program's Scheduled Action Plan for 2025**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Assessments regarding planning:**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Assessments regarding the self-assessment report:**

The faculty has defined its mission, vision, and strategic aims and objectives. These are reviewed through stakeholder participation. Upon examination of the interim evaluation report, it is evident that the process continues with monitoring and improvement.

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

#### *Maturity level*

1	2	3	4	5
The institution does not have any defined policy.	The institution has defined policies in some of the main headings including quality assurance, learning and teaching, research and development, social contribution and governance system. However, these policies have not been employed in any planning or decision-making process.	The institution has practices implemented in all the fields in line with the defined policies, and certain results have been obtained from these practices. But necessary mechanisms to monitor their results are not available.	The relations between the institutional policies in all the fields are established, and this integrated structure guides the internal quality assurance system. The results are monitored and evaluated with stakeholders to take necessary measures.	Matured and sustainable practices in line with the institutional policies in all the fields are adopted in the entire institution and taken as a basis in decision-making processes. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.
			Member 1	
			Member 2	
			Member 3	
			Member 4	
			Member 5	
			Member 6	
			CC Decision	
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			Monitor Decision	

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### **Program's Scheduled Action Plan for 2025**

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### **Assessments regarding planning:**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Assessments regarding the self-assessment report:**

The faculty maintains its current status as outlined in the 2025 report. Furthermore, it continues its improvement and development efforts.

### A.1.3. Institutional performance management

#### *Maturity level*

1	2	3	4	5
The institution does not have any performance management practice or performance indicators defined in compliance with the strategic plan.	Some indicators and mechanisms are defined to monitor the performance in the institution. But no practice is available to monitor these indicators or the existing practices do not cover all the fields/processes (quality assurance system, learning and teaching, research and development, social contribution and governance system).	Performance indicators and key performance indicators are defined in all the fields. However, the monitoring of these indicators are not systematic or do not cover all the fields.	All performance indicators related to all the fields/processes are systematically monitored in line with the institution's internal quality assurance system. The results are evaluated with stakeholders and employed in decision-making processes, and necessary measures are taken with regard to performance management.	Matured and sustainable institutional performance management in line with the institutional goals is adopted in the entire institution. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.
			Member 1	
			Member 2	
			Member 3	
			Member 4	
			Member 5	
			Member 6	
			CC Decision	
			IAC Decision	
			Monitor Decision	

### **Program's 2025 Goals**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Program's Scheduled Action Plan for 2025**

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### **Assessments regarding planning:**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Assessments regarding the self-assessment report:**

The faculty maintains its current status as outlined in the 2025 report. Furthermore, it continues its improvement and development efforts.

## A.2. Internal Quality Assurance

The quality commission conducts its activities as part of its duties, authorities and responsibilities in an inclusive, participative and transparent manner. However, these practices are not executed as part of the integrated quality management in the faculty and the results of the practices are not monitored. The faculty has internal quality assurance mechanisms (processes, PDCA cycles, authorities, duties and responsibilities, quality tools) that cover all the fields and processes; and certain results have been obtained from the applications of these mechanisms. But they are not executed as part of the integrated quality management of the faculty and the results of these practices are not monitored. The faculty has an institutional culture and leadership approach that complement the quality assurance culture in the faculty and cover all the units and processes. Certain results have been obtained from the activities conducted in this scope. But these practices are not executed as part of the integrated quality management of the faculty and their results are not monitored.

### A.2.1. Quality Commission

#### *Maturity level*

1	2	3	4	5
The institution does not have a quality commission responsible for maintaining quality assurance processes.	The duties, authorities and responsibilities and the organizational structure of the institution's quality commission are defined. However, the quality commission does not play an active role in planning and/or decision-making processes related to these duties, authorities and responsibilities.	The quality commission conducts its activities as part of its duties, authorities and responsibilities in an inclusive, participative and transparent manner. However, these practices are not executed as part of the integrated quality management in the institution and the results of the practices are not monitored.	The quality commission is systematically conducting their works in line with their duties, authorities and responsibilities and in the scope of the integrated quality management in the institution. The findings obtained from these practices are monitored and the monitoring results are evaluated to enable improvement.	Sustainable and integrated practices of the quality commission that are in line with the institutional goals are adopted in the entire institution. The institution has innovative implementations in quality management, some of which serve as a model for other institutions.
		Member 1		
		Member 2		
		Member 3		
		Member 4		
		Member 5		
		Member 6		
		CC Decision		

		IAC Decision		
		Monitor Decision		

### **Program's 2025 Goals**

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### **Assessments regarding planning:**

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### **Assessments regarding the self-assessment report:**

Although the principles and procedures regarding boards and commissions in the faculty are defined, it is suggested that the structure of these boards and commissions be secured by including detailed information on how and for what duration the members of these commissions are appointed, under what circumstances their duties end, and how and from whom they are selected.

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

#### *Maturity level*

1	2	3	4	5
The institution does not have any internal quality assurance system or mechanisms.	The institution has internal quality assurance mechanisms but they do not cover all the fields/processes (learning and teaching, research and development, social contribution, governance system).	The institution has internal quality assurance mechanisms (processes, PDCA cycles, authorities, duties and responsibilities, quality tools) that cover all the fields and processes; and certain results have been obtained from the applications of these mechanisms. But they are not executed as part of the integrated quality management of the institution and the results of these practices are not monitored.	The internal quality assurance mechanisms that cover all the fields/processes in the institution are systematically conducted in line with the defined processes and an integrated quality management approach. The findings obtained from these practices are monitored and the monitoring results are evaluated with stakeholders to enable improvement.	Sustainable and integrated internal quality assurance practices that cover all the fields and processes and in line with the institutional goals are adopted in the entire institution. The institution has innovative implementations in quality management, some of which serve as a model for other institutions.
		Member 1		
		Member 2		
		Member 3		
		Member 4		
		Member 5		
		Member 6		
		CC Decision		
		IAC Decision		
		Monitor Decision		

### **Program's 2025 Goals**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

### **Program's Scheduled Action Plan for 2025**

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### **Assessments regarding planning:**

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### **Assessments regarding the self-assessment report:**

Although meetings are held with different groups within the faculty, no follow-up processes regarding the results of these meetings have been observed. Furthermore, it takes time to understand that the commissions meet twice a year, as stated in the principles and procedures regarding the commissions, and that they conduct monitoring and improvement activities.

### A.2.3. Leadership and quality assurance culture

#### *Maturity level*

1	2	3	4	5
The institution does not have an institutional culture or leadership approach that complements the quality assurance culture in the institution.	Some plans have been made to establish an institutional culture and leadership approach that complement the quality assurance culture in the institution. But these plans are not put into practice, or the existing practices do not cover all the fields and units.	The institution has an institutional culture and leadership approach that complement the quality assurance culture in the institution and cover all the units and processes. Certain results have been obtained from the activities conducted in this scope. But these practices are not executed as part of the integrated quality management of the institution and their results are not monitored.	The institution has an institutional culture that enables the permanence of high quality and a leadership approach that enables the coordination of quality efforts in line with the institutional values and expectations and embraces the quality processes. Leadership and quality assurance culture are monitored as part of the integrated quality management perspective of the institution, evaluated with stakeholders, and necessary measures are taken according to the monitoring results.	Sustainable and matured institutional quality culture and leadership approach that cover all the units and processes and in line with the institutional goals are adopted in the entire institution. The institution has innovative implementations for strengthening its quality culture and leadership approach, some of which serve as a model for other institutions.
		Member 1		
		Member 2		
		Member 3		
		Member 4		
		Member 5		
		Member 6		
		CC Decision		
		IAC Decision		
			Monitor Decision	

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### **Assessments regarding planning:**

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### **Assessments regarding the self-assessment report:**

The Faculty has an institutional culture that enables the permanence of high quality and a leadership approach that enables the coordination of quality efforts in line with the institutional values and expectations and embraces the quality processes. Leadership and quality assurance culture are monitored as part of the integrated quality management perspective of the institution, evaluated with stakeholders, and necessary measures are taken according to the monitoring results.

### A.3. Stakeholder Participation

Participation of stakeholders, who have been determined in relation to the processes maintained in the faculty, in processes and decision-making mechanisms have been enabled and some application results have been obtained from this interaction. But these practices are not executed as part of the integrated quality management of the faculty and their results are not monitored.

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

##### *Maturity level*

1	2	3	4	5
The institution does not have mechanisms or implementations that would enable stakeholder participation in all the processes maintained in the institution (quality assurance, learning and teaching, research and development, social contribution, governance system, internationalization)	The institution has defined its stakeholders, conducted stakeholder analyses and has a set of defined processes for stakeholder participation. But no practice related to these processes is available or the existing practices do not cover all the processes, fields and stakeholder groups.	Participation of stakeholders, who have been determined in relation to the processes maintained in the institution, in processes and decision-making mechanisms have been enabled and some application results have been obtained from this interaction. But these practices are not executed as part of the integrated quality management of the institution and their results are not monitored.	The stakeholder participation in all the processes and decision-making steps of the institution is maintained as part of the integrated quality management in the institution and the findings obtained from stakeholder participation practices are monitored and evaluated with stakeholders. Necessary measures are taken according to the monitoring results.	The stakeholder participation in all the processes and decision-making steps of the institution is enabled with matured and sustainable practices and adopted in the entire institution. The institution has innovative implementations for strengthening stakeholder participation, some of which serve as a model for other institutions.
		Member 1		
		Member 2		
		Member 3		
		Member 4		
		Member 5		
		Member 6		
		CC Decision		
		IAC Decision		
		Monitor Decision		

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### **Assessments regarding the self-assessment report:**

Although the faculty conducts satisfaction and evaluation surveys for its stakeholders, no improvement processes have been observed regarding the feedback received from these surveys and feedback mechanisms. For example, examples should be provided to explain what kind of improvement process is followed regarding satisfaction levels that fall below 70 points in student satisfaction surveys.

## A.4. Internationalization

The practices conducted in line with the faculty’s internationalization policy are monitored in a systematic manner and in compliance with the faculty’s internal quality assurance system. These practices are evaluated with stakeholders to take necessary measures. The outcomes and stakeholder opinions with regard to the management of the internationalization processes in the faculty are systematically monitored and evaluated with stakeholders to take necessary measures. The physical, technical and financial resources in the faculty are managed in a way to support the internationalization activities. The findings obtained from these practices are systematically monitored and the monitoring results are evaluated with stakeholders to take necessary measures and diversify resources according to the needs and demands. The practices regarding the monitoring and evaluation of the faculty’s internationalization performance cover all the fields. But their results are not monitored or employed in decision-making processes.

### A.4.1. Internationalization policy

#### *Maturity level*

1	2	3	4	5
The institution does not have a defined internationalization policy.	The institution has a defined internationalization policy. But no implementation related to this policy is available.	The institution has some practices in line with the internationalization policy that considers the aspects of learning and teaching, research and development and social contribution; and certain results have been obtained from them. But the results of these practices are not monitored.	The practices conducted in line with the institution’s internationalization policy are monitored in a systematic manner and in compliance with the institution’s internal quality assurance system. These practices are evaluated with stakeholders to take necessary measures.	The institution’s specific internationalization model is adopted in the entire institution. The institution has innovative implementations with regard to its internationalization model, some of which serve as a model for other institutions.
			Member 1	
			Member 2	
			Member 3	
			Member 4	
			Member 5	
			Member 6	
			CC Decision	
			IAC Decision	
			Monitor Decision	

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### **Assessments regarding the self-assessment report:**

The faculty maintains its current status as outlined in the 2025 report. Furthermore, it continues its improvement and development efforts.

### A.4.2. Management and organizational structure of internationalization processes

#### *Maturity level*

1	2	3	4	5
The institution does not have any plans for the management and organizational structure of internationalization processes.	The institution has plans for the management and organizational structure of internationalization processes. But no implementation with regard to these plans is available.	Some results have been obtained by implementing the management and organizational structure of the internationalization processes in accordance with the institutional preferences. But their results are not monitored.	The outcomes and stakeholder opinions with regard to the management of the internationalization processes in the institution are systematically monitored and evaluated with stakeholders to take necessary measures.	The management of internationalization processes covers all the units/fields in the institution and is adopted and guaranteed in the entire institution with the help of integrative, sustainable and matured practices that are in line with the institutional goals. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.
			Member 1	
			Member 2	
			Member 3	
			Member 4	
			Member 5	
			Member 6	
			CC Decision	
			IAC Decision	
			Monitor Decision	

### **Program's 2025 Goals**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Program's Scheduled Action Plan for 2025**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Assessments regarding planning:**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Assessments regarding the self-assessment report:**

The faculty maintains its current status as outlined in the 2025 report. Furthermore, it continues its improvement and development efforts.

### A.4.3. Internationalization resources

#### *Maturity level*

1	2	3	4	5
The institution does not have sufficient physical, technical and financial resources in terms of quality and quantity to maintain its internationalization activities.	The institution has plans to obtain sufficient physical, technical and financial resources in terms of quality and quantity to maintain its internationalization activities. But these plans are not put into practice.	The sufficient physical, technical and financial resources in terms of quality and quantity to maintain the institution's internationalization activities are provided. But the results with regard to the use of these resources are not monitored.	The physical, technical and financial resources in the institution are managed in a way to support the internationalization activities. The findings obtained from these practices are systematically monitored and the monitoring results are evaluated with stakeholders to take necessary measures and diversify resources according to the needs and demands.	The sufficient physical, technical and financial resources in terms of quality and quantity are managed in the institution in line with the institutional goals (internationalization policy and strategy) and in a sustainable manner. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.
			Member 1	
			Member 2	
			Member 3	
			Member 4	
			Member 5	
			Member 6	
			CC Decision	
			IAC Decision	
			Monitor Decision	

### **Program's 2025 Goals**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Program's Scheduled Action Plan for 2025**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Assessments regarding planning:**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Assessments regarding the self-assessment report:**

The faculty maintains its current status as outlined in the 2025 report. Furthermore, it continues its improvement and development efforts.

#### A.4.4. Monitoring and improving the internationalization performance

##### *Maturity level*

1	2	3	4	5
The institution does not have any plans or defined processes to monitor and evaluate its internationalization performance.	The institution has plans and defined processes to monitor and evaluate its internationalization performance. But these plans and processes are not put into practice.	The practices regarding the monitoring and evaluation of the institution's internationalization performance cover all the fields. But their results are not monitored or employed in decision-making processes.	The internationalization performance of the institutional units ( <i>Commission, coordinator, cooperating center, etc.</i> ) that work for internationalization goals is monitored, evaluated and employed in decision-making processes. The practices related to this aspect are periodically monitored and the monitoring results are evaluated with stakeholders to take necessary measures.	Sustainable and matured practices regarding the monitoring and evaluation of the internationalization performance of the units working for internationalization goals and institutional goals (internationalization policy, objectives and strategy) are adopted and guaranteed in the entire institution. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.
		Member 1		
		Member 2		
		Member 3		
		Member 4		
		Member 5		
		Member 6		
		CC Decision		
		IAC Decision		
		Monitor Decision		

### **Program's 2025 Goals**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

### **Program's Scheduled Action Plan for 2025**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

### **Assessments regarding planning:**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

### **Assessments regarding the self-assessment report:**

The faculty carries out many activities aimed at internationalization. However, the faculty is expected to first define its aims and objectives for internationalization activities, then carry out its activities in line with these aims, and finally monitor the extent to which the defined aims and objectives have been achieved. If the defined objectives are not achieved, it is expected that various improvement mechanisms will be developed.

### B.1. Design and Approval of The Program

The practices regarding the design and approval of program are systematically monitored and evaluated with the participation of stakeholders to take necessary measures. The practices that encompass all the fields regarding the program objectives, outcomes and compliance with IAA criteria are systematically monitored and evaluated with stakeholders to take necessary measures. The practices that cover all the fields related to the alignment of course achievements with the program outcomes and the discipline-specific outcomes in the program are systematically monitored in compliance with the faculty's internal quality assurance system and the monitoring results are evaluated with stakeholders to take necessary measures. The practices on program structure and balance in all the fields are systematically monitored and the monitoring results are evaluated with stakeholders and continuously updated by taking necessary measures. Student workload is defined in the program, shared with stakeholders (through program and course info packages) and employed in all practices related to learning and teaching (student mobility, recognition of prior learning etc.). However, its results and related implementations are not monitored. The design for a competency-based assessment and evaluation system covers all the fields in the program and some results have been obtained from the implementation of this design. But the results of this system are not monitored.

#### B.1.1. Design and approval of the program

##### *Maturity level*

1	2	3	4	5
The institution does not have defined and systematic processes regarding the design and approval of program.	The institution has defined and systematic processes regarding the design and approval of program, but they do not cover all the fields.	The institution has conducted some implementations in line with the defined processes related to the design and approval of all the program and certain results have been obtained from these implementations. But their results are not monitored.	The practices regarding the design and approval of program are systematically monitored and evaluated with the participation of stakeholders to take necessary measures.	Sustainable and matured practices on the design and approval of program, which are undertaken with the participation of stakeholders, are adopted in the entire institution. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.
			Member 1	
			Member 2	
			Member 3	
			Member 4	
			Member 5	
			Member 6	
			CC Decision	

			IAC Decision	
			Monitor Decision	

### Program's 2025 Goals

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### Program's Scheduled Action Plan for 2025

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### Assessments regarding planning:

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### Assessments regarding the self-assessment report:

The faculty maintains its current status as outlined in the 2025 report. Furthermore, it continues its improvement and development efforts.

### B.1.2. Program's objectives, outcomes (program outcomes and discipline-specific outcomes) and compliance with IAA Criteria

#### *Maturity level*

1	2	3	4	5
The program objectives, outcomes and compliance with IAA criteria are not defined in the institution.	The program objectives, outcomes and compliance with IAA criteria are defined in the institution. But they are not applied in all the fields.	The program objectives, outcomes and compliance with IAA criteria are defined, published and associated with the practices related to learning and teaching. But the results of these practices are not monitored.	The practices that encompass all the fields regarding the program objectives, outcomes and compliance with IAA criteria are systematically monitored and evaluated with stakeholders to take necessary measures.	Sustainable and matured practices on the program objectives, outcomes and compliance with IAA criteria are adopted in the entire institution. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.
			Member 1	
			Member 2	
			Member 3	
			Member 4	
			Member 5	
			Member 6	
			CC Decision	
			IAC Decision	
			Monitor Decision	

### **Program's 2025 Goals**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Program's Scheduled Action Plan for 2025**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Assessments regarding planning:**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Assessments regarding the self-assessment report:**

The faculty maintains its current status as outlined in the 2025 report. Furthermore, it continues its improvement and development efforts.

### B.1.3. Alignment of course achievements with program outcomes

#### *Maturity level*

1	2	3	4	5
Course achievements are not aligned with the program outcomes and the discipline-specific outcomes in the program.	Course achievements are aligned with the program outcomes and the discipline-specific outcomes in the program.	The course achievements that clearly specify the cognitive level (Bloom level) of the courses are aligned with the program outcomes and the discipline-specific outcomes in the program and this alignment is published and reflected on the practices related to learning and teaching (course profiles and curricula etc.) But the results of these practices are not monitored.	The practices that cover all the fields related to the alignment of course achievements with the program outcomes and the discipline-specific outcomes in the program are systematically monitored in compliance with the institution's internal quality assurance system and the monitoring results are evaluated with stakeholders to take necessary measures.	Course achievements are aligned with the program outcomes and the discipline-specific outcomes in a clear, practical and sustainable manner and this alignment is internalized in all the fields. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.
			Member 1	
			Member 2	
			Member 3	
			Member 4	
			Member 5	
			Member 6	
			CC Decision	
			IAC Decision	
			Monitor Decision	

**Program's 2025 Goals**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

**Program's Scheduled Action Plan for 2025**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

**Assessments regarding planning:**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

**Assessments regarding the self-assessment report:**

The faculty maintains its current status as outlined in the 2025 report. Furthermore, it continues its improvement and development efforts.

### B.1.4. Structure of the program and balance in the distribution of courses

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

#### **Maturity level**

1	2	3	4	5
The balance in the distribution of courses is not taken into consideration in any fields in the program.	The institution has developed plans regarding the structure of the program and distribution of courses, but they do not cover all the fields.	Program and course info packages are designed in consideration of the program structure and balance in the distribution of courses (balance between field-specific and professional knowledge and general knowledge courses, cultural competence, opportunities to familiarize students with different disciplines etc.). But the results of these practices are not monitored.	The practices on program structure and balance in all the fields are systematically monitored and the monitoring results are evaluated with stakeholders and continuously updated by taking necessary measures.	Sustainable and matured practices on the program structure and balance in line with the institutional goals (learning and teaching policy) are adopted in the entire institution. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.
			Member 1	
			Member 2	
			Member 3	
			Member 4	
			Member 5	
			Member 6	
			CC Decision	
			IAC Decision	
			Monitor Decision	

### **Program's 2025 Goals**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Program's Scheduled Action Plan for 2025**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Assessments regarding planning:**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Assessments regarding the self-assessment report:**

The faculty maintains its current status as outlined in the 2025 report. Furthermore, it continues its improvement and development efforts.

### B.1.5. Student workload based design

#### *Maturity level*

1	2	3	4	5
Student workload based design is not available in the program.	Some plans have been made for student workload based design in the program, but they do not cover all the fields or are not implemented in all the practices related to learning and teaching.	Student workload is defined in the program, shared with stakeholders (through program and course info packages) and employed in all practices related to learning and teaching (student mobility, recognition of prior learning etc.). However, its results and related implementations are not monitored.	Student workload practice applied in the program, is systematically monitored, and the monitoring results are evaluated with stakeholders to take necessary measures.	Student workload practice is adopted in the entire institution in line with institutional goals and in a sustainable manner. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.
		Member 1		
		Member 2		
		Member 3		
		Member 4		
		Member 5		
		Member 6		
		CC Decision		
		IAC Decision		
		Monitor Decision		

### **Program's 2025 Goals**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

### **Program's Scheduled Action Plan for 2025**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

### **Assessments regarding planning:**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

### **Assessments regarding the self-assessment report:**

The faculty conducts its education and training process based on ECTS workload. Each course has its ECTS credits and workload defined and announced to stakeholders via the EBS system. However, the adequacy, monitoring, and improvement processes of workloads are still open to development.

### B.1.6. Assessment and evaluation

#### *Maturity level*

1	2	3	4	5
The institution does not have competency-based assessment and evaluation approach in the program.	The institution has designed a competency-based assessment and evaluation system for its program. But this design does not cover all the fields.	The design for a competency-based assessment and evaluation system covers all the fields in the program and some results have been obtained from the implementation of this design. But the results of this system are not monitored.	The findings obtained from the practices related to the assessment and evaluation system designed for all the fields are systematically monitored and the monitoring results are evaluated with stakeholders to take necessary measures.	The assessment and evaluation system that is designed for the program in a sustainable manner and in line with the institutional goals is adopted in the entire institution. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.
		Member 1		
		Member 2		
		Member 3		
		Member 4		
		Member 5		
		Member 6		
		CC Decision		
		IAC Decision		
		Monitor Decision		

### **Program's 2025 Goals**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

### **Program's Scheduled Action Plan for 2025**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

### **Assessments regarding planning:**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

### **Assessments regarding the self-assessment report:**

The faculty continues to implement a system of one midterm and one final exam in all courses as its assessment method, as stated in its 2025 self-assessment report. Furthermore, the faculty declares in its 2026 self-assessment report that it uses skill-based and performance-based assessment methods in some courses. However, the fact that these skill and performance assessments, along with other assessment methods such as assignments or projects, are not included in the ECTS workload, and that courses with different teaching methods and techniques are evaluated using standard assessment methods, has been identified as areas for improvement.

## B.2. Student Admission and Progression

The defined criteria and processes for student admission and recognition of prior learning are applied in the faculty. However, the results of the related implementations are not monitored. The findings obtained from the practices related to the recognition and certification of degrees, diplomas and other qualifications are systematically monitored and evaluated with stakeholders. Necessary measures are taken according to monitoring results.

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

#### *Maturity level*

1	2	3	4	5
The criteria and processes for student admission and recognition of prior learning have not been defined in the institution.	The institution has defined and published a set of criteria and processes for student admission and recognition of prior learning, but they do not cover all the fields in the institution.	The defined criteria and processes for student admission and recognition of prior learning are applied in the institution. However, the results of the related implementations are not monitored.	The findings obtained from the practices related to student admission and recognition of prior learning are systematically monitored and evaluated with stakeholders. Necessary measures are taken according to monitoring results.	The practices on student admission and recognition of prior learning are adopted in the entire institution in line with institutional goals and in a sustainable manner. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.
		Member 1		
		Member 2		
		Member 3		
		Member 4		
		Member 5		
		Member 6		
		CC Decision		
		IAC Decision		
		Monitor Decision		

### **Program's 2025 Goals**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

### **Program's Scheduled Action Plan for 2025**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

### **Assessments regarding planning:**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

### **Assessments regarding the self-assessment report:**

Student admissions, recognition and crediting of prior learning are part of existing practices, and the results of these practices are monitored using various tools. However, rather than simply making general statements about student satisfaction, it is necessary to define and implement monitoring, evaluation, and improvement stages that will enhance the process, including the adequacy and effectiveness of the process, problems encountered during the process, and proposed solutions to these problems.

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

### *Maturity level*

1	2	3	4	5
The criteria and processes for the recognition and certification of degrees, diplomas and other qualifications have not been defined in the institution.	The institution has defined and published a set of criteria and processes for the recognition and certification of degrees, diplomas and other qualifications.	The criteria and processes that are defined in a clear, comprehensive and consistent manner for the recognition and certification of degrees, diplomas and other qualifications are applied in the institution. However, the results of the related implementations are not monitored.	The findings obtained from the practices related to the recognition and certification of degrees, diplomas and other qualifications are systematically monitored and evaluated with stakeholders. Necessary measures are taken according to monitoring results.	Matured practices on the recognition and certification of degrees, diplomas and other qualifications are adopted in the entire institution in line with institutional goals and in a sustainable manner. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.
			Member 1	
			Member 2	
			Member 3	
			Member 4	
			Member 5	
			Member 6	
			CC Decision	
			IAC Decision	
			Monitor Decision	

### **Program's 2025 Goals**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Program's Scheduled Action Plan for 2025**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Assessments regarding planning:**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Assessments regarding the self-assessment report:**

The faculty maintains its current status as outlined in the 2025 report. Furthermore, it continues its improvement and development efforts.

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

*Up-to-date, research/learning- and student- oriented teaching methods and techniques that promote interdisciplinary studies and provide active and interactive student participation are applied in the learning and teaching processes of all the fields and some results have been obtained from these practices. But their results are not monitored. Practices on student-centered assessment and evaluation are available in all the fields and some results have been obtained from these practices. But the results of this assessment and evaluation system are not monitored. The findings obtained from the practices related to receiving feedback from all student groups in the program (valid and reliable practices that contain different instruments) are systematically monitored and the monitoring results are evaluated with stakeholders to take necessary measures. The findings obtained from the practices related to academic consultancy are systematically monitored and the monitoring results are evaluated with stakeholders to take necessary measures.*

#### B.3.1. Teaching methods and techniques (active, interdisciplinary studies; interactive, research/learning-oriented methods)

##### **Maturity level**

1	2	3	4	5
The institution does not have student-centered approaches in its learning and teaching processes.	Some plans have been made to implement student-centered approaches in the institution's learning and teaching processes, but these plans are not put into practice or the existing practices do not cover all the fields.	Up-to-date, research/learning- and student- oriented teaching methods and techniques that promote interdisciplinary studies and provide active and interactive student participation are applied in the learning and teaching processes of all the fields and some results have been obtained from these practices. But their results are not monitored.	The findings obtained from the practices related to up-to-date, research/learning- and student- oriented teaching approach that promotes interdisciplinary studies and provides active and interactive student participation are systematically monitored and evaluated with stakeholders. Necessary measures are taken according to monitoring results.	Matured practices on the teaching methods and techniques are adopted in the entire institution in line with the institutional goals and in a sustainable manner. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.
		Member 1		
		Member 2		
		Member 3		
		Member 4		
		Member 5		
		Member 6		
		CC Decision		

		IAC Decision		
		Monitor Decision		

**Program's 2025 Goals**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

**Program's Scheduled Action Plan for 2025**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

**Assessments regarding planning:**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

**Assessments regarding the self-assessment report:**

The faculty promotes current, interdisciplinary practices that encourage active and interactive student participation in learning and teaching processes. It also strives to contribute to student development by supporting diverse teaching techniques. However, it is believed that monitoring and improvement mechanisms are needed to assess the extent to which all these practices contribute to student learning, the level at which students utilize active learning tools, and the benefits they derive from them.

### B.3.2. Assessment and Evaluation

#### *Maturity level*

1	2	3	4	5
The institution's program do not have plans or defined processes on student-centered assessment and evaluation.	The institution's program have some plans and defined processes for student-centered assessment and evaluation, but these plans are not put into practice or the existing practices do not cover all the fields.	Practices on student-centered assessment and evaluation are available in all the fields and some results have been obtained from these practices. But the results of this assessment and evaluation system are not monitored.	The findings obtained from the matured practices related to student-centered assessment and evaluation in all the fields are systematically monitored and the monitoring results are evaluated with stakeholders to take necessary measures.	Matured practices on the student-centered assessment and evaluation are adopted in the entire institution in line with the institutional goals and in a sustainable manner. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.
		Member 1		
		Member 2		
		Member 3		
		Member 4		
		Member 5		
		Member 6		
		CC Decision		
		IAC Decision		
		Monitor Decision		

### **Program's 2025 Goals**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

### **Program's Scheduled Action Plan for 2025**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

### **Assessments regarding planning:**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

### **Assessments regarding the self-assessment report:**

The faculty encourages current, interdisciplinary practices that promote active and interactive student participation in learning and teaching processes. It also strives to contribute to student development by supporting diverse teaching techniques. However, since the evaluation of all these practices is standardized through midterm and final exams, it is believed that assessment processes supporting student-centered teaching, particularly skill- or performance-based learning, are not adequately supported.

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

***Maturity level***

1	2	3	4	5
The institution does not have any mechanisms to receive student feedback.	The institution has formed a set of mechanisms to receive student feedback (about courses, instructors, degree program, services and overall satisfaction level etc.). But no practice is available in this regard or the existing practices do not cover all the units.	Student feedback (about courses, instructors, degree program, services and overall satisfaction level etc.) is systematically received (at the end of each semester or academic year). But the feedback is not employed in the decision-making processes that aim improvement.	The findings obtained from the practices related to receiving feedback from all student groups in the program (valid and reliable practices that contain different instruments) are systematically monitored and the monitoring results are evaluated with stakeholders to take necessary measures.	Matured practices on receiving student feedback are adopted in the entire institution in line with the institutional goals and in a sustainable manner. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.
			Member 1	
			Member 2	
			Member 3	
			Member 4	
			Member 5	
			Member 6	
			CC Decision	
			IAC Decision	
			Monitor Decision	

### **Program's 2025 Goals**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Program's Scheduled Action Plan for 2025**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Assessments regarding planning:**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Assessments regarding the self-assessment report:**

The faculty maintains its current status as outlined in the 2025 report. Furthermore, it continues its improvement and development efforts.

### B.3.4. Academic consultancy

#### *Maturity level*

1	2	3	4	5
The institution does not have a defined academic consultancy process.	The institution has a defined academic consultancy process. But no practice is available in this regard or the existing practices do not cover all the fields.	The institution has academic consultancy practices and some results have been obtained from these practices, but the results are not monitored.	The findings obtained from the practices related to academic consultancy are systematically monitored and the monitoring results are evaluated with stakeholders to take necessary measures.	Matured practices on academic consultancy are adopted in the entire institution in line with the institutional goals and in a sustainable manner. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.
			Member 1	
			Member 2	
			Member 3	
			Member 4	
			Member 5	
			Member 6	
			CC Decision	
			IAC Decision	
			Monitor Decision	

### **Program's 2025 Goals**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Program's Scheduled Action Plan for 2025**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Assessments regarding planning:**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Assessments regarding the self-assessment report:**

The faculty maintains its current status as outlined in the 2025 report. Furthermore, it continues its improvement and development efforts.

## B.4. Teaching Staff

The results of the practices related to recruitment, appointment, promotion and course assignment criteria are systematically monitored and the monitoring results are evaluated with stakeholders to take necessary measures. The findings obtained from the practices aiming to improve the teaching competence of the faculty's teaching staff are systematically monitored and the monitoring results are evaluated with stakeholders to take necessary measures. The findings obtained from the practices related to incentive and rewarding mechanisms for the faculty's teaching staff are systematically monitored and the monitoring results are evaluated with stakeholders to take necessary measures.

### B.4.1. Recruitment, appointment, promotion and teaching assignment criteria

#### *Maturity level*

1	2	3	4	5
The institution does not have defined criteria or processes for the recruitment, appointment, promotion and course assignment of teaching staff.	The institution has defined its criteria for the recruitment, appointment, promotion and course assignment of teaching staff, but field-specific necessities have not been analyzed in the planning stage.	The institution's recruitment, appointment, promotion and course assignment criteria, which are defined for all the fields and recognized by stakeholders, are implemented and employed in decision-making processes (teaching staff's recruitment, appointment, promotion, course assignments etc.). But the results of these practices are not monitored.	The results of the practices related to recruitment, appointment, promotion and course assignment criteria are systematically monitored and the monitoring results are evaluated with stakeholders to take necessary measures.	Sustainable and matured practices on recruitment, appointment, promotion and course assignment in all the fields are adopted in the entire institution in line with the institutional goals. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.
			Member 1	
			Member 2	
			Member 3	
			Member 4	
			Member 5	
			Member 6	
			CC Decision	
			IAC Decision	
			Monitor Decision	

### **Program's 2025 Goals**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Program's Scheduled Action Plan for 2025**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Assessments regarding planning:**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Assessments regarding the self-assessment report:**

The faculty maintains its current status as outlined in the 2025 report. Furthermore, it continues its improvement and development efforts.

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

***Maturity level***

1	2	3	4	5
The institution does not have any plans to improve the teaching competence of its teaching staff.	The institution has developed plans to improve the teaching competence of its teaching staff such as innovative approaches, material development, skills to equip students with competencies, and quality assurance system. But these plans are not put into practice or the existing practices (training for trainers events) do not cover the entire institution.	The institution has some practices to improve the teaching competence of its teaching staff that cover all the fields. But the results of these practices are not monitored.	The findings obtained from the practices aiming to improve the teaching competence of the institution's teaching staff are systematically monitored and the monitoring results are evaluated with stakeholders to take necessary measures.	Sustainable and matured practices aiming to improve the teaching competence of the institution's teaching staff are adopted in the entire institution in line with the institutional goals. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.
			Member 1	
			Member 2	
			Member 3	
			Member 4	
			Member 5	
			Member 6	
		CC Decision		
		IAC Decision		
		Monitor Decision		

### **Program's 2025 Goals**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

### **Program's Scheduled Action Plan for 2025**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

### **Assessments regarding planning:**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

### **Assessments regarding the self-assessment report:**

The faculty implements various practices to improve the teaching competence of its faculty members. It also encourages practices that support the research competence of academic staff, such as projects. Furthermore, faculty members who receive the highest grades on course evaluation surveys are rewarded. However, evidence has not been found regarding how these practices supporting staff development are determined, how requests for training needed by staff are received, and how the results of the support provided are monitored.

### B.4.3. Incentives and rewards for learning and teaching activities

#### *Maturity level*

1	2	3	4	5
The institution does not have any incentive or reward mechanism for its teaching staff.	The institution has developed plans to create incentive and reward mechanisms for its teaching staff. But these plans are not put into practice or the existing practices do not cover all the fields.	The incentive and reward practices for the teaching staff are maintained in consideration of the teaching staff's competencies and in a fair and transparent manner and cover all the fields. But the results of these practices are not monitored.	The findings obtained from the practices related to incentive and rewarding mechanisms for the institution's teaching staff are systematically monitored and the monitoring results are evaluated with stakeholders to take necessary measures.	Sustainable and matured practices on incentive and rewarding mechanisms for the institution's teaching staff are adopted in all the fields of the institution in line with the institutional goals. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.
			Member 1	
			Member 2	
			Member 3	
			Member 4	
			Member 5	
			Member 6	
			CC Decision	
			IAC Decision	
			Monitor Decision	

### **Program's 2025 Goals**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Program's Scheduled Action Plan for 2025**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Assessments regarding planning:**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Assessments regarding the self-assessment report:**

The faculty maintains its current status as outlined in the 2025 report. Furthermore, it continues its improvement and development efforts.

### B.5. Learning Resources

The learning resources in all the fields of the faculty are managed in a way to ensure their accessibility and suitability in terms of quality and quantity. The findings obtained from these practices are systematically monitored and the monitoring results are evaluated with stakeholders to take necessary measures and diversify resources according to the needs and demands. The faculty organizes social, cultural and sportive activities of sufficient quality and quantity. But the results of these practices and activities are not monitored. The physical resources and spaces in the faculty are managed in an integrative manner in order to provide facilities and infrastructure of sufficient quality and quantity in the faculty. The results obtained with regard to the use of all the facilities and infrastructure are systematically monitored and the monitoring results are evaluated with stakeholders to take necessary measures and diversify resources according to the needs and demands. The findings obtained from the accessible faculty practices that cover the entire faculty are systematically monitored and the monitoring results are evaluated with stakeholders to take necessary measures. The guidance, psychological counseling and career services of sufficient quality and quantity that are provided in the faculty are managed in an integrative manner (or presence of a center within the university that coordinates these services.) The results obtained with regard to these services are systematically monitored and the monitoring results are evaluated with stakeholders to take necessary measures and diversify resources according to the needs and demands.

### B.5.1. Learning resources

#### *Maturity level*

1	2	3	4	5
The institution does not have learning resources of sufficient quantity and quality (classrooms, laboratories, libraries, studios, course books, human resources, learning support etc.) to maintain its learning and teaching activities.	The institution has developed plans to create learning resources of sufficient quantity and quality to maintain its learning and teaching activities. But these plans are not put into practice or the existing practices do not cover all the units.	The institution provides learning resources of sufficient quality and quantity by setting a balance among the fields. But the results with regard to the use of these resources are not monitored.	The learning resources in all the fields of the institution are managed in a way to ensure their accessibility and suitability in terms of quality and quantity. The findings obtained from these practices are systematically monitored and the monitoring results are evaluated with stakeholders to take necessary measures and diversify resources according to the needs and demands.	The suitable and accessible learning resources are managed in all the fields of the institution in line with the institutional goals and in a sustainable manner. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.
			Member 1	
			Member 2	
			Member 3	
			Member 4	
			Member 5	
			Member 6	
			CC Decision	
			IAC Decision	
			Monitor Decision	

### **Program's 2025 Goals**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Program's Scheduled Action Plan for 2025**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Assessments regarding planning:**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Assessments regarding the self-assessment report:**

The faculty maintains its current status as outlined in the 2025 report. Furthermore, it continues its improvement and development efforts.

## B.5.2. Social, cultural and sportive activities

### *Maturity level*

1	2	3	4	5
The institution does not have social, cultural and sportive activities of sufficient quality and quantity.	The institution has developed plans to organize social, cultural and sportive activities of sufficient quality and quantity (providing space, funds and guidance support etc.). But these plans are not put into practice.	The institution organizes social, cultural and sportive activities of sufficient quality and quantity. But the results of these practices and activities are not monitored.	The social, cultural and sportive activities of sufficient quality and quantity in the institution are managed in line with the institutional goals (supports are provided for their execution, administrative organization is available etc.). The findings obtained from these practices are systematically monitored and the monitoring results are evaluated with stakeholders to take necessary measures and diversify resources according to the needs and demands.	The social, cultural and sportive activities of sufficient quality and quantity in the entire institution are managed in line with the institutional goals and in a sustainable manner. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.
		Member 1		
		Member 2		
		Member 3		
		Member 4		
		Member 5		
		Member 6		
		CC Decision		
		IAC Decision		
		Monitor Decision		

### **Program's 2025 Goals**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

### **Program's Scheduled Action Plan for 2025**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

### **Assessments regarding planning:**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

### **Assessments regarding the self-assessment report:**

The Faculty continues to implement its social, cultural, and sporting activities. In addition, beyond the monitoring conducted in the previous period, it has initiated improvement processes. As a result of the monitoring carried out in 2025, measures were taken to diversify these activities. However, it is considered that more time is needed to determine whether the process is being implemented in a systematic and sustainable manner.

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

***Maturity level***

1	2	3	4	5
<p>The institution does not have facilities and infrastructure of sufficient quality and quantity (cafeterias, dormitories, study halls equipped with technologies; health, transportation and IT services).</p>	<p>The institution has developed plans to create facilities and infrastructure of sufficient quality and quantity. But these plans are not put into practice.</p>	<p>The institution has established facilities and infrastructure of sufficient quality and quantity. But the results with regard to the use of these facilities and infrastructure are not monitored.</p>	<p>The physical resources and spaces in the institution are managed in an integrative manner in order to provide facilities and infrastructure of sufficient quality and quantity in the institution. The results obtained with regard to the use of all the facilities and infrastructure are systematically monitored and the monitoring results are evaluated with stakeholders to take necessary measures and diversify resources according to the needs and demands.</p>	<p>The suitable and accessible facilities and infrastructure are managed in the institution in line with the institutional goals and in a sustainable manner. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.</p>
			Member 1	
			Member 2	
			Member 3	
			Member 4	
			Member 5	
			Member 6	
			CC Decision	
			IAC Decision	
			Monitor Decision	

### **Program's 2025 Goals**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Program's Scheduled Action Plan for 2025**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Assessments regarding planning:**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Assessments regarding the self-assessment report:**

The faculty maintains its current status as outlined in the 2025 report. Furthermore, it continues its improvement and development efforts.

### B.5.4. Accessible Faculty

#### *Maturity level*

1	2	3	4	5
The institution does not have any plans for accessible faculty practices.	The institution has developed plans for accessible faculty practices. But these plans are not put into practice.	The accessible faculty practices in the institution cover all the places, but the results of these practices are not monitored.	The findings obtained from the accessible faculty practices that cover the entire institution are systematically monitored and the monitoring results are evaluated with stakeholders to take necessary measures.	The accessible faculty practices that cover the entire institution are managed in line with the institutional goals and in a sustainable manner. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.
			Member 1	
			Member 2	
			Member 3	
			Member 4	
			Member 5	
			Member 6	
			CC Decision	
			IAC Decision	
			Monitor Decision	

### **Program's 2025 Goals**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Program's Scheduled Action Plan for 2025**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Assessments regarding planning:**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Assessments regarding the self-assessment report:**

The faculty maintains its current status as outlined in the 2025 report. Furthermore, it continues its improvement and development efforts.

### B.5.5. Guidance, psychological counseling and career services

#### *Maturity level*

1	2	3	4	5
The institution does not have any plans to provide guidance, psychological counseling or career services of sufficient quality and quantity.	The institution has developed plans to provide guidance, psychological counseling and career services of sufficient quality and quantity. But these plans are not put into practice.	The institution provides guidance, psychological counseling and career services of sufficient quality and quantity. But the results of these practices are not monitored.	The guidance, psychological counseling and career services of sufficient quality and quantity that are provided in the institution are managed in an integrative manner (or presence of a center within the university that coordinates these services.) The results obtained with regard to these services are systematically monitored and the monitoring results are evaluated with stakeholders to take necessary measures and diversify resources according to the needs and demands.	The guidance, psychological counseling and career services of sufficient quality and quantity that are provided in the institution are managed in line with the institutional goals and in a sustainable manner. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.
			Member 1	
			Member 2	
			Member 3	
			Member 4	
			Member 5	
			Member 6	
			CC Decision	
			IAC Decision	
			Monitor Decision	

### **Program's 2025 Goals**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Program's Scheduled Action Plan for 2025**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Assessments regarding planning:**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Assessments regarding the self-assessment report:**

The faculty maintains its current status as outlined in the 2025 report. Furthermore, it continues its improvement and development efforts.

## B.6. Monitoring and Review of Programs

The faculty has introduced some practices for the monitoring of program outcomes in the faculty and certain results have been obtained from them. But the results have not been evaluated or employed in decision-making and updating processes. The faculty has practices related to alumni tracking system and certain results have been obtained from them. But the results have not been evaluated or employed in decision-making processes.

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

#### *Maturity level*

1	2	3	4	5
The institution does not have any mechanisms for the monitoring and review of program outcomes.	The institution has developed some mechanisms regarding the monitoring and review of program outcomes (defined processes and performance indicators). But no practice is currently available.	The institution has introduced some practices for the monitoring of program outcomes in the institution and certain results have been obtained from them. But the results have not been evaluated or employed in decision-making and updating processes.	All program outcomes in the institution are systematically monitored (annually and periodically at the end of the program period) in line with the institutional goals (learning and teaching policy and objectives). The monitoring results are evaluated and updated with stakeholders.	Monitoring all program outcomes in a sustainable manner and in line with institutional goals is guaranteed in the institution. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.
		Member 1		
		Member 2		
		Member 3		
		Member 4		
		Member 5		
		Member 6		
		CC Decision		
		IAC Decision		
		Monitor Decision		

### **Program's 2025 Goals**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

### **Program's Scheduled Action Plan for 2025**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

### **Assessments regarding planning:**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

### **Assessments regarding the self-assessment report:**

The Faculty is making efforts to develop mechanisms for monitoring program outcomes. Through regular briefings and informational activities provided to its academic staff, it encourages the effective implementation of this process. However, it has not been fully understood how the monitoring results are improved through stakeholder participation, nor at which stages of the process stakeholders are involved.

### B.6.2. Alumni tracking system

#### *Maturity level*

1	2	3	4	5
The institution does not have an alumni tracking system.	The institution has developed plans to establish an alumni tracking system. But these plans are not put into practice.	The institution has practices related to alumni tracking system and certain results have been obtained from them. But the results have not been evaluated or employed in decision-making processes.	Graduates in the program are systematically monitored in line with the institutional goals (learning and teaching policy and objectives), and necessary measures are taken according to the monitoring results.	The institution has guaranteed the monitoring of graduates in the program in line with the institutional goals and graduates have become a component of the institution's quality assurance system. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.
		Member 1		
		Member 2		
		Member 3		
		Member 4		
		Member 5		
		Member 6		
		CC Decision		
		IAC Decision		
		Monitor Decision		

### **Program's 2025 Goals**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

### **Program's Scheduled Action Plan for 2025**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

### **Assessments regarding planning:**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

### **Assessments regarding the self-assessment report:**

The Faculty is making efforts to increase the rate of engagement with its graduates. It organizes regular events each year to bring graduates together and maintain communication with them. However, it is not clear how, how often, and through which mechanisms graduates are involved in the monitoring and improvement processes required for educational activities and programs.

### C.1. Research Strategy

The practices related to the research policy, strategy and objectives, which are adopted in all the fields of the faculty, are systematically monitored and necessary measures that cover all the fields and programs are taken according to the monitoring results. The outcomes and stakeholder opinions with regard to the management of the research and development processes in the faculty are systematically monitored and evaluated with stakeholders to take necessary measures. The research outputs in the faculty are systematically monitored in accordance with the faculty’s internal quality assurance system and the local, regional and national development goals. The monitoring results are evaluated with stakeholders to take necessary measures.

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

##### *Maturity level*

1	2	3	4	5
The institution does not have a defined research policy, strategy and objectives.	The institution has a research policy, strategy and objectives that define its research approach, principles adopted in research activities, priorities in research and preferences in managing research resources. But no implementation or mechanism is available to put them into practice.	The institution has some practices carried out in line with its defined research policy, strategy and objectives. But the results of these practices are not evaluated.	The practices related to the research policy, strategy and objectives, which are adopted in all the fields of the institution, are systematically monitored and necessary measures that cover all the fields and programs are taken according to the monitoring results.	It is guaranteed in the institution that the research activities of the institution can create values and turn them into societal benefits in line with the institution’s research policy. This has been adopted by stakeholders through matured practices. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.
			Member 1	
			Member 2	
			Member 3	
			Member 4	
			Member 5	
			Member 6	
			CC Decision	
			IAC Decision	
			Monitor Decision	

### **Program's 2025 Goals**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Program's Scheduled Action Plan for 2025**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Assessments regarding planning:**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Assessments regarding the self-assessment report:**

The faculty maintains its current status as outlined in the 2025 report. Furthermore, it continues its improvement and development efforts.

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

#### *Maturity level*

1	2	3	4	5
The institution does not have plans for the management and organizational structure of its research-development processes.	The institution has developed plans for the management and organizational structure of its research-development processes. (the position in the non-interventional/interventional spectrum, the way of designing the motivation and guidance function, how short- and long-term goals are clearly defined, research management team and the definition of their tasks). But these plans are not put into practice or the existing practices do not cover all the fields.	Some results have been obtained by implementing the management and organizational structure of the research and development processes in accordance with the institutional preferences in all the fields. But their results are not monitored.	The outcomes and stakeholder opinions with regard to the management of the research and development processes in the institution are systematically monitored and evaluated with stakeholders to take necessary measures.	The management of research and development processes covers all the fields in the institution and is adopted and guaranteed in the entire institution with the help of integrative, sustainable and matured practices that are in line with the institutional goals (research policy, objectives and strategy). The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.
			Member 1	
			Member 2	
			Member 3	
			Member 4	
			Member 5	
			Member 6	
			CC Decision	
			IAC Decision	
			Monitor Decision	

### **Program's 2025 Goals**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Program's Scheduled Action Plan for 2025**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Assessments regarding planning:**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Assessments regarding the self-assessment report:**

The faculty maintains its current status as outlined in the 2025 report. Furthermore, it continues its improvement and development efforts.

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

#### *Maturity level*

1	2	3	4	5
The institution does not consider the local, regional or national development goals and changes in the planning, execution and management of its research activities.	The institution considers the local, regional and national development goals and changes in the planning, execution and management of its research activities. But these practices do not cover all the fields or are not reflected on the institution's research policy, objectives and strategy.	The institution considers the local, regional and national development goals and changes in the planning, execution and management of its research activities in all relevant fields. But the results of these practices are not monitored.	The research outputs in the institution are systematically monitored in accordance with the institution's internal quality assurance system and the local, regional and national development goals. The monitoring results are evaluated with stakeholders to take necessary measures.	The evaluation of the research activities' competition level (national/international) and socio-economic and cultural contributions to local, regional and national development goals is adopted and guaranteed in the entire institution. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.
			Member 1	
			Member 2	
			Member 3	
			Member 4	
			Member 5	
			Member 6	
			CC Decision	
			IAC Decision	
			Monitor Decision	

### **Program's 2025 Goals**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Program's Scheduled Action Plan for 2025**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Assessments regarding planning:**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Assessments regarding the self-assessment report:**

The faculty maintains its current status as outlined in the 2025 report. Furthermore, it continues its improvement and development efforts.

## C.2. Research Resources

The research resources in the faculty are managed in a way to support the primary research areas and encompass all the fields. The findings obtained from these practices are systematically monitored and the monitoring results are evaluated with stakeholders to take necessary measures and diversify resources according to the needs and demands. The faculty has intra-university resources of sufficient quality and quantity for its research and development activities. The faculty's researchers do benefit from these resources. But the results with regard to the use of these resources are not monitored. The findings obtained from the practices that support the use of extra-university resources in order to maintain the faculty's research and development activities in line with the institutional goals are systematically monitored and the monitoring results are evaluated with stakeholders to take necessary measures. The faculty has developed plans and defined processes regarding graduate programs that are in compliance with the faculty's research policy, objectives and strategy. But these plans and processes are not put into practice or the existing practices do not cover all the fields.

### C.2.1. Physical, technical and financial research resources

#### *Maturity level*

1	2	3	4	5
The institution does not have physical, technical and financial resources of sufficient quantity and quality to maintain its research and development activities.	The institution has developed plans to create physical, technical and financial resources of sufficient quantity and quality to maintain its research and development activities. But these plans are not put into practice or the existing practices do not cover all the fields.	The institution provides physical, technical and financial resources of sufficient quality and quantity by setting a balance among the fields in order to maintain its research and development activities. But the results with regard to the use of these resources are not monitored.	The research resources in the institution are managed in a way to support the primary research areas and encompass all the fields. The findings obtained from these practices are systematically monitored and the monitoring results are evaluated with stakeholders to take necessary measures and diversify resources according to the needs and demands.	The physical, technical and financial resources of sufficient quantity and quality in all the fields of the institution are managed in line with the institutional goals (research policy, objectives and strategy) and in a sustainable manner. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.
			Member 1	
			Member 2	
			Member 3	
			Member 4	
			Member 5	
			Member 6	
			CC Decision	
			IAC Decision	
			Monitor Decision	

### **Program's 2025 Goals**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Program's Scheduled Action Plan for 2025**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Assessments regarding planning:**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Assessments regarding the self-assessment report:**

The faculty maintains its current status as outlined in the 2025 report. Furthermore, it continues its improvement and development efforts.

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

#### *Maturity level*

1	2	3	4	5
The institution does not have intra-university resources for its research and development activities.	The institution has intra-university resources of for its research and development activities. But the institution's researchers do not benefit from these resources.	The institution has intra-university resources of sufficient quality and quantity for its research and development activities. The institution's researchers do benefit from these resources. But the results with regard to the use of these resources are not monitored.	The findings obtained regarding the use of intra-university resources in the institution are systematically monitored and the monitoring results are evaluated with stakeholders to take necessary measures and diversify resources according to the needs and demands.	The institution's researchers benefit from intra-university resources that encompass all the fields in line with the institutional goals (research policy, objectives and strategy) and in a sustainable manner. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.
		Member 1		
		Member 2		
		Member 3		
		Member 4		
		Member 5		
		Member 6		
		CC Decision		
		IAC Decision		
		Monitor Decision		

### **Program's 2025 Goals**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

### **Program's Scheduled Action Plan for 2025**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

### **Assessments regarding planning:**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

### **Assessments regarding the self-assessment report:**

The Faculty continues its activities in a manner that encompasses all of its units. However, it is not clear and understandable how balance is maintained among units in the allocation of resources, nor how stakeholder feedback and the outcomes of implemented activities are monitored and incorporated into improvement processes.

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

#### *Maturity level*

1	2	3	4	5
The institution does not use extra-university resources for its research and development activities.	The institution has developed plans to create extra-university resources and methods for the use of these resources. But these plans are not put into practice or the existing practices do not cover all the fields.	The institution has developed plans to create extra-university resources and methods for the use of these resources in order to maintain its research and development activities in line with the institutional goals, and the practices related to this encompass all the fields. But the results with regard to the practices and the use of these resources are not monitored.	The findings obtained from the practices that support the use of extra-university resources in order to maintain the institution's research and development activities in line with the institutional goals are systematically monitored and the monitoring results are evaluated with stakeholders to take necessary measures.	Sustainable and matured practices for the use of extra-university resources in order to maintain the institution's research and development activities in line with the institutional goals (research policy, objectives and strategy) are adopted and guaranteed in the entire institution. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions
			Member 1	
			Member 2	
			Member 3	
			Member 4	
			Member 5	
			Member 6	
			CC Decision	
			IAC Decision	
			Monitor Decision	

### **Program's 2025 Goals**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Program's Scheduled Action Plan for 2025**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Assessments regarding planning:**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Assessments regarding the self-assessment report:**

The faculty maintains its current status as outlined in the 2025 report. Furthermore, it continues its improvement and development efforts.

### C.2.4. Graduate programs in line with institutional research policy, objectives and strategy

#### *Maturity level*

1	2	3	4	5
The institution does not have graduate programs that are in compliance with the institution's research policy, objectives and strategy.	The institution has developed plans and defined processes regarding graduate programs that are in compliance with the institution's research policy, objectives and strategy. But these plans and processes are not put into practice or the existing practices do not cover all the fields.	The institution has graduate programs that are in compliance with the institution's research policy, objectives and strategy. But the results of these practices are not monitored.	The outcomes of the graduate programs in the institution that are in compliance with the institution's research policy, objectives and strategy are periodically monitored and the monitoring results are evaluated with stakeholders to take necessary measures.	Integrated and matured practices regarding the graduate programs in order to maintain the institution's research and development activities in line with the institutional goals (research policy, objectives and strategy) are adopted and guaranteed in the entire institution. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.
	Member 1			
	Member 2			
	Member 3			
	Member 4			
	Member 5			
	Member 6			
	CC Decision			
	IAC Decision			
		Monitor Decision		

### **Program's 2025 Goals**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

### **Program's Scheduled Action Plan for 2025**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

### **Assessments regarding planning:**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

### **Assessments regarding the self-assessment report:**

The Faculty has undertaken efforts to align its graduate programs with its program objectives. In this context, it has established a non-thesis master's program in an area that addresses regional needs. In addition, it has developed incentive programs to encourage thesis research on topics that are important to the region. However, it is considered that more time is needed to monitor the process and evaluate its outcomes for continuous improvement.

### C.3. Research Competencies

*The faculty's practices for the evaluation and improvement of the teaching staff's research competencies are periodically monitored and the monitoring results are evaluated with stakeholders to take necessary measures. The faculty has developed plans and defined processes to have multiple research activities such as establishing cooperation or participating in intra- or inter- institutional joint programs, joint research units and research networks at national and international levels. But these plans and processes are not put into practice.*

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

##### ***Maturity level***

1	2	3	4	5
The institution does not have a mechanism for the evaluation and improvement of the teaching staff's research competencies (specialties, background, numbers and distribution).	The institution has developed plans and defined processes for the evaluation and improvement of the teaching staff's research competencies. But these plans and processes are not put into practice or the existing practices do not cover all the fields.	The institution's practices for the evaluation and improvement of the teaching staff's research competencies encompass all the fields. But the results of these practices are not monitored.	The institution's practices for the evaluation and improvement of the teaching staff's research competencies are periodically monitored and the monitoring results are evaluated with stakeholders to take necessary measures.	Sustainable and matured practices for the evaluation and improvement of the teaching staff's research competencies in line with the institutional goals (research policy, objectives and strategy) are adopted and guaranteed in the entire institution. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.
			Member 1	
			Member 2	
			Member 3	
			Member 4	
			Member 5	
			Member 6	
			CC Decision	
			IAC Decision	
			Monitor Decision	

### **Program's 2025 Goals**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Program's Scheduled Action Plan for 2025**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Assessments regarding planning:**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Assessments regarding the self-assessment report:**

The faculty maintains its current status as outlined in the 2025 report. Furthermore, it continues its improvement and development efforts.

### C.3.2. National and international Joint programs and joint research units

#### *Maturity level*

1	2	3	4	5
The institution does not have multiple research activities such as establishing cooperation or participating in intra- or inter-institutional joint programs, joint research units and research networks at national and international levels.	The institution has developed plans and defined processes to have multiple research activities such as establishing cooperation or participating in intra- or inter-institutional joint programs, joint research units and research networks at national and international levels. But these plans and processes are not put into practice.	The institution's practices regarding multiple research activities such as establishing cooperation or participating in intra- or inter-institutional joint programs, joint research units and research networks at national and international levels encompass all the fields. But the results of these practices are not monitored.	The institution's practices regarding multiple research activities such as establishing cooperation or participating in intra- or inter-institutional joint programs, joint research units and research networks at national and international levels are periodically monitored and the monitoring results are evaluated with stakeholders to take necessary measures.	Sustainable and matured practices for the networks research activities such as establishing cooperation or participating in intra- or inter-institutional joint programs, joint research units and research networks at national and international levels in line with the institutional goals (research policy, objectives and strategy) are adopted and guaranteed in the entire institution. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.
	Member 1			
	Member 2			
	Member 3			
	Member 4			
	Member 5			
	Member 6			
	CC Decision			
	IAC Decision			
	Monitor Decision			

### **Program's 2025 Goals**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 2.

### **Program's Scheduled Action Plan for 2025**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 2.

### **Assessments regarding planning:**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 2.

### **Assessments regarding the self-assessment report:**

The Faculty should conduct its international bilateral cooperation activities in line with its strategic goals and objectives, ensure that these objectives are implemented across all units (including mobility programs, projects, joint publications, and joint graduate programs), and systematically monitor these activities so that the results can be evaluated and improved when necessary.

### C.4. Research Performance

The faculty's practices regarding the defined processes for the monitoring and review of the teaching staff's research and development performance (directives, regulations, process definitions, assessment tools, guidelines, appreciation- recognition systems, incentive mechanisms etc.) encompass all the fields. But the results of these practices are not monitored or employed in decision-making processes. The faculty's practices for the monitoring and review of the research performance encompass all the fields (including the research centers). But the results of these practices are not monitored or employed in decision-making processes. The faculty has developed plans and defined processes for the monitoring of the research budget performance. But these plans and processes are not put into practice or the existing practices do not cover all the fields.

#### C.4.1. Performance review of teaching staff

##### *Maturity level*

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

		Member 6		
		CC Decision		
		IAC Decision		
		Monitor Decision		

### Program's 2025 Goals

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

### Program's Scheduled Action Plan for 2025

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

### Assessments regarding planning:

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

### Assessments regarding the self-assessment report:

The Faculty continues its activities in a manner that encompasses all of its units. However, it is not clear and understandable how stakeholder feedback and the outcomes of implemented activities are monitored and incorporated into improvement processes.

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

#### *Maturity level*

1	2	3	4	5
The institution does not have any practice for the monitoring and review of the research performance.	The institution has developed plans And defined processes for the monitoring and review of the research performance. But these plans and processes are not put into practice or the existing practices donot cover all the fields.	The institution’s practices for the monitoring and review of the research performance encompass all the fields (including the research centers). But the results of these practices are not monitored or employed in decision-making processes.	The research performance of all the fields in the institution is monitored, reviewed and employed in decision-making processes (performance-based incentive-appreciation mechanisms etc.). The practices related to this aspect are periodically monitored and the monitoring results are evaluated with stakeholders to take necessary measures.	Sustainable and matured practices for the monitoring and review of the research performance in all the fields in line with the institutional goals (research policy, objectives and strategy) are adopted and guaranteed in the entire institution. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.
		Member 1		
		Member 2		
		Member 3		
		Member 4		
		Member 5		
		Member 6		
		CC Decision		
		IAC Decision		
		Monitor Decision		

### **Program's 2025 Goals**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

### **Program's Scheduled Action Plan for 2025**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

### **Assessments regarding planning:**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

### **Assessments regarding the self-assessment report:**

The Faculty continues its activities in a manner that encompasses all of its units. However, it is not clear and understandable how stakeholder feedback and the outcomes of implemented activities are monitored and incorporated into improvement processes.

### C.4.3. Research budget performance

#### *Maturity level*

1	2	3	4	5
The institution does not have any practice for the monitoring of the research budget performance.	The institution has developed plans and defined processes for the monitoring of the research budget performance. But these plans and processes are not put into practice or the existing practices do not cover all the fields.	The institution has practices for the monitoring and review of the research budget performance but the results of these practices are not monitored or employed in decision-making processes.	The research budget performance of the institution is monitored, reviewed and employed in decision-making processes (budget distribution etc.). The practices related to this aspect are periodically monitored and the monitoring results are evaluated with stakeholders to take necessary measures.	Sustainable and matured practices for the monitoring and review of the research budget performance in all the units in line with the institutional goals (research policy, objectives and strategy) are adopted and guaranteed in the entire institution. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.
	Member 1			
	Member 2			
	Member 3			
	Member 4			
	Member 5			
	Member 6			
	CC Decision			
	IAC Decision			
	Monitor Decision			

### **Program's 2025 Goals**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 2.

### **Program's Scheduled Action Plan for 2025**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 2.

### **Assessments regarding planning:**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 2.

### **Assessments regarding the self-assessment report:**

Although the Faculty has limited internal resources available to support research activities, it is not clear how these resources are distributed equitably among units, what mechanisms have been developed to increase external funding and resources, or how the outputs generated through the allocated resources are monitored, evaluated, and improved.

### D.1. Social Contribution Strategy

The practices related to the faculty’s social contribution policy, objectives and strategy that are adopted by all the fields in the faculty are systematically monitored. Necessary measures that encompass all the fields and programs are taken according to the monitoring results. Some results have been obtained in the faculty by implementing the management and organizational structure of the social contribution processes in accordance with the institutional preferences in all the fields. But their results are not monitored.

#### D.1.1. Social contribution policy, objectives and strategy

##### *Maturity level*

1	2	3	4	5
The institution does not have a defined social contribution policy, objectives and strategy.	The institution has a social contribution policy, objectives and strategy that express its principles, priorities and preferences in the management of its resources in the context of its social contribution activities. But any mechanisms or practices to implement these are not available.	The institution has some practices regarding its defined social contribution policy, objectives and strategy. But the results of these practices are not evaluated.	The practices related to the institution’s social contribution policy, objectives and strategy that are adopted by all the fields in the institution are systematically monitored. Necessary measures that encompass all the fields and programs are taken according to the monitoring results.	It is guaranteed in the institution that the social contribution activities of the institution can create values and turn them into societal benefits in line with the institution’s social contribution policy. This has been adopted by stakeholders through matured practices. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.
			Member 1	
			Member 2	
			Member 3	
			Member 4	
			Member 5	
			Member 6	
			CC Decision	
			IAC Decision	
			Monitor Decision	

### **Program's 2025 Goals**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Program's Scheduled Action Plan for 2025**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Assessments regarding planning:**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Assessments regarding the self-assessment report:**

The faculty maintains its current status as outlined in the 2025 report. Furthermore, it continues its improvement and development efforts.

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

### *Maturity level*

1	2	3	4	5
The institution does not have plans for the management and organizational structure of its social contribution processes.	The institution has developed plans for the management and organizational structure (processes, definition of tasks etc.) of its social contribution processes in relation to the local, regional and national development goals and in integration with the other processes (learning and teaching, research). But these plans are not put into practice or the existing practices do not cover all the units.	Some results have been obtained in the institution by implementing the management and organizational structure of the social contribution processes in accordance with the institutional preferences in all the fields. But their results are not monitored.	The results and stakeholder opinions with regard to the management of the social contribution processes in the institution are systematically monitored in compliance with the institution's internal quality assurance system and evaluated with stakeholders to take necessary measures.	The management of social contribution processes covers all the fields in the institution and is adopted and guaranteed in the entire institution with the help of integrative, sustainable and matured practices that are in line with the institutional goals. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.
		Member 1		
		Member 2		
		Member 3		
		Member 4		
		Member 5		
		Member 6		
		CC Decision		
		IAC Decision		
		Monitor Decision		

### **Program's 2025 Goals**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

### **Program's Scheduled Action Plan for 2025**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

### **Assessments regarding planning:**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

### **Assessments regarding the self-assessment report:**

The Faculty continues its activities in a manner that encompasses all of its units. However, it is not clear and understandable how stakeholder feedback and the outcomes of implemented activities are monitored and incorporated into improvement processes.

## D.2. Social Contribution Resources

*The faculty provides physical, technical and financial resources of suitable quality and quantity in order to maintain its social contribution activities. But the results with regard to the use of these resources are not monitored.*

### D.2.1. Resources

#### **Maturity level**

1	2	3	4	5
The institution does not have physical, technical and financial resources of suitable quantity and quality to maintain its social contribution activities.	The institution has developed plans to create physical, technical and financial resources of suitable quantity and quality to maintain its social contribution activities. But these plans are not put into practice or the existing practices do not cover all the fields.	The institution provides physical, technical and financial resources of suitable quality and quantity in order to maintain its social contribution activities. But the results with regard to the use of these resources are not monitored.	The physical, technical and financial resources in the institution are managed in a way to support the social contribution activities and encompass all the fields. The findings obtained from these practices are systematically monitored and the monitoring results are evaluated with stakeholders to take necessary measures and diversify resources according to the needs and demands.	The physical, technical and financial resources of suitable quantity and quality in the institution are managed in line with the institutional goals (social contribution objectives and strategy) and in a sustainable manner. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.
		Member 1		
		Member 2		
		Member 3		
		Member 4		
		Member 5		
		Member 6		
		CC Decision		
		IAC Decision		
		Monitor Decision		

### **Program's 2025 Goals**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

### **Program's Scheduled Action Plan for 2025**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

### **Assessments regarding planning:**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

### **Assessments regarding the self-assessment report:**

The Faculty continues its activities in a manner that encompasses all of its units. However, it is not clear and understandable how stakeholder feedback and the outcomes of implemented activities are monitored and incorporated into improvement processes.

### D.3. Social Contribution Performance

The social contribution performance of all the fields in the faculty is monitored, reviewed and employed in decision-making processes. The practices related to this aspect are periodically monitored and the monitoring results are evaluated with stakeholders to take necessary measures.

#### D.3.1. Monitoring and improvement of social contribution performance

##### *Maturity level*

1	2	3	4	5
The institution does not have any practice for the monitoring and improvement of its social contribution performance.	The institution has developed plans and defined processes for the monitoring and improvement of its social contribution performance. But these plans and processes are not put into practice or the existing practices do not cover all the fields.	The institution's practices for the monitoring and improvement of its social contribution performance encompass all the fields. But the results of these practices are not monitored or employed in decision-making processes.	The social contribution performance of all the fields in the institution is monitored, reviewed and employed in decision-making processes. The practices related to this aspect are periodically monitored and the monitoring results are evaluated with stakeholders to take necessary measures.	Sustainable and matured practices for the monitoring and review of the social contribution performance in all the fields in line with the institutional goals (social contribution policy, objectives and strategy) are adopted and guaranteed in the entire institution. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.
			Member 1	
			Member 2	
			Member 3	
			Member 4	
			Member 5	
			Member 6	
			CC Decision	
			IAC Decision	
			Monitor Decision	

### **Program's 2025 Goals**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Program's Scheduled Action Plan for 2025**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Assessments regarding planning:**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Assessments regarding the self-assessment report:**

The faculty maintains its current status as outlined in the 2025 report. Furthermore, it continues its improvement and development efforts.

## E.1. Structure of Management and Administrative Units

The faculty's management model and administrative structure that guarantee the achievement of its mission and strategic objectives have been formed in accordance with the processes and encompass all the fields/units. Some results have been obtained from the related practices but these results are not monitored. The faculty has defined processes for its practices regarding learning and teaching, research- development, social contribution and governance system. But the existing practices in this regard are not compatible with the processes or do not cover all the units.

### E.1.1. Management model and administrative structure

#### *Maturity level*

1	2	3	4	5
The institution does not have a management model and organizational structure that are in compliance with its mission and enable the achievement of the strategic objectives.	The institution's management model and administrative structure that guarantee the achievement of its mission and strategic objectives have been defined with a clear explanation of all the processes and authorities, duties and responsibilities in accordance with the processes. But this model has not been put into practice or the existing practices related to this model do not cover all the units.	The institution's management model and administrative structure that guarantee the achievement of its mission and strategic objectives have been formed in accordance with the processes and encompass all the fields/units. Some results have been obtained from the related practices but these results are not monitored.	The findings obtained from the practices related to the institution's management model and administrative structure that encompass all the units and fields are systematically monitored and stakeholder opinions are received in this regard. The monitoring results are evaluated with stakeholders to take necessary measures and make updates according to the needs and demands.	The institution's management model and administrative structure (institutional approach, traditions and preferences in the framework of legislative regulations), which guarantee diversity, effective decision-making, adaptability and stakeholder representation and provide suitable ground for the realization of the institutional goals, are adopted in the entire institution. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.
		Member 1		
		Member 2		
		Member 3		
		Member 4		
		Member 5		
		Member 6		
		CC Decision		

		IAC Decision		
		Monitor Decision		

**Program's 2025 Goals**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

**Program's Scheduled Action Plan for 2025**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

**Assessments regarding planning:**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

**Assessments regarding the self-assessment report:**

The Faculty continues its activities in a manner that encompasses all of its units. However, it is not clear and understandable how stakeholder feedback and the outcomes of implemented activities are monitored and incorporated into improvement processes.

## E.1.2. Process management

### *Maturity level*

1	2	3	4	5
The institution does not have defined processes for its practices regarding learning and teaching, research-development, social contribution and governance system.	The institution has defined processes for its practices regarding learning and teaching, research-development, social contribution and governance system. But the existing practices in this regard are not compatible with the processes or do not cover all the units.	All the processes in the institution are defined in a way to encompass all the units and fields and all the practices are implemented in line with the processes. But the process performance results are not monitored or employed in decision-making processes.	The results regarding the processes that are managed in a way to encompass all the units and fields in the institution are systematically monitored with performance indicators and stakeholder opinions are received in this regard. The monitoring results are evaluated with stakeholders to take necessary measures and make updates according to the needs and demands.	The institution's process management model that is in compliance with the strategic objectives and encompasses all the fields is adopted and guaranteed in the entire institution through sustainable and matured practices. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.
	Member 1			
	Member 2			
	Member 3			
	Member 4			
	Member 5			
	Member 6			
	CC Decision			
	IAC Decision			
	Monitor Decision			

### **Program's 2025 Goals**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 2.

### **Program's Scheduled Action Plan for 2025**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 2.

### **Assessments regarding planning:**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 2.

### **Assessments regarding the self-assessment report:**

Under this heading, rather than focusing on the activities carried out, the Faculty is expected to explain how it has designed its quality assurance cycles related to education, research, governance, and societal contribution, as well as the mechanisms through which these processes will be implemented, monitored, and evaluated.

## E.2. Resource Management

The faculty has some practices for the management of human resources in accordance with its human resources policy and strategic objectives and certain results have been obtained from them. But the results of these practices are not monitored or employed in decision-making processes. The faculty has defined processes for the management of financial resources. But these processes are not put into practice, or the existing practices do not cover all the fields.

### E.2.1. Human resources management

#### *Maturity level*

1	2	3	4	5
The institution does not have a defined policy or process for the management of human resources.	The institution has a defined policy and processes for the management of human resources. But no implementation or mechanism is available to put them into practice.	The institution has some practices for the management of human resources in accordance with its human resources policy and strategic objectives and certain results have been obtained from them. But the results of these practices are not monitored or employed in decision-making processes.	The results regarding the processes for the management of human resources that encompass all the units in the institution are systematically monitored and stakeholder opinions are received in this regard. The monitoring results are evaluated with stakeholders to take necessary measures.	The institution's human resources management model that is in compliance with the strategic objectives and encompasses all the fields is adopted and guaranteed in the entire institution through sustainable and matured practices. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.
		Member 1		
		Member 2		
		Member 3		
		Member 4		
		Member 5		
		Member 6		
		CC Decision		
		IAC Decision		
		Monitor Decision		

### **Program's 2025 Goals**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

### **Program's Scheduled Action Plan for 2025**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

### **Assessments regarding planning:**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

### **Assessments regarding the self-assessment report:**

The Faculty continues its activities in a manner that encompasses all of its units. However, it is not clear and understandable how stakeholder feedback and the outcomes of implemented activities are monitored and incorporated into improvement processes.

## E.2.2. Management of financial resources

### *Maturity level*

1	2	3	4	5
The institution does not have defined processes for the management of financial resources.	The institution has defined processes for the management of financial resources. But these processes are not put into practice, or the existing practices do not cover all the fields.	The institution has some practices for the management of financial resources in accordance with its strategic objectives and defined processes and certain results have been obtained from them. But the results of these practices are not monitored or employed in decision-making processes.	The results regarding the practices for the management of financial resources that encompass all the fields in the institution are systematically monitored and stakeholder opinions are received in this regard. The monitoring results are evaluated with stakeholders to take necessary measures.	The institution's management of financial resources that is in compliance with the strategic objectives and encompasses all the fields is adopted and guaranteed in the entire institution through sustainable and matured practices. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.
	Member 1			
	Member 2			
	Member 3			
	Member 4			
	Member 5			
	Member 6			
	CC Decision			
	IAC Decision			
		Monitor Decision		

### **Program's 2025 Goals**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

### **Program's Scheduled Action Plan for 2025**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

### **Assessments regarding planning:**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

### **Assessments regarding the self-assessment report:**

The faculty has defined processes for the management of financial resources. The faculty has some practices for the management of financial resources in accordance with its strategic objectives and defined processes and certain results have been obtained from them. But the results of these practices are not monitored or employed in decision-making processes.

### E.3. Information Management System

The results regarding the use of the integrated information management system that supports all the processes are systematically monitored and stakeholder opinions are received in this regard. The monitoring results are evaluated with stakeholders to take necessary measures and make updates according to the needs and demands. The faculty has integrated practices to provide information security and reliability and some results have been obtained from these practices. But the results of these practices are not monitored or used in decision-making mechanisms.

#### E.3.1. Integrated information management system

##### *Maturity level*

1	2	3	4	5
The institution does not have any information management system to support the acquisition, storage and usage of information.	The institution has information management systems to support the acquisition, storage and usage of information. But these systems are not integrated to each other or do not cover all the fields.	The institution has an integrated information management system that covers all the fields and supports all the processes (learning and teaching, research and development, social contribution, quality assurance) and some practices are available for the use of this system. But the information system is not employed in decision-making processes and the results regarding the use of the system are not monitored.	The results regarding the use of the integrated information management system that supports all the processes are systematically monitored and stakeholder opinions are received in this regard. The monitoring results are evaluated with stakeholders to take necessary measures and make updates according to the needs and demands.	A sustainable and matured integrated information management system that is in line with the institutional goals is adopted and guaranteed in the entire institution. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.
			Member 1	
			Member 2	
			Member 3	
			Member 4	
			Member 5	
			Member 6	
			CC Decision	
			IAC Decision	
			Monitor Decision	

### **Program's 2025 Goals**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Program's Scheduled Action Plan for 2025**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Assessments regarding planning:**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Assessments regarding the self-assessment report:**

The faculty maintains its current status as outlined in the 2025 report. Furthermore, it continues its improvement and development efforts.

### E.3.2. Information security and reliability

#### *Maturity level*

1	2	3	4	5
The institution does not have any practice to provide information security and reliability.	The institution has defined processes and plans to provide information security and reliability. But these processes and plans are not put into practice or the existing practices do not cover all the fields.	The institution has integrated practices to provide information security and reliability and some results have been obtained from these practices. But the results of these practices are not monitored or used in decision-making mechanisms.	The practices to provide information security and reliability in the institution are systematically monitored and the monitoring results are evaluated with stakeholders to take necessary measures.	The security and reliability of the institutional information is adopted and guaranteed in the entire institution with sustainable and matured practices. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.
		Member 1		
		Member 2		
		Member 3		
		Member 4		
		Member 5		
		Member 6		
		CC Decision		
		IAC Decision		
		Monitor Decision		

### **Program's 2025 Goals**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

### **Program's Scheduled Action Plan for 2025**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

### **Assessments regarding planning:**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

### **Assessments regarding the self-assessment report:**

The Faculty continues its activities in a manner that encompasses all of its units. However, it is not clear and understandable how stakeholder feedback and the outcomes of implemented activities are monitored and incorporated into improvement processes.

## E.4. Support Services

The faculty has practices for the planning, evaluation and improvement of the quality levels of all the outsourced goods and support services in accordance with the internal quality assurance system. But the results of these practices are not monitored or employed in decision-making processes.

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

#### *Maturity level*

1	2	3	4	5
The institution does not have any defined criteria or processes to evaluate the suitability and quality of the outsourced goods and support services.	The institution has defined processes and mechanisms (procurement process, suitability and quality criteria etc.) to guarantee the suitability, quality and continuity of the outsourced goods and support services. But these processes are not put into practice or the existing practices do not cover all the fields.	The institution has practices for the planning, evaluation and improvement of the quality levels of all the outsourced goods and support services in accordance with the internal quality assurance system. But the results of these practices are not monitored or employed in decision-making processes.	The institution maintains close cooperation with suppliers to guarantee the quality of all the outsourced goods and services. The performance and satisfaction levels of suppliers are systematically monitored and evaluated with stakeholders to take necessary measures.	The institution manages a supply chain to guarantee the quality levels of the outsourced goods and services in line with the institutional goals. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.
		Member 1		
		Member 2		
		Member 3		
		Member 4		
		Member 5		
		Member 6		
		CC Decision		
		IAC Decision		
		Monitor Decision		

### **Program's 2025 Goals**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

### **Program's Scheduled Action Plan for 2025**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

### **Assessments regarding planning:**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

### **Assessments regarding the self-assessment report:**

The Faculty continues its activities in a manner that encompasses all of its units. However, it is not clear and understandable how stakeholder feedback and the outcomes of implemented activities are monitored and incorporated into improvement processes.

## E.5. Public Information and Accountability

The findings regarding the faculty's public information activities are monitored and stakeholder opinions are received in this regard. The monitoring results are evaluated with stakeholders to take necessary measures. Some results have been obtained from the practices related to the faculty's accountability principles and processes. But the results of these practices are not monitored or employed in decision-making processes.

### E.5.1. Public information

#### *Maturity level*

1	2	3	4	5
The institution does not have defined principles and mechanisms for informing the public on its activities.	The institution has designated its public information methods and processes and defined a policy to adopt informing the public on its activities as a principle. But this policy and the processes are not put into practice or the existing practices do not cover all the fields.	Some results have been obtained from the practices of public information that cover all the fields in line with the principles and processes designated to inform the public. But the results of these practices are not monitored or employed in decision-making processes.	The findings regarding the institution's public information activities are monitored and stakeholder opinions are received in this regard. The monitoring results are evaluated with stakeholders to take necessary measures.	The institution's public information activities are guaranteed and adopted in the entire institution with sustainable and matured practices in line with the institutional goals and values. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.
			Member 1	
			Member 2	
			Member 3	
			Member 4	
			Member 5	
			Member 6	
			CC Decision	
			IACDecision	
			Monitor Decision	

### **Program's 2025 Goals**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Program's Scheduled Action Plan for 2025**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Assessments regarding planning:**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 4.

### **Assessments regarding the self-assessment report:**

The faculty maintains its current status as outlined in the 2025 report. Furthermore, it continues its improvement and development efforts.

## E.5.2. Accountability methods

### *Maturity level*

1	2	3	4	5
The institution does not have accountability methods or mechanisms.	The institution has adopted accountability as a principle and designated its accountability methods and processes. But these principles and processes are not put into practice or the existing practices do not cover all the fields.	Some results have been obtained from the practices related to the institution's accountability principles and processes. But the results of these practices are not monitored or employed in decision-making processes.	The findings obtained from the institution's accountability activities are monitored and stakeholder opinions are received in this regard. The monitoring results are evaluated with stakeholders to take necessary measures.	The institution's accountability principles are guaranteed and adopted in the entire institution with sustainable and matured practices in line with the institutional goals and values. The institution has specific and innovative implementations in this regard, some of which serve as a model for other institutions.
		Member 1		
		Member 2		
		Member 3		
		Member 4		
		Member 5		
		Member 6		
		CC Decision		
		IAC Decision		
		Monitor Decision		

### **Program's 2025 Goals**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

### **Program's Scheduled Action Plan for 2025**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

### **Assessments regarding planning:**

The 2025 program objectives and action plans have not been included in the self-evaluation report. A program objective should be established for each sub-criterion, along with a corresponding action plan. Therefore, it is not possible to conduct an evaluation against the plan. Since no objective or action plan has been provided, the sub-criterion should be assigned a maturity level of 1. However, based on the practices described in the report, the maturity level has been assessed as 3.

### **Assessments regarding the self-assessment report:**

The Faculty continues its activities in a manner that encompasses all of its units. However, it is not clear and understandable how stakeholder feedback and the outcomes of implemented activities are monitored and incorporated into improvement processes.