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**APHEA INSTITUTIONAL ACCREDITATION Evaluation**

|  |  |
| --- | --- |
| Institution visited: |  |
| Date of visit: |  |
| Your role: |  |

We would appreciate your assigning a numerical value according to your level of satisfaction about each item according to a Likert scale:

1 = Strongly disagree

2 = Disagree

3 = Neutral

4 = Agree

5 = Strongly agree

**A. PROCEDURAL ARRANGEMENTS**

|  |  |
| --- | --- |
|  | Value |
| APHEA staff managed the procedural aspects of the accreditation process - from initial notification to site-visit  |  |
| Comments: |
|  |
| The process was consistent with information provided in the procedures manual. |  |
| Comments: |
|  |
| APHEA provided sufficient staff consultation throughout the process. |  |
| Comments: |

|  |  |  |
| --- | --- | --- |
| Do you suggest any procedural changes? (delete as appropriate) | **Yes** | **No** |
| If yes, please explain: |

**B. SELF-EVALUATION PROCESS**

|  |  |
| --- | --- |
|  | Value |
| The self-evaluation process was beneficial to the institution’s constituents (students, faculty, administration, etc.) |  |
| Comments: |
|  |
| Given its benefits, the self-evaluation process required a reasonable expenditure of resources.  |  |
| Comments: |
|  |
| The criteria provided a useful basis for organizing our self- evaluation.  |  |
| Comments: |
|  |
| The criteria by which the institution is evaluated are appropriate, clear and fair. |  |
| Comments: |
|  |
| The criteria are valid indicators for judging quality of an institution? |  |
| Comments: |

|  |  |  |
| --- | --- | --- |
| Do you suggest any changes in the accreditation criteria? | **Yes** | No |
| If yes, please explain: |

**C. ON-SITE VISIT**

|  |  |
| --- | --- |
|  | Value |
| The composition of the review team was appropriate for the evaluation of the institution. |  |
| Comments: |
|  |
| The team was sufficiently prepared to conduct the on-site evaluation of our institution.  |  |
| Comments: |
|  |
| The site visitors addressed the major issues and problems identified in our self-evaluation during the on-site interviews.  |  |
| Comments: |

|  |  |  |
| --- | --- | --- |
| Do you suggest any changes in the structure or conduct of the visit? (delete as appropriate) | **Yes** | **No** |
| If yes, please explain: |

**D. OVERALL EVALUATION**

|  |  |
| --- | --- |
|  | Value |
| The final oral presentation gave an accurate and fair representation of our institution. |  |
| Comments: |
|  |
| In what specific ways were the self-evaluation process and on-site visit beneficial to your school or programme? |
| Comments:  |
|  |
| In what ways were they not beneficial? |
| Comments:  |
|  |
| Please provide any additional comments you wish to make about the accreditation process. |
| Comments:  |

**Thank you very much for your comments!**

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