MQA-01/02 2017 (PROVISIONAL & FULL ACCREDITATION)

PART A: GENERAL INFORMATION ON THE HIGHER EDUCATION PROVIDER

Part A of the MQA-01 (2017) and MQA-02 (2017) of this Code of Practice for Programme Accreditation (COPPA) seeks general information on the Higher Education Provider (HEP).

1.	Name of the Higher Education Provider	(HEP)	:

- 2. Date of establishment:
- 3. Date of registration (if applicable):
- 4. Reference no. of registration (if applicable):
- 5. Name of the chief executive officer (however designated):
- 6. Address:
 - i. Address:
 - ii. Correspondence (if different from above):
- 7. Tel.:
- 8. Fax:
- 9. Email:
- 10. Website:
- 11. Names and addresses of Faculties/Schools/Departments/Centres (if located outside the main campus):
 - i.
 - ii.
 - iii.
- 12. Names and addresses of branch campuses (if applicable):
 - i.
 - ii.
 - iii.
- 13. List of Faculties/Schools/Departments/Centres in the HEP (and its branch campuses) and number of programmes offered:

No.	Name of Faculties/Schools/ Departments/Centres/ MOE- approved Regional Centres	Location	Number of Programmes Offered

14.	Details	of a	all progra	ammes	currently	conducted	by	the	HEP	(and	its	branch
	campus	ses i	including	any off	shore arra	angements)	:					

No.	Name of Programme	MQF Level	Awarding Body	Location conducted	Type of Programme (collaboration/ own/ external programme/ joint award/ joint degree)	Approving Authority and Date of Approval	Date and Duration of Accreditation by MQA/ Professional Body	Student Enrolment	Programme Status*

^{*} For public university, indicate status of each programme as follows: active, jumud, beku, lupus or penawaran semula.
* For private HEP, indicate status of each programme as follows: active or

15. Total number of academic staff:

	Academic	Num	ber of Staff	
Status	Qualification	Malaysian	Non- Malaysian	Total
Full-time (all	Doctorate (Level 8)			
types of	Masters (Level 7)			
designation, including	Bachelors (Level 6 - including professional qualification)			
those on 1	Diploma (Level 4)			
year contract	Others			
or more)	Sub-total			
Part-time	Doctorate (Level 8)			
	Masters (Level 7)			
	Bachelors (Level 6 - including professional qualification)			
	Diploma (Level 4)			
	Others			
	Sub-total			
	Total			

16. Total number of students:

	Number of students		Total	Disabled Student	
	Local	International	Total	Disabled Studerit	
Male					
Female					
Total					

inactive (approved but currently not conducted).

17. Student attrition:

	Year	Total students (A)	Number of students leaving the institution without graduating (B)	Attrition Rate (%) (B/A)*100	Main reasons for leaving
Past 1 year					
Past 2 years					
Past 3 years					

Note: The attrition rate should be provided for each individual year.

18. Total number of administrative and support staff:

No.	Classification by Function (e.g.: technical, counselling, financial, IT, human resource, etc.)	Number of Staff

19. Provide audited financial statement for the last three consecutive years:

V	Financial statement (RM)				
Year	Profit/Surplus	Loss/Deficit			
Past 1 year					
Past 2 years					
Past 3 years					

Note: Profit and loss reporting is based on after tax.

- 20. Provide the latest, dated and signed organisational chart of the HEP.
- 21. Contact person for the submission:
 - i. Name and Title:
 - ii. Designation:
 - iii. Tel.:
 - iv. Fax:
 - v. Email: