|  |
| --- |
| Program: *Enter Program Name.* |
| Program Code (as per Saudi Standard Classification of Educational Levels and Specializations): *Enter Program Code.* |
| Qualification Level: *Enter* *Qualification Level.* |
| Department: *Enter Department Name.* |
| College:  *Enter College Name*. |
| Institution: *Enter Institution Name.* |
| Academic Year: *Enter the* *Academic Year of the Report.* |
| Main Location: *Enter the* *Main Location of the Program.* |
| Branches offering the program (if any):* ……………………………………………..
* ……………………………………………..
* ……………………………………………..
 |

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# **ِA.Improvement Plans from the Previous Year**

|  |  |  |
| --- | --- | --- |
| **Priorities for Improvement** | **Percentage of Completion** | **Comments** |
|  |  |  |
|  |  |  |

# **B. Program Statistics**

|  |  |
| --- | --- |
| **Item** | **Number** |
| Number of students enrolled in the program |  |
| Number of students who started the program (in reporting year) |  |
| Number of students who completed the program |  |
| Number of students who completed an intermediate award specified as an early exit point (if any) |  |
|  Number of Faculty |  |
| Student/Faculty Ratio |  |

# **C. Program Assessment**

## **1. Program Learning Outcomes Assessment and analysis according to PLOs assessment plan \***

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **#** | **Program Learning Outcomes** | **Assessment Methods****(Direct and Indirect)** | **Targeted Performance (%)** | **Assessment Results** |
| **Knowledge and Understanding** |
| K1 |  |  |  |  |
| K2 |  |  |  |  |
| K3 |  |  |  |  |
| K... |  |  |  |  |
| **Skills** |
| S1 |  |  |  |  |
| S2 |  |  |  |  |
| S3 |  |  |  |  |
| S.. |  |  |  |  |
| **Values, autonomy, and responsibility** |
| V1 |  |  |  |  |
| V2 |  |  |  |  |
| V3 |  |  |  |  |
| V.. |  |  |  |  |

\*Attach a separate report on the program learning outcomes assessment results for male and female sections and each branch (**if any**).

|  |
| --- |
| **Strengths:** |
|  |
| **Aspects that need improvement with priorities:** |
|  |
|  |

## **2. Students Evaluation of Courses**

| **Course Code** | **Course Title** | **Number of Students Who Evaluated the Course** | **Percentage of Participants** | **Evaluation Results**  | **Developmental Recommendations**  |
| --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

## **3. Students' Evaluation of Program Quality**

|  |  |
| --- | --- |
| **Evaluation Date:** | **Number of Participants:** |
| **Students Feedback** | **Program Response** |
| Strengths:*
*
 |  |
| Areas of Improvement:*
*
 |  |
| Suggestions for improvement:*
*
 |  |

## **4. Scientific research and innovation during the reporting year**

|  |  |
| --- | --- |
| **Activities Implemented** | **Number** |
| Published scientific research |  |
| Current research projects |  |
| conferences organized by the program |  |
| Seminars held by the program |  |
| Conferences attendees |  |
| Seminars attendees |  |

**Discussion and analysis of scientific research and innovation activities:**

|  |
| --- |
|  |

## **5. Community Partnership**

|  |  |
| --- | --- |
| **Activities Implemented** | **Brief Description\*** |
|  |  |
|  |  |
|  |  |
|  |  |

\* including timing of implementation, number of participants, and outcomes.

**Comment on community partnership activities\*\***

|  |
| --- |
|  |

\*\* including overall evaluation of the program's performance in these activities (if any).

##

## **6. Other Evaluation (if any)**

(e.g., independent reviewer, program advisory committee, and stakeholders (e.g., faculty members, alumni, and employers)

|  |  |  |
| --- | --- | --- |
| **Evaluation method:** | **Date:** | **Number of Participants:** |
| **Summary of Evaluator Review** | **Program Response** |
| Strengths:*
*
 |   |
| Points for Improvements:*
*
 |   |
| Suggestions for development:*
*
 |   |

\* Attach independent reviewer's report and stakeholders' survey reports (if any).

# **D. Program Key Performance Indicators (KPIs)**

Including the key performance indicators required by the NCAAA.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **No** | **KPI** | **Targeted****Value**  | **Actual****Value** | **Internal****Benchmark** | **Analysis** | **New Target** |
| **1** |  |  |  |  |  |  |
| **2** |  |  |  |  |  |  |
| **3** |  |  |  |  |  |  |
| **4** |  |  |  |  |  |  |
| **5** |  |  |  |  |  |  |
| **6** |  |  |  |  |  |  |

**Link to KPI Report**

**Comments on the Program KPIs and Benchmarks results:**

|  |
| --- |
|  |

# **E. Challenges and difficulties encountered by the program (if any)**

|  |  |
| --- | --- |
|   | **Teaching** |
|  | **Assessment** |
|  | **Guidance and counseling** |
|  | **Learning Resources** |
|  | **faculty** |
|  | **Research Activities** |
|  | **Others** |

# **F. Program Development Plan**

|  |  |  |  |
| --- | --- | --- | --- |
| **No.** | **Priorities for Improvement** | **Actions** | **Action****Responsibility** |
|
| **1** |  |  |  |
| **2** |  |  |  |
| **3** |  |  |  |
| **4** |  |  |  |
| **5** |  |  |  |
| **6** |  |  |  |

* Attach any unachieved improvement plans from the previous report.
* The annual program report needs to be discussed in the department council

# **G. Approval of Annual Program Report**

|  |  |
| --- | --- |
| **COUNCIL**  |  |
| **Reference No.** |  |
| **Date:** |  |