

I N T E R N A T I O N A L J O I N T A C C R E D I T A T I O N S T A N D A R D S P R O J E C T

School Handbook

Guide for Applicant Institutions

2026 Edition



**International Joint
Accreditation Standards**

Table of Content

1 Project Overview-----	1
<i>1-1 Background-----</i>	<i>1</i>
<i>1-2 Collaborative Agencies-----</i>	<i>2</i>
<i>1-3 Goals and Benefits-----</i>	<i>4</i>
<i>1-4 Organizational Structure-----</i>	<i>5</i>
2 Standards and Accreditation Process -----	6
<i>2-1 Accreditation Standards and Indicators-----</i>	<i>6</i>
<i>2-2 Accreditation Process-----</i>	<i>16</i>
<i>2-3 Submit the Application-----</i>	<i>17</i>
<i>2-4 Prepare the SAR and Supporting Documents-----</i>	<i>17</i>
<i>2-5 Review Team-----</i>	<i>19</i>
<i>2-6 On-Site Review-----</i>	<i>19</i>
<i>2-7 Opinion for the Draft Report by Institution-----</i>	<i>22</i>
<i>2-8 Accreditation Results-----</i>	<i>23</i>
<i>2-9 Appeal Process-----</i>	<i>23</i>
<i>2-10 Fees and Logistics-----</i>	<i>24</i>
<i>2-11 Preparation and Arrangements for the On-Site Review-----</i>	<i>25</i>
3 Annex -----	26
<i>3-1 Rules Concerning International Joint Accreditation-----</i>	<i>26</i>
<i>3-2 Rubric Framework for Institutional Accreditation-----</i>	<i>32</i>
<i>3-3 Application Form-----</i>	<i>40</i>
<i>3-4 Format of Self-Assessment Report-----</i>	<i>41</i>
<i>3-5 Format for Opinion Statement-----</i>	<i>45</i>
<i>3-6 Appeal Format-----</i>	<i>48</i>
<i>3-7 Further Information and Contacts-----</i>	<i>51</i>

1 Project Overview

1-1 Background

As globalization continues to accelerate and digital transformation—including AI-enabled and technology-enhanced education—reshapes the higher education landscape, the international mobility of students, faculty, and academic activities has expanded significantly. At the same time, higher education institutions (HEIs) are expected to respond proactively to emerging challenges, including rapid technological advancement, evolving workforce demands, sustainability imperatives, and growing societal expectations for accountability and transparency. Against this backdrop, ensuring the quality, credibility, and international recognition of higher education has become a shared global priority. Consequently, quality assurance (QA) agencies are increasingly expected to conduct accreditation activities that are rigorous, transparent, internationally aligned, and responsive to the evolving needs of higher education.

The International Joint Accreditation Standards (iJAS) Project is a cross-border quality assurance initiative jointly launched in 2018 by the Japan University Accreditation Association (JUAA) and the Taiwan Assessment and Evaluation Association (TWAEA). The project was established to support the internationalization efforts of HEIs through a collaborative accreditation framework grounded in internationally recognized quality assurance principles and standards.

Since its establishment, the iJAS Project has continued to expand through partnerships with quality assurance agencies across Asia. The Office for National Education Standards and Quality Assessment (ONESQA) of Thailand joined the project in 2021, followed by the Mongolian National Council for Education Accreditation (MNCEA) in 2024 and the Center for Education Accreditation, Vietnam National University - Ho Chi Minh City (CEA VNU-HCM) in 2025. Through this growing network of partner agencies, iJAS has evolved into a regional platform for international joint accreditation, fostering cross-border collaboration, strengthening quality assurance capacity, and supporting the continuous enhancement of higher education quality throughout the region.

Through joint evaluations conducted by review teams comprising experts nominated by multiple quality assurance agencies, the project promotes mutual understanding of diverse higher education systems, facilitates international benchmarking and the exchange of good practices, and contributes to the advancement of quality assurance beyond national boundaries. By encouraging collaboration, shared learning, and mutual trust among institutions and quality assurance agencies, the iJAS Project serves as a platform for strengthening quality cultures and fostering continuous improvement across the region.

1-2 Collaborative Agencies

Japan University Accreditation Association (JUAA)

The **Japan University Accreditation Association (JUAA)** was established in 1947 by 46 universities, modeled on several U.S. accreditation agencies, and certified by the Minister of Education, Culture, Sports, Science and Technology in 2004 as the Certified Evaluation and Accreditation (CEA) Agency for universities. JUAA is a voluntary organization of higher education institutions whose mission is “to promote the qualitative improvement of higher education institutions in Japan through the voluntary efforts and mutual assistance of member institutions, and to contribute to international cooperation in education and research.”

The Association conducts CEA for universities and professional graduate schools, such as business, law, and public health, and leads program accreditation in fields including veterinary medicine and dentistry. It also promotes research through the Research Institute for Quality Assurance of Higher Education (RIQAHE), established in 2018 to advance innovation in quality assurance. RIQAHE develops projects and hosts seminars to foster dialogue among stakeholders. Through strategic global partnerships, professional exchanges, and rigorous external review by the International Network for Quality Assurance Agencies in Higher Education (INQAAHE), the Association reinforces its standing and credibility in the international quality assurance community.

Taiwan Assessment and Evaluation Association (TWAEA)

The **Taiwan Assessment and Evaluation Association (TWAEA)**, established in 2003, is a non-profit quality assurance agency dedicated to advancing higher education through objective, fair, and integrity-driven evaluation. TWAEA provides external quality assurance services and promotes evaluation practices responsive to policy priorities and institutional development. Its core activities include institutional and program accreditation, quality audits, and the development of quality assurance frameworks.

Over the years, TWAEA has undertaken evaluation initiatives commissioned by Taiwan’s Ministry of Education. Its international engagement spans Europe and Asia, including support for quality assurance initiatives in Macao, Thailand, and Vietnam, as well as participation in joint accreditation and cross-border collaboration. It also coordinates an international survey on student learning experiences, enabling comparative insights across regions. A significant milestone was achieved in 2024 with TWAEA’s recognition under the INQAAHE International Standards and Guidelines (ISG), reflecting its continued alignment with global quality assurance practices and reinforcing its role as a trusted partner in the international higher education community.

Center for Education Accreditation, Vietnam National University - Ho Chi Minh City (CEA VNU-HCM)

The **Center for Education Accreditation, Vietnam National University - Ho Chi Minh City (CEA VNU-HCM)**, established in 2013, is a public, independent, and autonomous non-profit agency mandated by the Ministry of Education and Training to enhance higher education quality in Viet Nam. Committed to international integration, the Center serves as a bridge connecting Viet Nam's higher education system with global quality assurance practices, promoting transparency, trust, and mutual recognition.

Its core functions include external QA at institutional and program levels, training prospective accreditors, including the issuance of certificates of completion, and building capacity for higher education institutions. The Center also contributes to national QA policy development and aligns standards with regional and international frameworks. Supported by transparent governance and a strong expert network, CEA VNU-HCM upholds professionalism and integrity, strengthening its role as a leading accreditation agency in Viet Nam and a trusted global QA partner.

Mongolian National Council for Education Accreditation (MNCEA)

The **Mongolian National Council for Education Accreditation (MNCEA)** is an independent external quality assurance agency established by the Government of Mongolia in 1998. Its mission is to enhance the quality, transparency, and international recognition of education at all levels. MNCEA currently comprises 34 officers and is responsible for accrediting HEIs, TVET providers, and secondary and preschool institutions that offer foreign programs and curricula, as well as for credential evaluation to support qualification recognition in line with regional and global conventions. The Council is supported by a network of over 1,000 external evaluators.

Operating within a coherent policy framework, MNCEA integrates qualifications framework development, implementation, and recognition, while overseeing the Mongolian National Qualifications Framework and ensuring consistent, standards-based quality assurance across the education sector. MNCEA actively collaborates with global accreditation bodies and quality assurance organizations to promote cross-border accreditation and strengthen international engagement.

Office for National Education Standards and Quality Assessment (ONESQA)

The **Office for National Education Standards and Quality Assessment (ONESQA)** is a public organization dedicated to educational quality assurance in Thailand, aiming to enhance education provision and support institutions in delivering high-quality learning outcomes. It also develops and trains external assessors to ensure rigorous evaluation standards. Internationally, ONESQA is recognized by the INQAAHE and listed in its Aligned Agencies Database. Its role is further endorsed

by the Ministry of Higher Education, Science, Research and Innovation (MHESI), which designated ONESQA as an authorized external quality assessment agency in 2021. The Office maintains active collaboration with global quality assurance networks such as INQAAHE, APQN, and AQAN.

ONESQA's mission is to implement an external quality assessment system aligned with internal quality assurance (IQA), promoting continuous improvement. Guided by five strategic pillars—transparency, market mechanisms, high-quality assessors, curriculum, and technology—it advances real-time reporting, international partnerships, professional development through the ONESQA Academy, outcome-based QA, and AI-driven digital systems to deliver effective, data-driven assessments.

1-3 Goals and Benefits

Promoting international joint accreditation for higher education serves several important goals and benefits. These goals are aimed at enhancing the quality of education, fostering collaboration among quality assurance agencies, and developing global standards. Here are some key goals:

- ✚ Enhance the international recognition and credibility of higher education institutions.
- ✚ Facilitate the internationalization of higher education in a manner that meets the emerging needs and challenges.
- ✚ Sustain continuous improvement by encouraging institutions to meet and exceed established standards.
- ✚ Encourage collaboration and partnerships between educational institutions from different countries.
- ✚ Foster the exchange of knowledge, resources, and expertise among quality assurance agencies, promoting a global perspective in education.
- ✚ Facilitate the mobility of students, academics, and professionals by creating a common framework for accreditation.

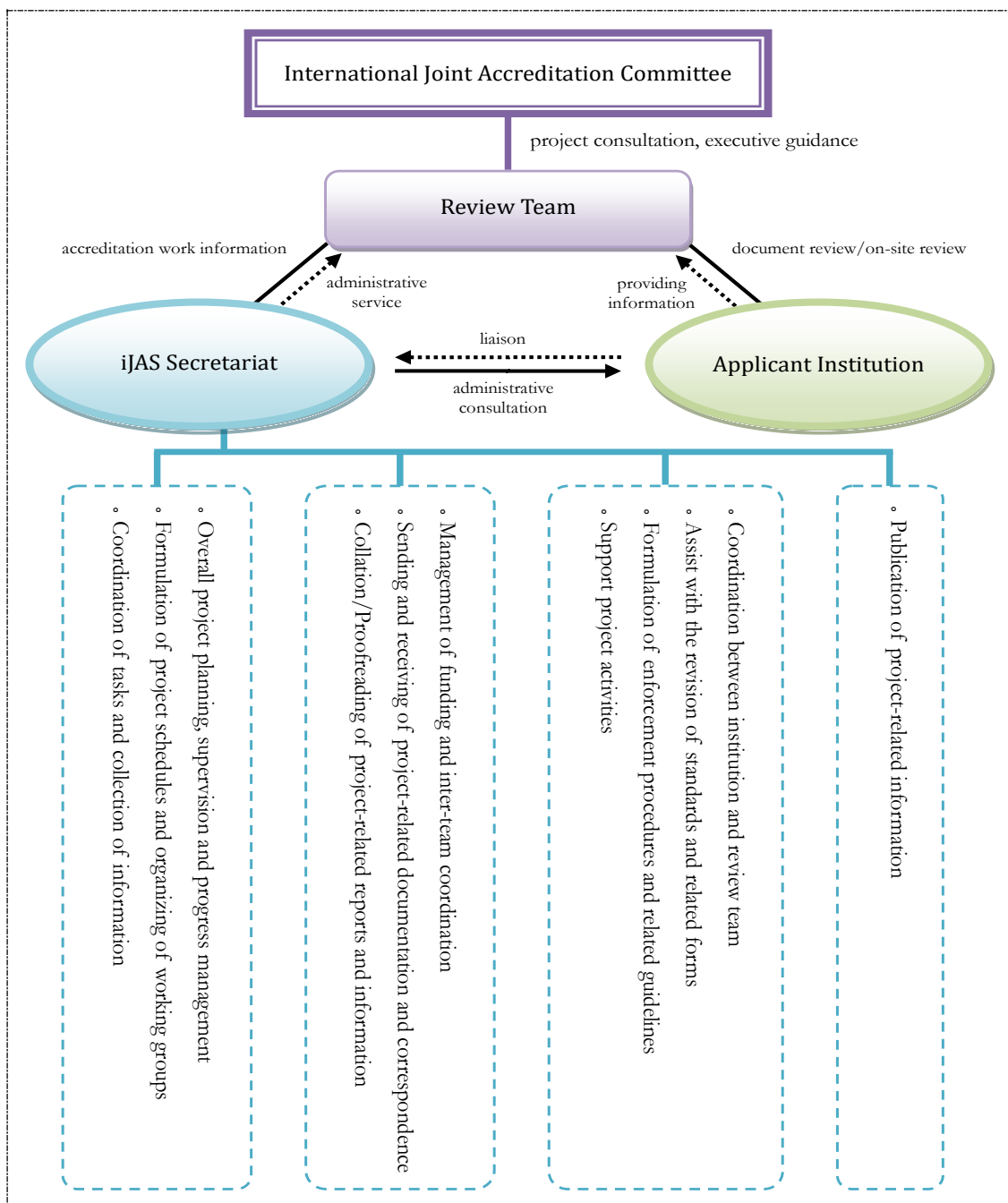
The anticipated benefits for accredited institutions include the following:

- ✚ Recognition through an international quality assurance framework can strengthen an institution's global competitiveness, credibility, and international profile.
- ✚ Accreditation can serve as a trusted reference when developing international partnerships, including arrangements for credit recognition and academic equivalence, dual-degree programs, and student mobility initiatives.
- ✚ Participation in an international quality assurance process can enhance institutional quality assurance by introducing broader international perspectives and providing constructive recommendations for continuous improvement.
- ✚ Recognition by a reputable professional quality assurance body can support institutions in expanding their international reach and enhancing their attractiveness to prospective international students.

Overall, the promotion of international joint accreditation contributes to building a more interconnected and collaborative global higher education landscape, benefitting students, institutions, and societies worldwide.

1-4 Organizational Structure

Under the “Rules Concerning International Joint Accreditation” (**Annex 3-1**), the “International Joint Accreditation Committee” (hereafter referred to as the “Accreditation Committee”) shall be set up by this project to ensure the evaluation process in full and smoothly. Then, “Review Team” shall be formed for each applicant institution based on their nationality, features, and attributes under the Accreditation Committee. Furthermore, to provide support for the iJAS Project, JUAA and TWAEA as the two founding agencies jointly establish a Secretariat (hereafter referred to as the “iJAS Secretariat”). The planned organizational structure for the project is as follows.



[Figure 1] Project Organizational Structure

2 Standards and Accreditation Process

2-1 Accreditation Standards and Indicators

The iJAS Project involves a comprehensive review process consisting of document review and on-site review conducted by experienced reviewers and quality assurance experts. Through this process, the project evaluates the extent to which an applicant institution fulfills its educational mission and provides students with a high-quality learning environment that supports meaningful learning experiences and the achievement of intended learning outcomes.

The accreditation process is designed not only to assess institutional quality, but also to support institutional enhancement. Through constructive peer review, institutions are encouraged to strengthen their IQA systems, build upon their distinctive strengths, address areas for improvement, and further develop their unique characteristics and strategic priorities. The overarching purpose is to foster a culture of continuous quality improvement and to assist institutions in responding proactively to emerging developments and challenges in higher education.

In response to evolving global trends—including digital transformation, artificial intelligence, sustainability, stakeholder engagement, and increasing expectations for transparency and accountability—the iJAS framework has been comprehensively revised as Version 2.0. The revised framework places greater emphasis on strategic governance, evidence-based decision-making, institutional resilience, technological innovation, societal impact, and continuous improvement, while maintaining the project’s longstanding commitment to international collaboration, mutual recognition, and quality enhancement across borders.

Accordingly, the accreditation standards have been redesigned to provide an integrated and future-oriented framework for evaluating institutional quality, effectiveness, and sustainability. The basic structure of the accreditation standards is presented as follows. To facilitate consistent interpretation and evaluation, a rubric framework has been established as a reference for assessing the level of institutional development and performance. The rubrics are provided in **Annex 3-2**.

[Table 1] International Joint Accreditation Standards and Indicators

Standard 1: Institutional Mission, Governance & Strategic Sustainability

This standard examines how the institution defines its mission, ensures inclusive governance, and implements data-informed strategies for long-term sustainability. It emphasizes responsiveness to external change, responsible use of emerging technologies like AI, and alignment with global trends such as digital transformation and sustainable development. Leadership, stakeholder engagement, and financial capacity are key to institutional resilience and impact. Mission, governance, and strategic sustainability are assessed in an integrated manner to reflect their interdependence in institutional practice, while each dimension is examined through distinct indicators to ensure analytical clarity.

	Indicator	Descriptors
1-1. Mission, Vision, and Institutional Identity	The institution should clearly define and communicate its mission, vision, and core values, ensuring they are publicly accessible and developed with stakeholder engagement, and guide institutional priorities and decision-making.	The institution articulates clearly defined mission, vision, and core values that express its educational philosophy, commitment to public good, and role in shaping sustainable futures. These statements are co-created with stakeholder input, publicly available, and guide strategic action at all institutional levels. They also communicate a clear institutional profile that informs priorities and decision-making.
1-2. Sustainability Foresight and Strategic Alignment	The institution should systematically analyze internal and external developments and demonstrate strategic responsiveness to ensure institutional relevance, impact, and long-term sustainability.	The institution conducts regular sustainability-focused foresight by tracking global and local trends in higher education, industry, policy, and society to enhance the relevance and impact of its mission. By leveraging data analytics and emerging technologies, it interprets signals such as demographic shifts, technological change, and sustainability agendas to inform mission-related priorities and institutional positioning. This proactive alignment with external challenges secures long-term institutional sustainability and maximizes societal contribution.
1-3. Strategic Planning and Institutional Resilience	The institution should develop and regularly review strategic plans that are evidence-informed, forward-looking, and aligned with its mission. The use of data analytics and AI-driven tools supports scenario planning, predictive analysis, and adaptive strategies to strengthen long-term adaptability and institutional resilience.	The institution formulates and implements mid- and long-term strategic plans that support innovation, institutional resilience, responsiveness to emerging global challenges, and achievement of its stated mission. Institutional resilience refers to the institution's capacity to anticipate, adapt to, and recover from internal and external disruptions while sustaining mission delivery and educational quality. These plans are grounded in data and enhanced by the use of AI-driven tools for predictive analysis and scenario planning. They are reviewed regularly and refined through inclusive consultation processes.

Indicator		Descriptors
1-4. Governance and Stakeholder Participation	The institution should establish transparent and inclusive governance structures that clearly define responsibilities and engage key stakeholders in decision-making.	Governance systems are clearly defined, transparent, and inclusive, with roles and responsibilities distributed across academic and administrative units. Decision-making processes engage diverse internal and external stakeholders—including faculty, staff, students, alumni, and industry or community representatives—and are regularly reviewed using appropriate evidence to ensure accountability, fairness, institutional integrity, and continuous improvement. Governance arrangements also support effective internal and external collaboration.
1-5. Ethical Leadership and Staff Development	Institutional leadership should demonstrate ethical and visionary leadership, support inclusive governance, and promote the ongoing professional development of academic and administrative staff, with attention to enhancing digital and AI-related competencies.	Leadership is future-oriented, values-driven, and ethically grounded. It fosters inclusive governance, data-informed decision-making, and organizational learning, while proactively guiding the institution through technological, environmental, and societal transformations—including the responsible adoption of AI. The institution also promotes the professional development of academic and administrative staff, with a focus on strengthening digital literacy and AI-related competencies to enhance institutional capacity.
1-6. Financial Sustainability	The institution should maintain sound financial management and ensure sufficient resources to sustain its educational mission and strategic priorities over time.	The institution maintains a sound financial management system and demonstrates the capacity to sustain its educational mission. Financial planning supports long-term institutional goals, ensures operational continuity, and adapts to changing internal and external conditions.

Standard 2: Internal Quality Assurance & Accountability

This standard focuses on how the institution ensures quality through a transparent, evidence-based internal quality assurance (IQA) system that is designed and implemented in alignment with the institution's mission and strategic objectives. It highlights the use of clear policies, regularly implemented evaluations and participatory stakeholder feedback to enhance performance. Systematic data collection, analysis, and information sharing—supported where appropriate by data analytics and AI-enabled tools—enable monitoring, institutional steering, and continuous improvement. Public transparency reinforces accountability and institutional trust, and the IQA system is periodically reviewed and adapted to ensure its continued effectiveness.

	Indicator	Descriptors
2-1. IQA Policy and Structure	The institution should establish a robust internal quality assurance (IQA) framework with clearly defined standards, objectives, and responsibilities, regularly reviewed for alignment with strategic goals and international best practices.	An institution-wide internal quality assurance policy is established, outlining core principles, standards, and operational mechanisms. The policy is aligned with global quality frameworks and updated regularly to reflect institutional goals and emerging educational trends.
2-2. Operational Effectiveness and Intelligent Monitoring	The IQA system should operate effectively across academic and administrative units, supported by integrated data systems and, where appropriate, AI-enabled tools that facilitate real-time monitoring, evidence-based improvement, and consistent alignment with institutional quality objectives.	The IQA system is managed by a central coordinating unit or committee and embedded across all institutional levels. It ensures consistency in implementation, cross-unit collaboration, and adherence to quality standards and procedures, supported where appropriate by AI-enabled tools and integrated data systems that enhance coordination, monitoring, and decision-making. IQA systems may be centralized, decentralized, or hybrid in structure, depending on institutional mission and strategy, provided that coherence and effectiveness are ensured.
2-3. Evidence-based Quality Improvement	The institution should implement systematic mechanisms to assess the performance and effectiveness of the IQA system, with data analytics and, where appropriate, AI-driven tools used to generate insights that guide ongoing and forward-looking quality improvements.	Through systematic evaluation, data-driven analysis, and inclusive stakeholder feedback, the IQA system effectively supports evidence-based decisions and ongoing quality enhancement across academic and administrative domains. Where appropriate, AI-powered tools are used to generate predictive insights and strengthen the system's forward-looking improvement efforts.
2-4. Public Information and Transparency	The institution should ensure transparency through the timely dissemination of accurate, accessible, and relevant information regarding academic offerings, student success, financial integrity, and societal engagement.	The institution regularly publishes comprehensive and up-to-date information on academic programs, student achievement, financial integrity, and strategic priorities, including the results of IQA processes and how these results are used for quality enhancement and institutional steering. Disclosure is provided in appropriate and accessible forms to support public accountability and the informed engagement of higher education stakeholders.

	Indicator	Descriptors
2-5. Review and Evaluation Mechanisms	The institution should systematically collect and analyze feedback from faculty, staff, students, alumni, employers, and external partners, and incorporate the results into institutional quality enhancement initiatives.	The IQA system is subject to periodic internal review, external peer review, and benchmarking. These assessments guide system enhancement and ensure the IQA function remains agile, relevant, and effective in supporting institutional transformation.

Standard 3: Teaching, Learning & Student Achievement

This standard focuses on how the institution ensures student achievement through coherent academic policies, inclusive admissions, and curriculum design aligned with intended learning outcomes. It emphasizes technology-enhanced learning, inclusive pedagogy, robust assessment practices, and responsive student support. Faculty structures, infrastructure, and program review processes work together to promote quality teaching, equitable access, and continuous improvement informed by data and stakeholder input. Teaching and learning are informed, where appropriate, by research activities, applied projects, and engagement with professional and societal practice. Innovative pedagogical approaches and digitally enhanced learning models are considered developmental aspirations rather than baseline compliance requirements.

	Indicator	Descriptors
3-1. Academic Policies	The institution should establish and communicate coherent academic policies on student admissions, curriculum design, and degree conferral to promote transparency, equity, and alignment with educational objectives.	The institution formulates and disseminates comprehensive academic policies governing program structure, admission, progression, and graduation. These policies ensure coherence, transparency, and alignment with educational objectives and international good practice.
3-2. Student Admission Information and Fair Selection	The institution should implement clear, fair, and transparent admission policies and selection processes, ensuring that requirements and procedures are clearly communicated to applicants so that admitted students are prepared to succeed in their chosen programs, aligning with institutional mission and learning expectations.	The institution implements clear, fair, and consistent admission policies aligned with its mission and program learning expectations, using criteria based on academic readiness and program suitability that are regularly reviewed for relevance and equity. Admission policies and procedures, including clear information on the intended student profile, required academic preparation, and selection methods, are communicated to applicants and prospective students in an accessible and understandable manner. The admissions process is conducted fairly and transparently, supported by accurate information and guidance, and designed to identify students with the potential to succeed in their chosen fields of study.

	Indicator	Descriptors
3-3. Curriculum Design and Technology-Enhanced Learning	Curriculum design should ensure academic rigor and global relevance by aligning program learning outcomes with curriculum structure and course design, integrating interdisciplinary perspectives, sustainability themes, and appropriate emerging technologies to support intended learning outcomes.	In curriculum design, the institution applies clear procedures for program design, approval, revision, and closure, and ensures constructive alignment among intended learning outcomes, curriculum content, teaching approaches, and assessment. Curricula address academic standards while responding to societal needs and global challenges through the integration of interdisciplinary knowledge, critical thinking, digital competencies (including AI awareness and ethics where relevant), and sustainability-related learning. Technology integration is reflected in curriculum intent and structure—such as planned use of AI-supported learning resources or immersive learning components—where it meaningfully strengthens outcome achievement and program relevance.
3-4. Faculty Structure for Education Delivery	Faculty structures and deployment arrangements should support effective program delivery by enabling collaborative, interdisciplinary, and innovation-driven teaching, while ensuring coordination, role clarity, and course-level quality oversight responsive to evolving learner needs.	Teaching is supported by well-defined faculty roles and coordinated teaching teams, and appropriate deployment and workload arrangements that enable collaborative and interdisciplinary delivery. These structures support curriculum coherence, shared responsibility for course design and delivery, and timely adjustment to learner diversity and emerging educational needs. Where relevant, international and intercultural competencies are demonstrated. Teaching quality is reviewed at the course and program levels through transparent and appropriate criteria, and results are used to strengthen teaching coordination and instructional improvement.
3-5. Learning Support and Pedagogy	Teaching practices should apply an appropriate mix of inclusive and student-centered pedagogical approaches, supported by responsive academic services and digital innovations to enhance engagement, personalization, and learning effectiveness.	The institution adopts inclusive, student-centered pedagogies that incorporate digital innovations such as blended, flipped, AI-enabled, and self-directed learning models. Academic support services—including intelligent tutoring systems, immersive VR learning modules, and personalized advising—are delivered in a timely and accessible manner to promote active engagement, learning effectiveness, and student success. An appropriate mix of pedagogical approaches is applied to support diverse learning objectives and student needs.

	Indicator	Descriptors
3-6. Learning Environment and Infrastructure	The institution should maintain inclusive and accessible physical and digital infrastructure to support diverse and personalized learning.	Inclusive learning environments are supported through appropriate academic, social, and advisory services. Physical and digital infrastructure—including facilities, teaching and research laboratories, smart classrooms, immersive simulation labs, and AI-enabled platforms—are adequate, accessible, and continuously enhanced to ensure equitable access and effective use by diverse learners, support academic and research activities, diverse learning modalities, and personalized educational experiences.
3-7. Student Support and Well-being	The institution should provide a comprehensive and inclusive system of student support to foster academic success, personal development, and career readiness, ensuring equitable access for all learners.	The institution provides equitable, integrated support services that address academic, psychological, social, and career development needs—such as scholarships, advising services, mental health counseling, and career planning. These services are inclusive and data-informed, designed to promote individual growth, resilience, and well-being throughout the student lifecycle. Support services also facilitate students' actual engagement with the labor market and society, including career preparation, employability development, and opportunities for civic or community contribution.
3-8. Learning Outcomes Assessment	The institution should systematically assess learning outcomes across multiple levels using data analytics and, where appropriate, AI-assisted analysis to track student progress, predict achievement trends, and support continuous improvement and accountability.	Learning outcomes are assessed systematically at the course, program, and institutional levels, with results linked to curriculum refinement, teaching enhancement, and strategic planning. Data analytics and, where appropriate, AI-assisted tools are used to track student progress, identify achievement patterns, and support evidence-based decision-making and continuous improvement.
3-9. Assessment and Degree Awarding	Student learning should be assessed through valid, transparent, and authentic methods that align with intended learning outcomes and ensure academic integrity in awarding degrees.	Assessment practices are valid, reliable, and clearly aligned with intended learning outcomes, utilizing diverse and authentic methods such as portfolios, projects, and performance-based tasks. Degree awarding processes are governed by transparent policies that uphold academic integrity and reflect institutional regulations and disciplinary standards.

Indicator		Descriptors
3-10. Program Review and Enhancement	The institution should regularly review and enhance educational programs through structured procedures that use learning outcome evidence, impact analysis, and stakeholder and needs-based feedback to maintain relevance, quality, and continuous improvement.	Educational programs are reviewed on a regular cycle through structured procedures that include curriculum mapping, analysis of learning outcome data, impact analysis of implemented improvements, and surveys or feedback mechanisms to identify emerging needs. Input is gathered from students, faculty, alumni, and employers, and is used to refine course content, update delivery methods, and align programs with institutional priorities and evolving societal and industry expectations.

Standard 4: Faculty Development & Research Engagement

This standard examines how the institution recruits, develops, and supports faculty to excel in teaching, research, and leadership. It highlights transparent performance management, structured faculty development programs, and active engagement in research and knowledge transfer. Emphasis is placed on interdisciplinary and socially relevant research aligned with institutional goals and global development priorities.

Indicator		Descriptors
4-1. Recruitment and Performance Management	Faculty recruitment, evaluation, and promotion processes should be transparent, inclusive, and aligned with principles of academic excellence, institutional values, and global standards for diversity, equity, and merit.	Faculty recruitment, evaluation, and promotion are conducted through clear, merit-based, and inclusive procedures governed by defined institutional policies. These processes are designed to attract and retain diverse academic talent, ensure consistency and fairness, and support scholarly excellence in alignment with institutional goals and evolving educational and societal needs.
4-2. Faculty Development (FD) Programs	The institution should provide structured and forward-looking Faculty Development (FD) programs that foster continuous professional growth in teaching, research capacity, and academic leadership.	The institution provides faculty with structured and responsive professional development opportunities, including training in innovative pedagogy, AI and digital integration, inclusive teaching, research leadership, and global academic engagement. FD programs are strategically aligned with institutional priorities and regularly reviewed for relevance and effectiveness. Through these FD programs, the institution helps ensure that faculty and staff qualifications, competencies, and profiles remain appropriate to institutional goals and program requirements.

	Indicator	Descriptors
4-3. Research and Knowledge Transfer	Faculty should engage in research that enhances teaching and contributes to innovation and knowledge transfer through active collaboration with industry, government, civil society, and other external partners.	Faculty actively engage in research that enhances teaching quality and drives impact across communities and industries. Knowledge generated through collaborative research is integrated into the curriculum and disseminated through outreach activities, supporting experiential learning and societal advancement. The scope and depth of research engagement are assessed in relation to institutional mission and profile, recognizing that teaching-oriented institutions may demonstrate impact through pedagogical scholarship, applied projects, or professional engagement.
4-4. Research Relevance and Impact	The institution should encourage interdisciplinary and socially relevant research by providing support mechanisms aligned with national priorities and global development agendas.	The institution supports research that addresses critical societal and global challenges through interdisciplinary collaboration, sustainability-oriented inquiry, and policy-relevant outcomes. Incentive structures, research infrastructure, and partnerships enable open knowledge sharing and measurable contributions to the public good.

Standard 5: Social Engagement & Global Connection

This standard examines how the institution contributes to society through civic engagement, strategic partnerships, and international collaboration. It emphasizes clear policies for social responsibility, collaboration with external stakeholders to address societal challenges, and globally minded initiatives that foster mobility, intercultural fluency, and meaningful community impact aligned with the institutional mission.

	Indicator	Descriptors
5-1. Social Engagement Policies and Initiatives	The institution should establish clear policies to guide civic and societal engagement, positioning itself as a catalyst for inclusive, equitable, and sustainable development at both local and global levels.	Policies, frameworks, and initiatives demonstrate an institution-wide commitment to public engagement and societal development through education, research, and community service. Engagement activities may include regional initiatives that contribute to local development and knowledge exchange.

Indicator		Descriptors
5-2. Cross-Sector and Academic Collaboration	The institution should engage in strategic collaborations with industry, government, and civil society to co-develop innovative solutions, foster service learning, and extend the reach of applied research that addresses community and societal challenges.	The institution sustains long-term, multi-stakeholder partnerships that support applied research, policy dialogue, knowledge transfer, and inclusive innovation. These collaborations foster mutual learning and shared responsibility for addressing societal needs and driving community development. Collaboration may include internationalization at home, such as academic cooperation, benchmarking, and joint activities with domestic partner institutions.
5-3. Internationalization and Mobility	The institution should promote student and faculty mobility, intercultural fluency, and sustainable global partnerships through inclusive, hybrid, and locally responsive internationalization strategies.	Internationalization is advanced through holistic and integrated strategies—such as physical and virtual mobility, Collaborative Online International Learning (COIL), and Internationalization at Home (IaH)—to build global competencies, intercultural understanding, and reciprocal international partnerships. Internationalization activities are guided by an explicit institutional concept or strategy and are linked, where appropriate, to the formulation and assessment of international and intercultural learning outcomes.
5-4. Contribution to Societal Engagement and Impact	The institution should ensure that outreach, extension, and engagement activities are strategically aligned with its mission, yielding measurable contributions to community well-being, knowledge equity, and social innovation.	The institution's outreach and engagement initiatives are designed to generate meaningful societal impact through interdisciplinary collaboration, community-driven approaches, and inclusive innovation. Partnerships are co-created with stakeholders and evaluated based on their contributions to sustainability, social equity, and responsible global engagement. Faculty, staff, and students are encouraged to participate in societal and community engagement activities. Such activities are supported, documented, and, where relevant, validated or formally recognized.

The five standards and twenty-nine indicators established under the iJAS framework constitute the core criteria for accreditation. The framework reflects contemporary developments in higher education, including digital transformation, sustainability, stakeholder engagement, and accountability. In particular, the Standards encourage the appropriate use of artificial intelligence (AI) and related technologies where relevant to institutional missions and operations; however, they do not mandate their adoption. Institutions that utilize AI-enabled systems or technologies are expected to demonstrate appropriate policies, governance mechanisms, and implementation practices as part of the accreditation review.

In addition, supplementary indicators, referred to as “iJAS Plus,” may be introduced to address specific regulatory requirements or quality assurance expectations in participating regions. Such supplementary indicators shall apply only to higher education institutions within the respective region and shall be used in conjunction with the core iJAS standards and indicators. To ensure the integrity, consistency, and comparability of the accreditation process, the introduction of any supplementary indicators shall be reviewed and approved by the Accreditation Committee prior to implementation.

2-2 Accreditation Process

[Table 2] International Joint Accreditation Process

Stage	Activity	Details
Preparation	Submission of the Application	The institution submits the application to the iJAS Secretariat for processing.
	Submission of the Accreditation Information	The institution submits the SAR and required supporting documents.
Review	Document Analysis	The Review Team conducts a document analysis and provides a “Request for Clarification List” to the institution five weeks before the on-site review.
	Response to the “Request for Clarification List” by the Institution	The institution responds to the “Request for Clarification List” two weeks before the on-site review, and the iJAS Secretariat sends its written responses to the Review Team.
	On-site Review	The Review Team visits the institution for the on-site review.
	Preparation of the Draft Accreditation Report	The Review Team prepares the draft accreditation report, which the iJAS Secretariat then sends to the institution.
	Opinion Statement by the Institution	The institution identifies any factual errors in the draft report and submits its comments for consideration by the Review Team.

Stage	Activity	Details
Report	Review and Approval of Accreditation Results	The Review Team submits the accreditation report to the Accreditation Committee for review and approval.
	Announcement of Accreditation Results and Issuance of the Accreditation Certificate	The iJAS Secretariat sends the final accreditation report and results to the institution and issues the accreditation certificate.
	Appeal by the Institution (if applicable)	The institution may submit an appeal to the International Joint Accreditation Appeal Committee, which reviews the case and determines whether the accreditation decision should be revised or upheld.

2-3 Submit the Application

HEIs that have been duly established and authorized in accordance with the applicable laws and regulations of their respective countries or jurisdictions are eligible to apply for accreditation under the iJAS Project. Institutions interested in participating are invited to submit an inquiry or a formal application for accreditation using the application form provided in **Annex 3-3**.

Upon receipt of the application, the iJAS Secretariat will acknowledge the submission, inform the Accreditation Committee, and initiate the subsequent accreditation procedures. Where appropriate, the iJAS Secretariat may arrange an orientation session to provide the applicant institution with an overview of the iJAS framework, accreditation process, timeline, and preparation requirements.

2-4 Prepare the SAR and Supporting Documents

The Self-Assessment Report (SAR) is the primary document used in the iJAS accreditation process and serves as the foundation for both the document review and the on-site review. The SAR should provide a comprehensive and evidence-based analysis of the institution's policies, systems, practices, achievements, challenges, and future development plans in relation to the iJAS accreditation standards and indicators.

The preparation of the SAR is intended not only to support the accreditation review, but also to encourage institutional self-reflection, quality enhancement, and continuous improvement. Institutions are encouraged to consider the accreditation standards and indicators in the context of their mission, educational objectives, strategic priorities, and stage of development. The SAR should demonstrate not only compliance with the standards, but also the effectiveness, integration, and impact of institutional policies and practices, supported by both qualitative and quantitative evidence.

When preparing the SAR, institutions are encouraged to observe the following principles:

- ⊕ The SAR shall be prepared in English and should primarily reflect the institution's current conditions, while also describing relevant future plans and development initiatives where appropriate.
- ⊕ The report should address all accreditation standards and indicators and normally include: (1) a description of current conditions, (2) strengths and good practices, (3) areas for improvement, challenges, or difficulties, and (4) action plans and improvement strategies. (see **Annex 3-4**)
- ⊕ The SAR should be primarily narrative in nature and supported by relevant qualitative and quantitative evidence.
- ⊕ The SAR should not normally exceed 100 pages in length and should use a font size of 12. Supporting documents and appendices do not count toward the page limit.
- ⊕ Institutions are normally requested to submit six printed copies of the SAR together with an electronic version for document review. Where printing or physical submission is not feasible, electronic submission may be accepted upon prior agreement with the iJAS Secretariat.
- ⊕ Electronic files and supporting evidence may be uploaded to the designated iJAS cloud platform. Access information and submission instructions will be provided separately by the iJAS Secretariat prior to the submission deadline.
- ⊕ Where institutional data or information is publicly available through official websites or information systems, institutions may provide relevant web links instead of submitting duplicate printed materials.

[Table 3] Required Submission Documents

Submitted Information	Description
⊕ Self-Assessment Report in English	Maximum length of 100 pages. Normally submitted in six printed copies together with an electronic version. Where physical submission is not feasible, electronic submission may be accepted upon prior agreement with the iJAS Secretariat.
⊕ Supporting Documents and Appendices	No page limitation. Electronic materials should be uploaded to the designated cloud platform whenever possible. Where electronic submission is not feasible, printed copies may be requested.

Institutions are encouraged to ensure that the information presented in the SAR is accurate, evidence-based, and consistent with actual institutional practices. During the accreditation process, the Review Team will examine not only the existence of policies and procedures, but also their effectiveness, implementation, outcomes, and contribution to continuous improvement and institutional development.

2-5 Review Team

2-5-1 Review Team Composition

A Review Team shall be established under the Accreditation Committee to conduct document analysis and on-site review. Senior academics with administrative experience, senior administrative staff engaged in evaluation and quality assurance activities, and distinguished industry leaders may be invited to serve on the Review Team. Where appropriate, reviewers shall be selected with due consideration of the academic disciplines, institutional characteristics, and areas of specialization of the applicant institution. Reviewers are expected to be familiar with contemporary developments in higher education, including digital transformation, AI-enabled innovations, and international quality assurance principles and practices.

In principle, the Review Team consists of five members, including one member from the country or region of the applicant HEI and four members from other countries or regions. In case of special circumstances, such as **ijAS Plus** (mentioned in p.16), one or two additional members may be appointed as appropriate.

2-5-2 Conflicts of Interest

To ensure the fairness, impartiality, and credibility of the accreditation process, the applicant institution will be informed of the proposed Review Team membership prior to the on-site review and may raise concerns regarding any potential conflicts of interest. The ijAS Project maintains strict measures to prevent conflicts of interest and protect the confidentiality of institutional information. All reviewers are required to comply with applicable codes of conduct, confidentiality requirements, and impartiality standards to ensure that accreditation decisions are based on objective evidence and professional judgment.

2-6 On-Site Review

The on-site review is typically conducted over one full day, with the review schedule arranged in consultation with the institution. Where necessary, additional review time may be scheduled to accommodate institutional circumstances, such as multiple campuses, distributed learning sites, or other special considerations.

During the on-site review, institutions should be prepared to demonstrate that the information presented in the SAR is consistently reflected in institutional practices and outcomes. Particular attention will be given to how institutional systems and processes operate in practice, how data and evidence are used to support planning and decision-making, and how evaluation results are utilized to drive continuous improvement, enhance institutional effectiveness, and achieve strategic objectives.

2-6-1 On-Site Review Itinerary

[Table 4] On-Site Review Timetable

Time	Activity	Description
09:00-09:30	Preparatory Meeting	- Review Team members arrive at the institution for preliminary communication - Review and discuss items requiring clarification - Confirm the route for campus tour
09:30-10:30	Introductions and Institutional Briefing	- Review Team and institution personnel introduce themselves to each other - The institution delivers a presentation on its development and accomplishments
10:30-11:00	Review of Supporting Evidence	Review Team examines the relevant data on display
11:00-12:00	Campus Tour	Class observation and facilities tour
12:00-13:00	Lunch and Discussion	Lunch and brief meeting
13:00-15:45	Interview with the President and Senior Executives	Review Team conducts an interview with the president and senior executives to discuss the institution's mission, governance, strategic development, and quality assurance
13:45-13:55	Break	Short break and transition between interview sessions
13:55-14:40	Interview with Faculty Members and Administrative Staff	Review Team conducts an interview with faculty members and administrative staff to discuss teaching, academic support, administrative services, and institutional operations
14:40-14:50	Break	Short break and transition between interview sessions
14:50-15:35	Interview with Students and Alumni (if applicable)	Review Team conducts an interview with students and alumni (if applicable) to gather feedback on learning experiences, student support, and graduate outcomes
15:35-15:45	Break	Short break before the next activity
15:45-16:00	Verification of Information and Supplementary Explanations	- Review Team engages in discussion and collation of opinions - Review Team communicates and clarifies any questions with the institution regarding the written information and what they examined on the day

Time	Activity	Description
16:00-17:30	Authoring of Report	· Review Team discusses findings, reaches consensus, and prepares a preliminary draft of the accreditation report
17:30-18:00	Exit Meeting	· Review Team exchanges opinions with the institution

2-6-2 Key Points in the On-Site Review

⌘ Institutional briefing

At the beginning of the on-site review, the institution will be invited to provide a brief overview of its development, achievements, and quality assurance practices in relation to the iJAS standards and indicators. The session also provides an opportunity for the institution to address issues previously raised in the “Request for Clarification List” and to provide any additional information that may assist the Review Team. Reviewers may also raise questions regarding the SAR, supporting documentation, and the institution’s presentation.

⌘ Review of supporting evidence

The institution should ensure that relevant supporting evidence is readily available for review during the visit. Appropriate personnel may be designated to assist the Review Team in locating and accessing information as needed, thereby facilitating an efficient and effective review process.

⌘ Campus tour

The institution is requested to prepare a proposed campus tour route that reflects its key facilities, learning environments, and support services. The final tour itinerary will be determined in consultation with the Review Team to ensure that areas relevant to the review objectives are appropriately covered.

⌘ Interviews with institutional stakeholders

The Review Team will conduct interviews with institutional leaders, faculty members, administrative staff, students, and other relevant stakeholders. These interviews may be conducted in either a group discussion or individual interview format, depending on the purpose of the session and the needs of the review.

⌘ Verification of information and supplementary explanations

Throughout the on-site review, the institution may be asked to clarify or provide additional information regarding the SAR, supporting evidence, or matters arising from interviews and

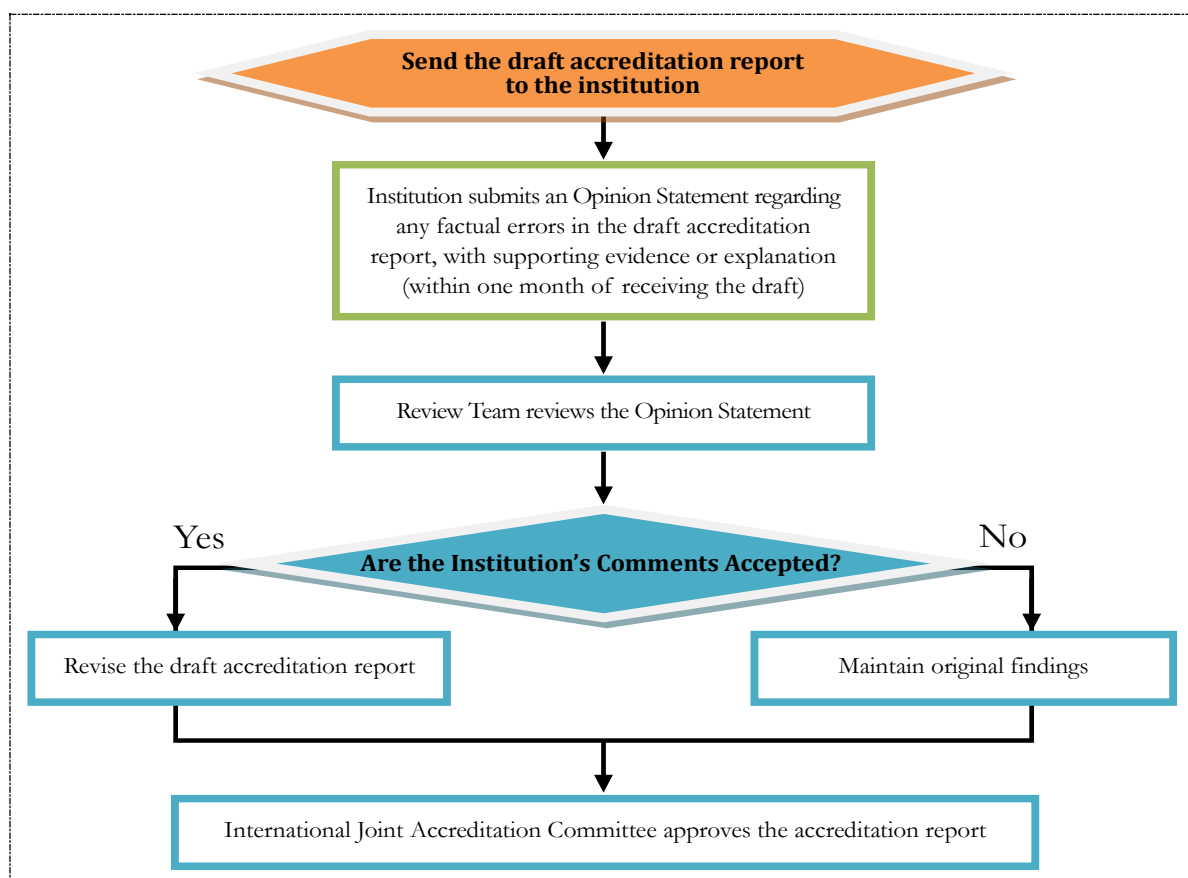
observations. The institution may also use this opportunity to provide supplementary explanations or documentation relevant to the review.

✚ **Exit meeting**

At the conclusion of the on-site review, the Review Team will meet with institutional representatives to share general observations and discuss any outstanding issues requiring clarification. This session is intended to facilitate mutual understanding and ensure that the Review Team has obtained the information necessary to complete its evaluation.

2-7 Opinion for the Draft Report by Institution

To ensure fairness and accuracy, an institution that believes the preliminary draft of the accreditation report contains any factual errors may submit a statement of opinion to the Accreditation Committee within the specified period. The Review Team will review the issues raised, verify the relevant information, and prepare a written response (See **Annex 3-5**). The procedure for submitting an Opinion Statement and the Review Team's response is outlined below.



[Figure 2] Opinion Statement Procedure

2-8 Accreditation Results

Accreditation results shall be determined as either “**Accredited**” or “**Not Accredited**” in accordance with the International Joint Accreditation Standards. Accreditation decisions are based on a holistic evaluation of the institution and take into consideration the overall effectiveness, maturity, and sustainability of its quality assurance systems and institutional practices, rather than performance in individual indicators alone.

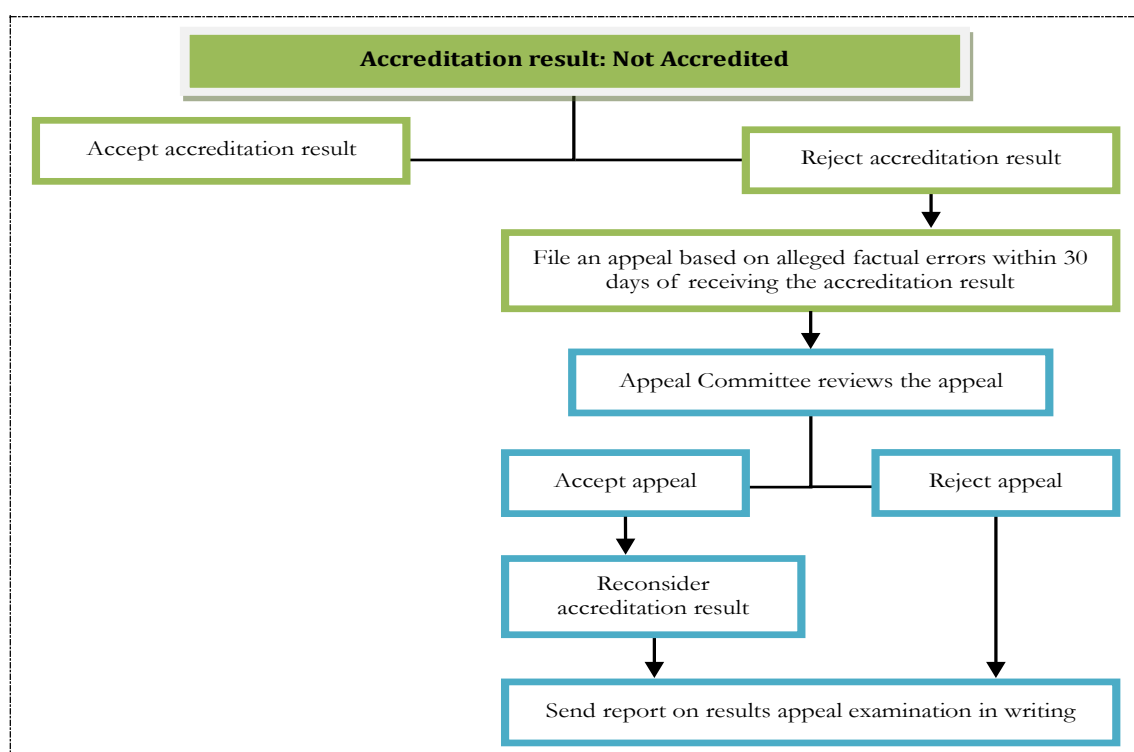
The accreditation period shall commence on the date of approval by the Accreditation Committee and remain valid for six years. Following approval of the accreditation results, an accreditation certificate shall be issued in English. Upon request, an additional version of the certificate may be issued in the official language used by the applicant institution. The accreditation results shall also be published on the official iJAS website and included in relevant public reports and publications. In addition, the results may be disseminated through appropriate communication channels and professional events to enhance transparency, promote international recognition, and facilitate the sharing of quality assurance practices.

[Table 5] Explanation of the International Joint Accreditation Results

Accreditation Results		Description	Remarks
Accredited	Valid for 6 years	⊕ The institution fully meets all requirements of the international joint accreditation standards, provides sufficient supporting information, and demonstrates the capacity for continuous improvement.	⊕ The accreditation period shall commence on the date of approval by the Accreditation Committee. ⊕ Institutions may re-submit their application one year before the accreditation expires.
Not Accredited		⊕ The institution has not yet sufficiently demonstrated achievement of its educational objectives and does not satisfy the basic requirements of the international joint accreditation standards.	⊕ If the institution wishes to appeal the accreditation results, it may submit an appeal within thirty (30) days of receiving the official notification of the accreditation decision.

2-9 Appeal Process

If the institution wishes to appeal the accreditation decision, it may submit an appeal within thirty (30) days of receiving the official notification. Appeals may be submitted by the institution if it does not accept the accreditation results, and only one appeal may be made. Appeals may also only be submitted over “factual errors” in the content of the accreditation report. The appeal process is as shown in the following diagram.



[Figure 3] Appeal Process

2-10 Fees and Logistics

The fee structure for accreditation consists of a **review fee** and **on-site visit expenses**. The review fee charged by the iJAS Secretariat covers the honoraria for Accreditation Committee and Review Team members, reviewer training expenses, and administrative and coordination costs associated with the accreditation process. The travel and accommodation expenses for on-site review are directly borne by the applicant institution. The current review fee is **USD 12,000**.

The applicant institution is responsible for the travel, accommodation, and other logistical arrangements associated with the on-site review. The institution shall arrange, book, and directly cover the related expenses for members of the Review Team. The institution is also expected to provide reasonable local transportation support for Review Team members and accompanying staff, including transfers between the airport, hotel, and campus, and to arrange meals during the on-site review activities.

Throughout the process, the iJAS Secretariat serves as the liaison between the institution and the Review Team, facilitating communication, coordinating arrangements, and confirming the logistical details of the on-site review.

The applicant institution may withdraw its application at any time after the accreditation process has commenced. When an application is withdrawn, the accreditation fees paid will not formally be refunded.

2-11 Preparation and Arrangements for the On-Site Review

2-11-1 Before the On-Site Review

- ⊕ The institution shall ensure that its website is accessible and functioning properly throughout the review period. Information such as transportation guidance and a campus map should be made available for reference.
- ⊕ The Review Team will issue a “Request for Clarification List” no later than five weeks prior to the on-site review. The institution shall submit its responses and any supporting information no later than two weeks prior to the on-site review.
- ⊕ The institution shall prepare the SAR and all relevant supporting evidence for review during the on-site visit.
- ⊕ The iJAS Secretariat will coordinate with the institution and the Review Team to confirm the on-site review schedule, interview arrangements, and participants for meetings and interviews.

2-11-2 During the On-Site Review

- ⊕ In principle, all activities specified in the agreed on-site review schedule shall be conducted as planned.
- ⊕ The institution shall make the necessary arrangements to facilitate the implementation of the review schedule and ensure the participation of relevant personnel in the corresponding sessions.
- ⊕ Any changes to the review schedule or review arrangements shall be agreed upon by the institution and the Review Team to ensure the integrity and completeness of the review process.
- ⊕ To maintain the confidentiality and integrity of the review process, audio or video recording, photography, or other forms of documentation during interviews or review sessions shall not be permitted without the prior consent of the Review Team.
- ⊕ Supporting evidence made available during the on-site review should be organized according to the iJAS standards and indicators. Where evidence is maintained electronically, an appropriate indexing or retrieval system should be provided.
- ⊕ Any amendments or supplementary information submitted during the on-site review may be provided to the iJAS Secretariat with the consent of the institution and following confirmation by the Review Team.
- ⊕ To facilitate the review process and minimize unnecessary travel time, meals may be arranged at the review venue where appropriate. Institutional representatives are not required to accompany the Review Team during meal periods unless otherwise requested by the Review Team.
- ⊕ The institution is requested to provide reasonable assistance regarding campus access, local transportation, and parking arrangements, where necessary.
- ⊕ To preserve the independence and impartiality of the accreditation process, the institution shall refrain from providing gifts, souvenirs, entertainment, or excessive hospitality to members of the Review Team.
- ⊕ During the accreditation process, the institution shall not communicate privately with members of the Accreditation Committee or Review Team regarding accreditation judgments, recommendations, or possible accreditation outcomes.

3 Annex

3-1 Rules Concerning International Joint Accreditation

Rules Concerning International Joint Accreditation

Revised on January 31, 2024

CHAPTER I GENERAL PROVISIONS

Article 1 Purpose

These Rules provide for matters necessary to jointly implement university accreditation (hereinafter referred to as “Joint Accreditation”) pursuant to the Memorandum of Understanding between the listed member agencies.

Article 2 Higher Education Institutions Subject to Joint Accreditation

Higher Education Institutions (hereinafter referred to as “HEIs”) subject to Joint Accreditation are HEIs that have been established under the laws and regulations of the respective countries.

Article 3 Commencement of Joint Accreditation

If a request for Joint Accreditation is received, the International Joint Accreditation Committee (hereinafter referred to as the “Accreditation Committee”) will commence the assessment for Joint Accreditation.

Article 4 Accreditation Method

Accreditations are to be conducted through document analysis based on self-assessment reports and other necessary materials prepared in accordance with the separately provided International Joint Accreditation Standards (hereinafter referred to as the “Standards”) as well as through site visits.

Article 5 Accreditation Results

Accreditation results are certified as “accredited” or “non-accredited” based on the Standards.

Article 6 Accreditation Cycle

HEIs certified as meeting the Standards that wish to be certified on a continuous basis will receive the next accreditation within six years after receiving the previous accreditation.

CHAPTER II MEMBER AGENCIES

Article 7 Eligibility

Member agencies are those that have a proven performance in the university evaluation in their respective countries and that meet the following requirements.

1. Support the purpose of Joint Accreditation.
2. Engage in the Joint Accreditation project.
3. Review their own organization and activities constantly and make efforts to enhance themselves in order to achieve the mission and purpose of their own activities.

Article 8 Accession of New Member Agencies

Agencies may submit a letter of intent and an overview of their agency to the iJAS Secretariat (defined in CHAPTER V) if they wish to become an affiliate. Accession is reviewed by the Accreditation Committee. After approval, the secretariat of each agency reports to its Board of Trustees/Executive Board.

CHAPTER III INTERNATIONAL JOINT ACCREDITATION COMMITTEE

Article 9 Establishment of the Joint Accreditation Committee

The Accreditation Committee is to be established as a collegial body of all member agencies to carry out Joint Accreditation.

Article 10 Composition and Term of Office of Accreditation Committee Members

1. The Accreditation Committee is composed of nine to fifteen committee members.
2. The iJAS Secretariat consults member agencies to nominate representatives. The representatives will be recruited by the member agencies from experts who possess rich experiences in higher education in their respective countries.
3. If there is a vacancy among the committee members, it shall follow the procedures set out in paragraph 2 of this Article and fill the vacancy.
4. The term of office of each committee member is three years. There shall be no limit on consecutive terms.
5. The term of office of a replacement committee member is the remaining term of the predecessor of that committee member.

Article 11 Committee Chair and Vice-Chair

1. The Accreditation Committee consists of one committee chair and one committee vice-chair.
2. The committee chair and vice-chair are elected by the committee members. At the point, the committee chair and vice-chair will be selected from different countries.
3. The committee chair is in charge of the duties of the Accreditation Committee.
4. The committee vice-chair assists the committee chair, and if the committee chair is unable to perform the duties or if the office of the committee chair is vacant, the committee vice-chair will act in the place. In the case of a vacancy, a new committee chair shall be appointed as soon as practicable.

Article 12 Holding of Accreditation Committee Meetings

1. The committee chair shall convene Accreditation Committee meetings; provided, however, that the committee chair must convene an Accreditation Committee meeting no later than forty-five days if one-third or more of the committee members so request.
2. In the case of the preceding paragraph, the Accreditation Committee may hold a meeting using the web conference system if the committee chair deems it necessary.
3. In the case referred to in the preceding paragraph 1, the committee chair may substitute a resolution of the Accreditation Committee by obtaining the approval of the committee members in writing or by other means, without convening an Accreditation Committee meeting if the committee chair deems it necessary.
4. No Accreditation Committee meeting may be held without the attendance of half or more of the committee members.
5. Decisions of the Accreditation Committee are to be made by a majority of the committee members in attendance, and in the event of a tie, the committee chair shall make that decision.

Article 13 Exclusion of Interested Parties

1. No Accreditation Committee member may participate in deliberations or decisions related to the Joint Accreditation of the HEI to which that member belongs.
2. If any committee member falls under the preceding paragraph, that member will not be included in the committee members in attendance under Article 12 paragraph 3.

Article 14 No Proxies for Accreditation Committee Members

The duties of an Accreditation Committee member may not be performed by a proxy.

CHAPTER IV REVIEW TEAM

Article 15 Establishment of the Review Team

The Review Team is to be established to conduct document analysis and site visits under the Accreditation Committee.

Article 16 Composition of the Review Team

1. In principle, the Review Team is to be composed of five members.
2. In principle, one of the members in the preceding paragraph will be selected by the Accreditation Committee from the country of the Applicant HEI (defined in CHAPTER VI).
3. The four members in paragraph 1 other than the member selected in paragraph 2 will be selected by the Accreditation Committee from among countries other than the country of the Applicant HEI.
4. If there is a vacancy among the Review Team members, the Accreditation Committee shall fill that vacancy in accordance with the procedures in paragraph 2 or paragraph 3 (as applicable).
5. The Review Team member cannot be the expert from the Applicant HEI.

Article 17 Chief of Review Team

1. The Review Team is to have one chief.
2. The chief is to be appointed by the Accreditation Committee from among the members. At that time, the member selected in paragraph 2 of the preceding article may not be appointed as the chief.
3. The chief shall convene the Review Team meeting in accordance with the instructions of the Accreditation Committee chair.

Article 18 No Proxies for Reviewers

The duties of a reviewer may not be performed by a proxy.

CHAPTER V SECRETARIAT**Article 19 Establishment of the iJAS Secretariat**

To promote Joint Accreditation, the Japan University Accreditation Association and the Taiwan Assessment and Evaluation Association as the two founding agencies jointly establish a Secretariat. The duties of the iJAS Secretariat are to:

1. Policy Development: The Secretariat formulates draft policies for Joint Accreditation, including standards, criteria, and guidelines.
2. Coordination and Planning: The Secretariat coordinates, plans, and oversees Joint Accreditation tasks, providing transparent updates and reports to stakeholders.
3. Quality Assurance: The Secretariat ensures accreditation process integrity, conducting periodic evaluations and addressing deficiencies.
4. Capacity Building: The Secretariat organizes workshops and training for personnel and reviewers in Joint Accreditation, enhancing competencies.
5. International Collaboration: The Secretariat collaborates with other agencies, fostering global recognition of Joint Accreditation through knowledge-sharing.

CHAPTER VI JOINT ACCREDITATION PROCEDURES**Article 20 Submission of Materials**

1. A HEI that applies for Joint Accreditation (hereinafter referred to as an “Applicant HEI”) shall submit an application form and prescribed materials to the iJAS Secretariat by the specified date.
2. An Applicant HEI shall submit any additional materials other than those set out in the preceding paragraph if so requested by the Accreditation Committee or the Review Team.

Article 21 Withdrawal of Application

1. An Applicant HEI may withdraw its application on or after the day on which the Accreditation Committee starts the accreditation process. When an application is withdrawn, the accreditation fee paid will not formally be refunded.

2. Any request in the preceding paragraph must be made in writing.

Article 22 Training of Committee Members and Reviewers

The iJAS Secretariat shall plan training for committee members and reviewers on evaluation practices. The member agencies shall provide training in an appropriate manner in accordance with the accreditation schedule.

Article 23 Document Analysis

The Review Team shall carry out document analysis based on the materials submitted by each Applicant HEI.

Article 24 Site Visits

The Review Team shall carry out site visits in which all of the Review Team members participate based on the document analysis.

Article 25 Preparation of Accreditation Results (Draft by Review Team)

The Review Team chief shall prepare the accreditation results (draft by Review Team) by the specified date based on the document analysis and site visit.

Article 26 Statement of Opinion

1. The iJAS Secretariat shall present the accreditation results (draft by Review Team) in the preceding article to the Applicant HEI.
2. After receiving the accreditation results (draft by Review Team), the Applicant HEI may state its opinion on any factual error or other matters in the accreditation results (draft by Review Team) to the Review Team in writing by the specified date.
3. If the Applicant HEI states its opinion under the preceding paragraph, the Review Team chief shall hold a Review Team meeting and deliberate on whether to adopt that opinion.
4. As a response to the stated opinion, the decision on whether to adopt that opinion, together with the reason therefor, is to be promptly conveyed to the Applicant HEI.

Article 27 Determination of the Accreditation Results

1. After the procedures in the preceding article are complete, the Review Team chief shall submit the accreditation results (final draft) to the Accreditation Committee.
2. The Accreditation Committee shall deliberate on the accreditation results (final draft) and confirm the accreditation results.
3. Each member agency reports the accreditation results to its own Board of Trustees/Executive Board.

CHAPTER VII ANNOUNCEMENT OF ACCREDITATION RESULTS

Article 28 Notification of Accreditation Results

After obtaining the decision of the Accreditation Committee on the accreditation results, the iJAS Secretariat shall promptly notify the Applicant HEI of those results.

Article 29 Announcement of Accreditation Results

Each member agency shall announce the accreditation results on their respective websites.

CHAPTER VIII REVIEW OF APPEALS AGAINST ACCREDITATION RESULTS**Article 30 Appeal Committee**

An appeal is to be reviewed by reviewers from countries other than the country of the Applicant HEI.

Article 31 Review Procedures

Appeal review procedures are to be separately provided.

CHAPTER IX CERTIFICATE OF ACCREDITATION**Article 32 Certificate of Accreditation**

A Certificate of Accreditation is to be delivered to any Applicant HEI that has been accredited as meeting the Standards as a result of the Joint Accreditation.

CHAPTER X ACCREDITATION FEE**Article 33 Accreditation Fee**

An accreditation fee is to be separately stipulated upon consultation among each member agency.

CHAPTER XI REVISION OF THE STANDARDS**Article 34 Establishment of and Revisions to the Standards**

The Standards are established and revised by the Accreditation Committee.

CHAPTER XII MISCELLANEOUS**Article 35 Revisions to and Abolition of these Rules**

Revisions to and abolition of these Rules are to be made by the Accreditation Committee.

3-2 Rubric Framework for Institutional Accreditation



Rubric Framework for Institutional Accreditation

(A) Rubric Level Definitions

Level	Description
1. Initial	Institutional practices are largely undeveloped and fragmented, with no clear framework or systematic implementation in place.
2. Evolving	Basic practices are in place, but they remain informal, inconsistently applied, and not yet embedded in institutional systems.
3. Mature	Practices are formalized and consistently applied across the institution, with moderate coherence and operational stability.
4. Advanced	Practices are institutionally integrated, regularly reviewed, and refined based on performance data and stakeholder feedback.
5. Exemplary	Practices demonstrate innovation, stakeholder engagement, collaborative governance, and strategic leadership that generate meaningful institutional and societal outcomes.

(B) Rubric Tables

Standard 1: Institutional Mission, Governance & Strategic Sustainability

Indicator	Level 1: Initial	Level 2: Evolving	Level 3: Mature	Level 4: Advanced	Level 5: Exemplary
1-1. Mission, Vision, and Institutional Identity	Mission and vision are unclear, outdated, or undocumented, are not consistently accessible, show little reflection of institutional identity, involve minimal stakeholder engagement, and are not reviewed systematically.	Mission and vision are documented and available in limited forms, but are inconsistently communicated and only partially accessible, reflect institutional identity in limited ways, involve occasional stakeholder input, and are reviewed informally or irregularly.	Mission and vision are clearly documented and publicly accessible, reflect a coherent institutional identity, engage key stakeholders periodically, and are reviewed on a defined cycle with stable implementation across the institution.	Mission and vision are clearly documented and widely accessible, reflect and reinforce institutional identity in governance and quality processes, engage diverse stakeholders through structured consultation, and are regularly reviewed and refined using performance evidence and stakeholder feedback.	Mission and vision are collaboratively documented through broad stakeholder co-creation, are highly accessible and widely understood, strongly embody and shape institutional identity and culture, engage stakeholders as ongoing partners in governance, and are continuously reviewed and renewed to drive strategic leadership and meaningful institutional and societal outcomes.

Indicator	Level 1: Initial	Level 2: Evolving	Level 3: Mature	Level 4: Advanced	Level 5: Exemplary
1-2. Sustainability Foresight and Strategic Alignment	The institution rarely monitors external trends, and strategic actions show limited relevance or public impact.	The institution responds to trends in an ad hoc manner, and improvement actions are inconsistently evidenced and not supported by systematic analytics.	The institution conducts regular environmental scanning and uses evidence to adjust priorities to maintain relevance and operational sustainability.	The institution systematically integrates performance data and stakeholder feedback to anticipate change and refine initiatives for measurable impact and sustainability.	The institution employs strategic foresight and advanced analytics to proactively lead transformation and demonstrate sustained, measurable institutional and societal outcomes.
1-3. Strategic Planning and Institutional Resilience	Strategic planning is ad hoc or outdated, with little alignment to mission or evidence-based practices.	Basic strategic plans exist but lack coherence, stakeholder input, or systematic review processes.	Strategic plans are evidence-informed, reviewed periodically, and moderately align with institutional mission.	Plans are forward-looking and evidence-informed, supported by systematic data analysis and stakeholder input, and enhanced by advanced analytics (where appropriate) to strengthen institutional resilience and adaptability.	Strategic planning is dynamic and inclusive, using advanced analytics and, where appropriate, AI-enabled foresight to guide timely interventions, resulting in demonstrable improvements in long-term resilience.
1-4. Governance and Stakeholder Participation	Governance roles and processes are unclear, and decision-making is opaque with minimal stakeholder participation.	Governance structures exist, but transparency and stakeholder engagement are limited and inconsistent.	Governance roles and procedures are defined, and stakeholder input is periodically incorporated into decisions.	Governance is participatory and accountable, and decisions are evidence-informed and regularly evaluated for effectiveness.	Governance is collaborative and agile, and it enables ethical leadership, innovation, and a sustained culture of improvement.
1-5. Ethical Leadership and Staff Development	Leadership lacks clear direction and does not support staff development or governance structures.	Leadership is partially inclusive; professional development opportunities are limited or informal.	Leadership is ethically grounded and inclusive; staff development is structured and supports institutional goals.	Visionary leadership fosters data-informed governance and promotes digital and AI literacy across staff.	Leadership exemplifies innovation and ethical foresight, guiding staff development and AI readiness institution-wide.
1-6. Financial Sustainability	Financial planning is reactive, with unclear budgeting and insufficient resources for mission delivery.	Basic financial systems are in place, but planning is short-term and misaligned with strategic goals.	Financial management is stable and aligned with long-term goals, with periodic reviews.	Financial systems support strategic priorities and adapt to internal and external changes.	Financial planning is strategic, forward-looking, and ensures long-term sustainability through risk-informed practices.

Standard 2: Internal Quality Assurance & Accountability

Indicator	Level 1: Initial	Level 2: Evolving	Level 3: Mature	Level 4: Advanced	Level 5: Exemplary
2-1. IQA Policy and Structure	The institution lacks a formal IQA policy, and quality responsibilities are unclear or fragmented.	The institution has basic QA rules or guidelines, but they are incomplete, inconsistently applied, or not institution-wide.	The institution has a documented IQA policy with defined roles and procedures that are implemented across units.	The IQA policy is aligned with institutional strategy and international good practice, and it is regularly reviewed and updated.	The IQA policy is deeply embedded in institutional culture, is co-owned by stakeholders, and demonstrably guides strategic decisions and improvement priorities.
2-2. Operational Effectiveness and Intelligent Monitoring	IQA operations are sporadic, manual, and largely disconnected across academic and administrative areas.	IQA processes operate in selected units, but coordination is weak and monitoring is mostly periodic and reactive.	IQA processes function across key areas with defined workflows, and data are used for routine monitoring and follow-up.	IQA operations are integrated across the institution, supported by interoperable data systems and AI-enabled tools (where appropriate) for timely monitoring and decision support.	IQA operations are agile and consistently effective, using integrated platforms and AI-enabled analytics (where appropriate) to enable real-time oversight and rapid, evidence-based improvement.
2-3. Evidence-based Quality Improvement	Improvement actions are not evidence-based, and evaluation results are rarely collected or used.	Data and feedback are collected, but analysis is limited and improvement actions are inconsistent or undocumented.	The institution analyzes evidence and uses results to plan and implement improvement actions across major functions.	Improvement cycles are systematic and institution-wide, using performance analytics and AI-enabled tools (where appropriate) together with stakeholder feedback to refine processes and outcomes.	The institution uses advanced analytics and, where appropriate, AI-driven insights to anticipate risks, prioritize improvements, and demonstrate measurable enhancement over time.
2-4. Public Information and Transparency	Little or no information is publicly available about institutional performance or academic offerings.	Some information is published but lacks consistency, clarity, or accessibility.	The institution publishes core information related to academic and operational performance.	Transparency is proactive, with regularly updated, user-friendly, and comprehensive disclosures.	Public reporting includes performance metrics, strategic progress, and impact analysis co-communicated with stakeholders.
2-5. Review and Evaluation Mechanisms	No mechanisms exist to review or improve the IQA system itself.	Ad hoc or informal evaluations are occasionally conducted.	Periodic internal reviews are conducted with limited external input.	The IQA system undergoes regular internal and external evaluation with benchmarking.	Review processes are embedded in institutional governance, driving continuous innovation and systemic quality culture.

Standard 3: Teaching, Learning & Student Achievement

Indicator	Level 1: Initial	Level 2: Evolving	Level 3: Mature	Level 4: Advanced	Level 5: Exemplary
3-1. Academic Policies	Academic policies are incomplete, unclear, or inconsistently applied.	Basic policies are in place but are inconsistently communicated or enforced.	Academic policies are documented, publicly available, and applied across major functions.	Policies are clearly aligned with institutional goals and regularly reviewed for effectiveness.	Policies are strategic, equity-focused, and co-developed with stakeholders to drive academic quality and access.
3-2. Student Admission Information and Fair Selection	Admission criteria are unclear or inconsistently applied, with limited regard for student readiness or equity.	Basic admission policies exist but lack alignment with institutional mission or consistent review mechanisms.	Clear, fair admission policies are implemented and aligned with institutional goals, with periodic review of admission outcomes.	Admissions policies are consistently applied, regularly updated based on data and stakeholder input, and supported by guidance systems.	Admissions processes are transparent, equity-driven, data-informed, and strategically aligned with student success and institutional goals.
3-3. Curriculum Design and Technology-Enhanced Learning	Curriculum design is fragmented, and alignment among intended learning outcomes, content, teaching, and assessment is not evident.	Curriculum procedures exist, but alignment and review are inconsistent, and technology use is limited, uncoordinated, or not clearly linked to learning outcomes.	The institution applies clear curriculum procedures and ensures constructive alignment that supports intended learning outcomes, making appropriate and coordinated use of digital tools where they add educational value.	The curriculum integrates interdisciplinary learning and sustainability, incorporates technology-enhanced approaches (where appropriate) to strengthen learning design, and is regularly reviewed.	The curriculum is agile and globally benchmarked, and it leverages advanced learning technologies (where appropriate) to deliver demonstrable improvements in curriculum relevance, learning effectiveness, and learning outcomes.
3-4. Faculty Structure for Education Delivery	Faculty roles and workload arrangements are unclear, and teaching delivery depends on individual effort rather than coordinated structures.	Faculty deployment exists, but workload allocation is uneven or informally managed, collaboration is limited, and teaching quality assurance is inconsistent.	Faculty roles are defined, workload allocation follows basic rules and supports program delivery, and teaching quality is reviewed using transparent criteria.	Faculty structures enable interdisciplinary collaboration and innovation, and workload and deployment policies are reviewed and adjusted to respond to evolving learner needs and institutional priorities.	Faculty structures are highly collaborative and adaptable, and workload models are flexible, equitable, and strategically managed to enable future-focused teaching excellence, sustained innovation, and continuous program enhancement.

Indicator	Level 1: Initial	Level 2: Evolving	Level 3: Mature	Level 4: Advanced	Level 5: Exemplary
3-5. Learning Support and Pedagogy	Teaching relies on limited methods, and academic support services are minimal or difficult to access.	Some support services and technology tools exist, but provision is inconsistent and pedagogy remains largely traditional.	The institution applies student-centered pedagogy and provides accessible academic support that promotes engagement and achievement.	The institution integrates inclusive pedagogy with context-appropriate innovations, including digital approaches where relevant, supported by timely and effective services that enhance student engagement and learning effectiveness.	The institution delivers highly personalized and scalable learning support through digital or other effective approaches as appropriate, and demonstrates strong and sustained learning effectiveness and student success.
3-6. Learning Environment and Infrastructure	Learning spaces and digital access are insufficient, and infrastructure does not reliably support teaching and learning needs.	Basic facilities and platforms exist, but accessibility, maintenance, and user support are uneven.	Physical and digital infrastructure adequately supports program delivery and is generally accessible to learners.	Infrastructure is continuously upgraded to support diverse learning modalities, including smart classrooms and immersive or AI-enabled platforms where relevant.	Infrastructure is future-ready and inclusive by design, and it demonstrably enables flexible, high-quality, and technology-enhanced learning experiences.
3-7. Student Support and Well-being	Student support services are limited, fragmented, or unavailable, and access is not systematically ensured.	Some services exist, but coverage is uneven and coordination across academic, psychological, and career support is limited.	The institution provides integrated support services for learning, well-being, and career development with equitable access.	Support services are data-informed and proactive, and they are refined based on student needs, outcomes, and feedback.	Support systems are comprehensive and personalized, and they demonstrably strengthen student resilience, employability, and engagement with society.
3-8. Learning Outcomes Assessment	Learning outcomes are not systematically assessed; data use is minimal.	Basic outcome assessment occurs at some levels, but not systematically; limited use of data.	Learning outcomes are assessed at course and program levels; data informs teaching and review.	Assessments occur across all levels, supported by data analysis; results inform curriculum and planning.	Comprehensive outcome assessments are integrated into institutional planning and curriculum enhancement, with digital or AI-assisted approaches applied where appropriate.
3-9. Assessment and Degree Awarding	Assessment is irregular or lacks clear alignment with learning outcomes. Degree awarding is inconsistently applied.	Assessment practices are developing but vary widely in quality and transparency.	Assessments are valid, aligned with outcomes, and consistently implemented; degree conferral processes are formalized.	Transparent and authentic assessments are linked to outcomes and reviewed for integrity and fairness.	Assessments use diverse, innovative methods and data analytics to uphold academic integrity and drive continuous improvement.

Indicator	Level 1: Initial	Level 2: Evolving	Level 3: Mature	Level 4: Advanced	Level 5: Exemplary
3-10. Program Review and Enhancement	Program review is absent or irregular, and improvement actions are not documented or sustained.	Reviews occur occasionally, but methods are inconsistent and follow-up actions are limited.	Programs are reviewed on a regular cycle using structured procedures and evidence, and improvements are documented.	Reviews integrate outcomes data, stakeholder feedback, and benchmarking, and findings drive targeted curriculum and delivery enhancement.	Program review is continuous and strategic, and it demonstrably strengthens relevance, quality, and labor-market or societal alignment through sustained improvement.

Standard 4: Faculty Development & Research Engagement

Indicator	Level 1: Initial	Level 2: Evolving	Level 3: Mature	Level 4: Advanced	Level 5: Exemplary
4-1. Recruitment and Performance Management	The institution lacks clear and transparent policies for recruitment, evaluation, and promotion, and there is no systematic review of these processes.	The institution has basic recruitment and evaluation procedures, but implementation is uneven and reviews are informal or irregular, with limited alignment to institutional values and equity principles.	The institution consistently applies documented, merit-based recruitment, evaluation, and promotion policies, and it conducts periodic internal reviews to support alignment with institutional goals.	The institution regularly reviews recruitment and performance systems using evidence and stakeholder input, and it strengthens fairness, quality, and alignment with evolving needs.	The institution operates an integrated talent system with continuous, evidence-informed review and improvement, attracting and retaining diverse excellence, supporting clear career pathways, and demonstrably strengthening institutional capacity and impact.
4-2. Faculty Development (FD) Programs	The institution provides little or no structured faculty development; activities are rarely offered, or—when offered—participation is low or undocumented.	The institution offers some FD activities, but they are ad hoc or optional, and weakly linked to institutional priorities; participation and follow-up are not systematically tracked.	The institution delivers structured and regular FD programs that are accessible to faculty and support teaching, research engagement, and leadership development.	The institution aligns FD with strategy and includes training in innovative pedagogy, AI and digital integration, and inclusive teaching, and it reviews effectiveness using participation data and documented outcomes.	The institution delivers faculty-led, co-designed FD that embeds AI-enabled learning analytics and global collaboration, and it demonstrates measurable improvements in teaching quality, research capacity, and societal engagement outcomes.

Indicator	Level 1: Initial	Level 2: Evolving	Level 3: Mature	Level 4: Advanced	Level 5: Exemplary
4-3. Research and Knowledge Transfer	Faculty research and external engagement are limited, fragmented, or disconnected from teaching and societal needs.	Some faculty conduct research or outreach, but collaboration is limited and knowledge transfer is unstructured or inconsistent.	Faculty research and professional practice inform teaching and include partnerships with community or industry, and outputs are integrated into learning activities.	Faculty engage in interdisciplinary and collaborative research with clear application to real-world issues, and research outcomes are systematically integrated into curriculum and outreach.	Research is co-produced with external stakeholders and leverages advanced technologies and data-driven insights to generate demonstrable improvements in teaching capacity, curriculum enrichment, institutional innovation, and societal advancement.
4-4. Research Relevance and Impact	Research lacks strategic focus or relevance to social needs or global trends.	Some research aligns with societal issues or sustainability, but impact is limited or unmeasured.	Institutional support promotes research addressing national and global challenges with some impact tracking.	Research agendas are aligned with sustainable development, equity, and interdisciplinary innovation, supported by strong institutional infrastructure.	Research demonstrates transformative societal impact, is openly disseminated, and contributes to inclusive global knowledge ecosystems.

Standard 5: Social Engagement & Global Connection

Indicator	Level 1: Initial	Level 2: Evolving	Level 3: Mature	Level 4: Advanced	Level 5: Exemplary
5-1. Social Engagement Policies and Initiatives	The institution lacks clear engagement policies, and civic or community activities are minimal and uncoordinated, with no systematic review or documentation.	The institution has basic engagement intentions, but activities are isolated and not guided by consistent frameworks or targets, and review is informal or irregular.	The institution has defined engagement policies and implements coordinated initiatives through education, research, or service, and it conducts periodic review based on documented outputs and outcomes.	The institution aligns engagement policies with regional needs and institutional priorities, and it reviews effectiveness using evidence and structured stakeholder feedback to inform improvement actions.	The institution embeds public engagement into its identity and strategy, and it maintains continuous, impact-oriented review and learning cycles that demonstrate sustained, measurable community and societal outcomes through collaborative initiatives.

Indicator	Level 1: Initial	Level 2: Evolving	Level 3: Mature	Level 4: Advanced	Level 5: Exemplary
5-2. Cross-Sector and Academic Collaboration	Collaboration with industry, government, or civil society is limited, informal, or short-term, with no clear structure or outcomes.	The institution signs MOUs or conducts occasional projects, but partnership governance and follow-through are inconsistent.	The institution maintains functional partnerships that support student projects, applied research, or knowledge exchange with documented outputs.	The institution sustains long-term, outcome-oriented partnerships that support applied innovation, service learning, and policy dialogue, and it evaluates impact using evidence.	The institution co-develops strategic alliances with partners that drive inclusive innovation and community development, and it demonstrates significant, shared societal outcomes.
5-3. Internationalization and Mobility	International activities are limited, and opportunities for intercultural learning are rare or not systematically supported.	The institution offers occasional exchanges or partnerships, but participation is limited and learning outcomes are not clearly defined.	The institution implements a clear internationalization strategy with regular mobility and partnership activities that support intercultural learning.	The institution integrates internationalization through inclusive approaches such as COIL and IaH, and it assesses international and intercultural learning outcomes where appropriate.	The institution advances reciprocal, sustainable global partnerships that expand access to international learning for most learners and demonstrate measurable global competency outcomes.
5-4. Contribution to Societal Engagement and Impact	Outreach and engagement activities are sporadic, weakly aligned with mission, and rarely documented or evaluated.	The institution conducts some outreach activities, but alignment, coordination, and impact assessment remain limited.	The institution aligns outreach and extension activities with mission, documents participation, and demonstrates tangible contributions to community needs.	The institution designs interdisciplinary, community-driven initiatives with stakeholders, and it evaluates outcomes using evidence related to well-being, equity, or social innovation.	The institution consistently generates meaningful societal impact through co-created partnerships, recognized participation by faculty, staff, and students, and transparent evidence of sustained outcomes.

3-3 Application Form

International Joint Accreditation

[Part 1] Basic Information

Institution			
Number of Academic Units		Total Number of Students	
Academic Units			
Academic Unit	Program Level	Number of Students	Year Established
1.	1. 2. 3.	1. 2. 3.	1. 2. 3.
2.			
3.			

[Part 2] Contact Information

Contact Person	Name		Title	
	Office		Email	
	Telephone	() Extension	Fax	()

I, the undersigned (name) (position) representative of (institution) hereby certify that the information provided in this application is true and correct, and that the institution hereby applies for the International Joint Accreditation.

President: (Signature/Stamp) Date: YYYY / MM / DD

3-4 Format of Self-Assessment Report**International Joint Accreditation****XX University**

(28-point, Times New Roman)

Self-Assessment Report

(24-point, Times New Roman)

(Cover page can be of your own design)

President		Signature/ Stamp		(Please stamp with official seal)
Person in Charge		Signature/ Stamp		
Contact details				
Name		Title		
Telephone				
Fax				
Mobile				
Email				
Date	Y Y Y Y / M M / D D			

I. Executive Summary

- Institutional profile (brief)
- Key strengths
- Major areas for improvement
- Strategic priorities

II. Institutional Overview

- History and development
- Mission and strategic direction
- Organizational structure

III. Self-Assessment by Standards

Chapter 1 [Standard 1: Institutional Mission, Governance & Strategic Sustainability]

- 1-1 Mission, Vision, and Institutional Identity
- 1-2 Sustainability Foresight and Strategic Alignment
- 1-3 Strategic Planning and Institutional Resilience
- 1-4 Governance and Stakeholder Participation
- 1-5 Ethical Leadership and Staff Development
- 1-6 Financial Sustainability

Examples of Good Practice

The following examples have been identified as good practice:

- i.
- ii.

Areas for Improvement

The university's evaluation processes have identified the following as areas requiring improvement.

- i.
- ii.

Action Plan

Chapter 2 [Standard 2: Internal Quality Assurance & Accountability]

- 2-1 IQA Policy and Structure
- 2-2 Operational Effectiveness and Intelligent Monitoring
- 2-3 Evidence-based Quality Improvement
- 2-4 Public Information and Transparency
- 2-5 Review and Evaluation Mechanisms

Examples of Good Practice

The following examples have been identified as good practice:

- i.
- ii.

Areas for Improvement

The university's evaluation processes have identified the following as areas requiring improvement.

- i.
- ii.

Action Plan**Chapter 3 [Standard 3: Teaching, Learning & Student Achievement]**

3-1 Academic Policies

3-2 Student Admission Information and Fair Selection

3-3 Curriculum Design and Technology-Enhanced Learning

3-4 Faculty Structure for Education Delivery

3-5 Learning Support and Pedagogy

3-6 Learning Environment and Infrastructure

3-7 Student Support and Well-being

3-8 Learning Outcomes Assessment

3-9 Assessment and Degree Awarding

3-10 Program Review and Enhancement

Examples of Good Practice

The following examples have been identified as good practice:

- i.
- ii.

Areas for Improvement

The university's evaluation processes have identified the following as areas requiring improvement.

- i.
- ii.

Action Plan**Chapter 4 [Standard 4: Faculty Development & Research Engagement]**

4-1 Recruitment and Performance Management

4-2 Faculty Development (FD) Programs

4-3 Research and Knowledge Transfer

4-4 Research Relevance and Impact

Examples of Good Practice

The following examples have been identified as good practice:

- i.
- ii.

Areas for Improvement

The university's evaluation processes have identified the following as areas requiring improvement.

- i.
- ii.

Action Plan

Chapter 5 [Standard 5: Social Engagement & Global Connection]

5-1 Social Engagement Policies and Initiatives

5-2 Cross-Sector and Academic Collaboration

5-3 Internationalization and Mobility

5-4 Contribution to Societal Engagement and Impact

Examples of Good Practice

The following examples have been identified as good practice:

- i.
- ii.

Areas for Improvement

The university's evaluation processes have identified the following as areas requiring improvement.

- i.
- ii.

Action Plan

IV. Other Information (Optional)

V. Conclusion

3-5 Format for Opinion Statement



International Joint Accreditation

Instructions on Writing Opinion Statement

1. If you believe that the draft accreditation report contains any factual errors, including misunderstandings by the Review Team or statements that do not accurately reflect the institution's actual circumstances, you may submit an **Opinion Statement** using the form provided below. There is no need to respond to every comment or observation in the draft accreditation report.
2. The Opinion Statement should not be used to request a re-review of corrective actions that have been taken or are planned for future implementation in response to the draft accreditation report. Matters outside the scope of factual errors will not be considered.
3. The institution's explanations should be concise and presented in bullet-point format. The explanation for each item should not exceed one page (similar issues may be consolidated under a single item) and should be provided under the relevant accreditation report item. Any supporting documents should be attached and clearly indexed for ease of reference. The Opinion Statement should be prepared in **English using 12-point Times New Roman**. If additional space is required, please expand the form as necessary. (Please refer to the sample below).
4. Please send **XX printed copies** of the "Opinion Statement" to the iJAS Secretariat and upload the **electronic file to the iJAS Cloud** before **YYYY/MM/DD**.



International Joint Accreditation

XX University

Opinion Statement

President	
Signature	
Application Date	Y Y Y Y / M M / D D

This application has a total of ____ pages (including this page)

Accreditation Report Items to Opinion Statement	
Accreditation standard	1. Institutional Mission, Governance & Strategic Sustainability
Item requiring corrective action and recommended corrective action	3. ○○○○ should establish..... Complementary measures.....
Attachments	☒ Yes ☐ No
Explanation 1. On YYYY/MM/DD, the institution..... 2. The institution..... (Attachment 1)	

3-6 Appeal Format**International Joint Accreditation****Instructions for Writing of Appeal Application**

1. The institution may submit an appeal application once the results of the international joint accreditation have been announced.
2. Please state all the inaccuracies and reasons under each reason for appeal. The appeal will be rejected otherwise.

An “inaccuracy” refers to any data, information, or other content used in determining the accreditation results that does not accurately reflect the actual circumstances of the institution during the assessment period. Where the inaccuracy was due to the omissions or errors in the information provided by the appealing school at the time of examination, then this may not be used as the reason for appeal.

3. The appeal application should be prepared in bullet-point format. **Use the Times New Roman font in 12 pt size for English text.** Please expand the fields as necessary if there is insufficient space on the form. Any supporting information should be included with the appeal application when it is submitted.
4. Please send **XX printed copies** of the “Appeal Application” to the iJAS Secretariat and upload the **electronic file to the iJAS Cloud** before **YYYY/MM/DD**.



International Joint Accreditation

XX University

Appeal Application

President	
Signature	
Date of Appeal	Y Y Y Y / M M / D D

This application has a total of ____ pages (including ____ pages of attachments)

Abstract of accreditation report	Description of grounds for complaint	Title of supporting information attached

3-7 Further Information and Contacts

Should there be any further queries or questions concerning this project, please get in contact with the iJAS Secretariat.

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International Joint Accreditation Standards



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