



# Standards and Procedural Rules for the Certification of Further Education Institutions

Version: 20.09.2024

Status: *Adopted*  
*Certification Commission*

**ASIIN Consult GmbH**

PO Box 10 11 39

40002 Düsseldorf

Tel.: 0211 900 977-0

Fax: 0211 900 977-99

URL: <http://www.asiin.de>

E-Mail: [info@asiin.de](mailto:info@asiin.de)

Version: 20.09.2024

Copyright Notice:

This document is subject to copyright. Processing and any kind of utilization outside the limits of copyright law, in particular for commercial purposes, require written consent.

## Content

<b>1</b>	<b>Purpose of this Document</b>	<b>4</b>
<b>2</b>	<b>Institutional Certification by ASIIN</b>	<b>5</b>
<b>3</b>	<b>Standards for Institutional Certification</b>	<b>6</b>
<b>4</b>	<b>Procedural Principles</b>	<b>12</b>
4.1	Application and Required Documents in the Procedure	12
4.1.1	Application Procedure and Proposal	12
4.1.2	Self-Evaluation	12
4.1.3	Sample	13
4.1.4	Course of the Procedure	14
4.2	Subsequent Institutional Certification	16
4.3	Results and Deadlines of the Procedure	16
4.4	Review of Fulfillment of Requirements	17
4.5	Resumption of the Procedure after Suspension	17
4.6	External Monitoring Procedure	18
4.7	On-Site Visit at the Institution	19
4.8	Criteria for the Selection of Experts	20
4.9	Role and Function of the ASIIN Project Manager	21
4.10	Complaints and Appeals Procedure	22
4.11	Withdrawal of the Application	22
4.12	Changes during the Certification Period	22
4.13	Renewed Certification („Re-Zertifizierung“)	23
4.14	Contractual Basis	23

## 1 Purpose of this Document

The offer of institutional certification is aimed at higher education further education institutions, institutes and affiliated institutes of higher education with a corresponding focus, further education academies in the private sector and private further education providers. The focus is on educational offers at levels 6 - 8 EQF (Bachelor, Master, PhD) of the European Qualifications Framework (EQF) below degree course level as well as those at level 5. In the institutional certification procedure, a further education institution must demonstrate that it regularly reviews its educational offers and associated processes as part of its internal quality management - from conception and implementation to quality assurance and further development. It must demonstrate in a comprehensible manner that the establishment, implementation and support of these educational offerings in particular are carried out in accordance with the following standards and, accordingly, with the “Standards and Guidelines for Quality Assurance in the European Higher Education Area” (ESG, 2015)<sup>1</sup>. In this respect, the aim is to clearly determine whether the quality management system (QMS) of the further education institution meets the requirements of each individual quality standard.

In addition to the presentation and documentation of internal quality management, institutional certification also requires proof of its effectiveness. The procedure therefore concludes with an assessment of the QMS by an external group of experts and a decision on the certification of the institution by the ASIIN Certification Commission<sup>2</sup>. Both are documented in writing in a certification report by the expert group, which is made available to the applicant institutions.

The *certification procedure* leads to findings on the status quo of a QMS and the proven fulfillment or non-fulfillment of minimum requirements. The *evaluation procedure*, on the other hand, is concerned with the **development prospects** of a QMS on the basis of assessments of the degree of implementation achieved.

---

<sup>1</sup> The ESG are available online at: [http://ehea.info/media.ehea.info/file/2015\\_Yerevan/72/7/European\\_Standards\\_and\\_Guidelines\\_for\\_Quality\\_Assurance\\_in\\_the\\_EHEA\\_2015\\_MC\\_613727.pdf](http://ehea.info/media.ehea.info/file/2015_Yerevan/72/7/European_Standards_and_Guidelines_for_Quality_Assurance_in_the_EHEA_2015_MC_613727.pdf) (accessed: 26.02.2024)

<sup>2</sup> The ASIIN Certification Commission is made up of experts who combine professional expertise with experience in the leadership and management of various further education institutions. Further information can be found at: <https://asiin.de/en/certification-commission.html>

## 2 Institutional Certification by ASIIN

If successful, ASIIN Consult GmbH awards the ASIIN certificate to the applicant institution on the basis of the following standards for educational institutions in the further education sector.

The certificate confirms that the further education institution fulfills the framework conditions and requirements for educational offers at levels 5 to 8 of the European Qualifications Framework for Lifelong Learning<sup>3</sup> (EQF).

The certificate can be awarded to further education institutions that offer

- Small teaching/learning units and short-cycle programs at levels 5 to 8 EQF of up to 30 ECTS (modules, certificate courses, summer schools, Diploma of Basic/Advanced Studies (DBS/DAS), Certificate of Basic/Advanced Studies (CBS/CAS), etc.) and/or
- Study programs with a larger number of credit points and/or of longer duration at level 5 EQF.

The ASIIN certificate for the institution also includes all of the aforementioned further education programs at levels 5 to 8 that have successfully completed and are subject to the institution's own QMS (self-certification status; see Section 4.6 below).

---

<sup>3</sup> Available online at: <https://t.co/RGo3B6XSxx> (accessed: 26.02.2024)

### 3 Standards for Institutional Certification

The following table documents the relevant test fields and related quality standards of ASIIN for the assessment of quality management systems of higher education and other further education providers (with a focus on teaching/learning processes and educational offers of levels 5 to 8 EQF). It also shows the correspondence to the “Standards and Guidelines for Quality Assurance in the European Higher Education Area” (ESG), which clarifies the alignment with European quality standards.

The standards include structural and cultural aspects of quality management in further education institutions. They result from the interweaving of institutional, process-related and cultural aspects of quality management.

The standards are used in national and international certification procedures and are available to the general public on the ASIIN website.

The criteria do not prejudge the definition of specific terms. The institutions are free to use designations for their certification procedure, their assessors, etc., provided that the function described below is fulfilled and it is conducive to transparency and acceptance.

#### *Standards for Institutional Certification*

<i>Test Field</i>	<i>Standards</i>	<i>ESG 2015</i>
<b>A. Understanding of Quality</b>		
<b><i>I. Quality Objectives</i></b>	<ol style="list-style-type: none"> <li>1. The institution has a clear vision and mission of its strategic goals and perspectives. It documents and communicates these to internal and external stakeholders.</li> <li>2. Within this framework, the institution has set quality objectives for the core areas, especially study and teaching. It has also defined criteria for prioritising them and measuring their success.</li> <li>3. Processes for setting and reviewing quality objectives are defined and implemented. The competences and responsibilities are defined in a binding manner.</li> <li>4. The relevant stakeholders are involved in the processes mentioned. These processes are suitable for producing common quality objectives and support a corresponding understanding of quality.</li> </ol>	1.1, 1.7, 1.9
<b><i>II. (Quality) Management Systems / Governance</i></b>	<ol style="list-style-type: none"> <li>1. The institution has a comprehensive quality management system (QMS) and governance structures in place that are suitable for its implementation.</li> </ol>	1.7, 1.9

	<ol style="list-style-type: none"> <li>2. With the help of the QMS, the achievement of quality objectives is monitored in a comprehensible manner and contributes to their implementation.</li> <li>3. Procedures, processes, competences and responsibilities within the framework of the QMS are formalised and communicated to the relevant stakeholders in a comprehensible way (e.g. via organisational charts and graphic process maps).</li> <li>4. A procedure for the regular review of the QMS, the documentation of the results and the tracking of further development and changes derived from this has been developed and implemented.</li> </ol>	
<p><b>III. Certification</b></p>	<ol style="list-style-type: none"> <li>1. The institution has established an (internal or external) procedure in which it determines the eligibility of the courses for certification. The “Standards for the Certification of (Further) Education and Training” of ASIIN are applied analogously (see no. 2 and 3). The institution is responsible for the quality of the procedure.</li> <li>2. At the procedural level, the following subject areas are regulated in a transparent, efficient and comprehensible manner - analogous to the “Standards for the certification of (further) education courses” of ASIIN in the currently valid version: <ul style="list-style-type: none"> <li>- Initiation and implementation of a certification procedure</li> <li>- Selection, preparation and deployment of independent (internal or external) experts to review the content of the offer</li> <li>- Internal supervision of the procedure</li> <li>- Decision-making body/decision-making bodies</li> <li>- Follow-up procedure, also with regard to changes and complaints</li> <li>- Deadline Management</li> </ul> <p>The impartiality of decision-making is a central concern.</p> </li> <li>3. At the content level of the further education courses, it is ensured that the criteria listed below under B are regularly the subject of the certification procedure for specific courses.</li> </ol>	
<p><b>B. Teaching and Learning</b></p>		
<p><b>I. Establishment or Further Development of (Further) Educational Programs</b></p>	<ol style="list-style-type: none"> <li>1. The procedure for establishing, modifying and discontinuing further educational courses is bindingly regulated and implemented. The quality objectives and the profile of the institution are taken into account in an appropriate manner.</li> <li>2. Qualification objectives are defined for the individual courses that reflect the desired level and are oriented towards the respective professional/scientific developments and the demand on the labor market.</li> <li>3. The content, structure and didactic design of the courses support the achievement of the desired qualification objectives. This also applies to the access regulation(s) and any existing rules for compensating for missing knowledge and skills.</li> </ol>	<p>1.2, 1.3, 1.4, 1.9</p>

	<ol style="list-style-type: none"> <li>4. Competences and responsibilities for the described procedure are defined.</li> <li>5. The procedure also includes a process for receiving (external and internal) impulses for the further development or new establishment of educational offers.</li> <li>6. Compliance with and effectiveness of the procedure for the establishment, modification and discontinuation of educational offerings are regularly reviewed. Deficits and weaknesses are identified. Suggestions for improvement are recorded and fed into the quality development process.</li> </ol>	
<b>II. Implementation of (Further) Educational Programs</b>	<ol style="list-style-type: none"> <li>1. Processes for the professional, didactic, organizational and administrative implementation of further education courses are defined and implemented. They are regularly reviewed in order to identify strengths, but also weaknesses and deficits, and to rectify any shortcomings identified.</li> <li>2. The concept presented under I. has been successful in practice, particularly with regard to the achievement of objectives, feasibility of the study, and design of the learning process.</li> <li>3. Cooperation between the groups involved in the implementation of the further educational programs is clearly defined. Mechanisms for conflict resolution are in place and practiced.</li> <li>4. Suggestions and proposals for modifications and improvements submitted by the various interest groups are used for the quality development of the educational programs.</li> <li>5. It is ensured that the implementation of educational programmes is transparent and comprehensible for all stakeholders.</li> </ol>	1.2, 1.3, 1.4, 1.9
<b>III. Cooperation</b>	<ol style="list-style-type: none"> <li>1. Cooperation for the implementation of further educational programmes are clearly regulated. Existing cooperation are realised appropriately within the educational programmes.</li> <li>2. The institution bases its (internal and external) cooperations for educational programmes on fixed principles. These also include the manner in which possible conflicts are handled.</li> <li>3. Impulses from the (internal and external) cooperation partners for modifications and improvements are accepted, evaluated and taken into account for the quality development of the educational programmes.</li> </ol>	1.2, 1.9
<b>IV. Examination System and Organisation</b>	<ol style="list-style-type: none"> <li>1. Procedures for determining and designing an examination system (rules, forms, assessment criteria) are defined and implemented for the individual further education courses.</li> <li>2. Corresponding responsibilities and accountabilities are defined.</li> <li>3. The examination approaches used are designed with a focus on learning outcomes and include, among other things, sufficient preparation time for learners. If external service providers are</li> </ol>	1.3, 1.9

	<p>involved in conducting the examinations, the aforementioned principles are adhered to.</p> <ol style="list-style-type: none"> <li>4. Impulses for modification and adaptation can come from all relevant stakeholders and will be taken into account in the (further) development of the examination system.</li> <li>5. Mechanisms for dealing with conflicts between those directly involved in the design and organisation of examinations are in place and implemented.</li> </ol>	
<b><i>V. Recognition of Achievements</i></b>	<ol style="list-style-type: none"> <li>1. Rules and responsibilities for the recognition of formally, non-formally or informally acquired competences are defined and implemented.</li> <li>2. The procedure for the recognition of achievements is effective and efficient and promotes learner mobility.</li> <li>3. Proposals for modifications/adjustments can be made by all relevant stakeholders and are taken into account in quality development procedures.</li> <li>4. The members of the institution involved, especially students and teachers, are informed about the guiding principles of the recognition procedures.</li> </ol>	1.4 1.9
<b><i>VI. Advice and Support</i></b>	<ol style="list-style-type: none"> <li>1. A diversified range of counseling and support services for learners is available and reaches them.</li> <li>2. The material and personnel resources provided for this purpose are suitable and sufficient.</li> <li>3. The counseling and support services and the corresponding use of resources are reviewed for their effectiveness. Suggestions/suggestions from the stakeholders involved are used to adapt or expand the guidance and counseling services.</li> </ol>	1.6, 1.9
<b>C. Management of Resources</b>		
<b><i>I. Material and Personal Resources</i></b>	<ol style="list-style-type: none"> <li>1. The availability and management of human and material resources contribute to the achievement of the self-imposed quality and qualification objectives in further education.</li> <li>2. The management of human and material resources, in particular for the teaching/learning processes in the further education courses, is functional. External (e.g. legal or economic) requirements are taken into account.</li> <li>3. Personnel management includes staffing procedures that are reliably implemented and promote the achievement of the institution's quality and qualification objectives.</li> <li>4. The members of the institution are involved in resource management and informed accordingly. Rules for conflict management are in place and practiced.</li> <li>5. Impulses for changes and improvements in resource management are incorporated into quality development. Incentives are provided for the efficient use of resources.</li> </ol>	1.5, 1.9

<b>II. Staff Development</b>	<ol style="list-style-type: none"> <li>1. The institution has a concept for staff development. This includes the definition of appropriate processes and responsibilities, the continuous assessment of needs and demands, and the provision of appropriate services.</li> <li>2. A personnel development concept has been implemented. The qualification offers are taken up by the members of the institution.</li> <li>3. The concept and offers for staff development, especially for the professional and didactic further training of lecturers, are evaluated. Impulses for modifications are taken up and used for adjustments/improvements.</li> </ol>	1.5, 1.9
<b>III. Research Interface (for Educational Courses from EQF 6)</b>	<ol style="list-style-type: none"> <li>1. A concept for linking research and teaching are in place. Processes for their realisation have been defined and implemented. Responsibilities and accountabilities have been established.</li> <li>2. The success of linking research and teaching is regularly reviewed. Potential for change/improvement is identified and used to optimise processes and further develop these concepts.</li> </ol>	1.5, 1.9
<b>IV. Administrative Interface</b>	<ol style="list-style-type: none"> <li>1. The institution's administration is involved in the processes for the introduction, further development and implementation of further education programs and their quality assurance. Rules for conflict management are in place and suitable.</li> <li>2. Proactive administrative action is guaranteed by effective communication management, while sustainable administrative action is ensured by appropriate knowledge management.</li> <li>3. The institution promotes appropriate administrative action and monitors its success. Impulses for change and/or improvement from the actors involved are taken up and used for quality improvement.</li> </ol>	1.6, 1.9
<b>D. Transparency and Documentation</b>		
<b>I. Relevant Regulation for Further Education</b>	<ol style="list-style-type: none"> <li>1. The procedure for the drafting, amending, updating and publishing study-related regulations is defined in a binding manner. Responsibilities and accountabilities are determined. External requirements (e.g. legal, economic, etc.) are adequately taken into account in the procedure.</li> <li>2. Rules and practices for necessary coordination processes are in place.</li> <li>3. Suggestions for changes/improvements by the relevant interest groups, especially students and teachers, concerning procedures or the content of regulations are used for quality development.</li> </ol>	1.8, 1.9
<b>II. Documentation</b>	<ol style="list-style-type: none"> <li>1. The institution has formulated guidelines and principles for documentation and information and communicated them internally and externally.</li> </ol>	1.8, 1.9

2. A documentation and filing system is in place. Processes and instruments for its establishment and further development are defined. Responsibilities and accountabilities are defined.
3. Current versions of study-related documents (curriculum, program and qualification objectives, study plan, module/course descriptions, examination regulations, cooperation agreements, etc.) are known and accessible to the interest groups involved, in particular teachers and learners
4. External requirements for documentation and transparency are taken into account (e.g. publication obligations, information needs of the public).
5. Weaknesses and deficits are identified and remedied using appropriate tools. Suggestions for change from the relevant stakeholders are taken into account in the further development processes.

A template for preparing the self-evaluation report is provided for applicant educational institutions. For orientation purposes, a series of research questions are compiled for each criterion, which clarify the core area of the relevant criteria and the associated quality expectations. These “guiding questions” are intended to provide applicant institutions with points of reference for the preparation of the self-evaluation.

The expert group also uses a checklist in its assessment of the QMS, which is based on the aforementioned questions for the individual standards. This ensures that the applicant institution's self-evaluation report contains the core information for assessing the QMS as part of the certification procedure and that it provides this information to the experts in a form that is as easily accessible as possible.

## 4 Procedural Principles

### 4.1 Application and Required Documents in the Procedure

#### 4.1.1 Application Procedure and Proposal

For the **opening of a procedure** and the preparation of an offer by ASIIN, basic information about the institution and its quality management are required in electronic form.

In addition to the completed application form for institutional certification, which is available online, the following should be submitted

- a) an organization chart of the internal organization and ideally a brief graphic depiction of the QMS, and,
- b) if available, proof of previous certification of the institution by a third party body, or,
- c) if available, proof of a previous evaluation of the institution

#### 4.1.2 Self-Evaluation

As a basis for the assessment in the following procedure, the education institution submits documentation that covers the following three central aspects:

- a) A self-evaluation report (SER) on whether the criteria have been met and the institution's own assessment of fulfillment (maximum 50 pages)
- b) Evidence regarding the assessments made on the standards.
- c) Documents for the evaluation of the sample (cf. Section 4.1.3)

With the self-assessment, the further education institution should demonstrate the extent to which the self-imposed quality objectives are achieved and the external requirements are fulfilled. An institution that demonstrates the ability to self-critically examine its own organization fulfils a central requirement for obtaining the ASIIN certificate.

**The self-assessment should not exceed 50 pages (excluding annexes).** Tables and graphs are preferable to continuous text as long as they present the "current situation". In particular, the current status of the QMS, quality objectives and projects (past, current, planned), the role of stakeholders, a structure chart/organizational chart or a process diagram are suitable for graphical presentation..

With the exception of the self-evaluation report (SER), the **documentation** should not be created specifically for the procedure. ASIIN assumes that **mainly those documents are used that also serve internal university communication and quality control and development.** If necessary, these will be prepared for the certification procedure in a form that can also be understood by third parties and in such a way that the reference to the standards is clearly recognizable.

The same applies to the sample: Within the framework of the sample, the expert group would like to evaluate those documents that have been used in the procedure (cf. Section 4.1.3).

In the interests of all those involved in the procedure at the further education institution and the agency, pure descriptions should be as concise as possible, the self-assessment should be concrete, concise and precise and all information collected in an application should be critically scrutinized to determine whether it is relevant for comparison with the standards.

If the certification is being renewed (“re-certification”), it is important to also show the changes made in the previous certification period.

ASIIN provides templates for the self-assessment, which can be provided upon request.

An electronic version of the application is required.

### **4.1.3 Sample**

To prove the functionality of the QMS, the quality of the results of the internal procedure is also checked on the basis of a sample. The review of this sample is carried out as part of the inspection by the experts. The educational programs in the sample are determined after the contract is concluded.

The aim of the sample is to determine whether the processes are suitable for achieving results that would be comparable to those of a purely external audit. The aim is not for the experts in the certification process to provide their own professional assessment of the educational offer, but rather to make an assessment with regard to logic, transparency, appropriateness, comprehensibility and participation on the basis of the processes under consideration. When putting together the team of experts, care is taken to ensure that the professional orientation of the training provider is given appropriate consideration.

The sample comprises a representative cross-section of the entire range of further education courses. It is confirmed by the Certification Commission at the suggestion of the ASIIN office - with any necessary adjustments. The following criteria that are taken into account in the selection process:

1. Distribution among the various courses (courses, modules, certificate courses, etc.)
2. Structure/organization of the educational institution
3. Broad range of subjects
4. Status in the internal QMS

#### 4.1.4 Course of the Procedure

The certification procedure is divided into the following stages:

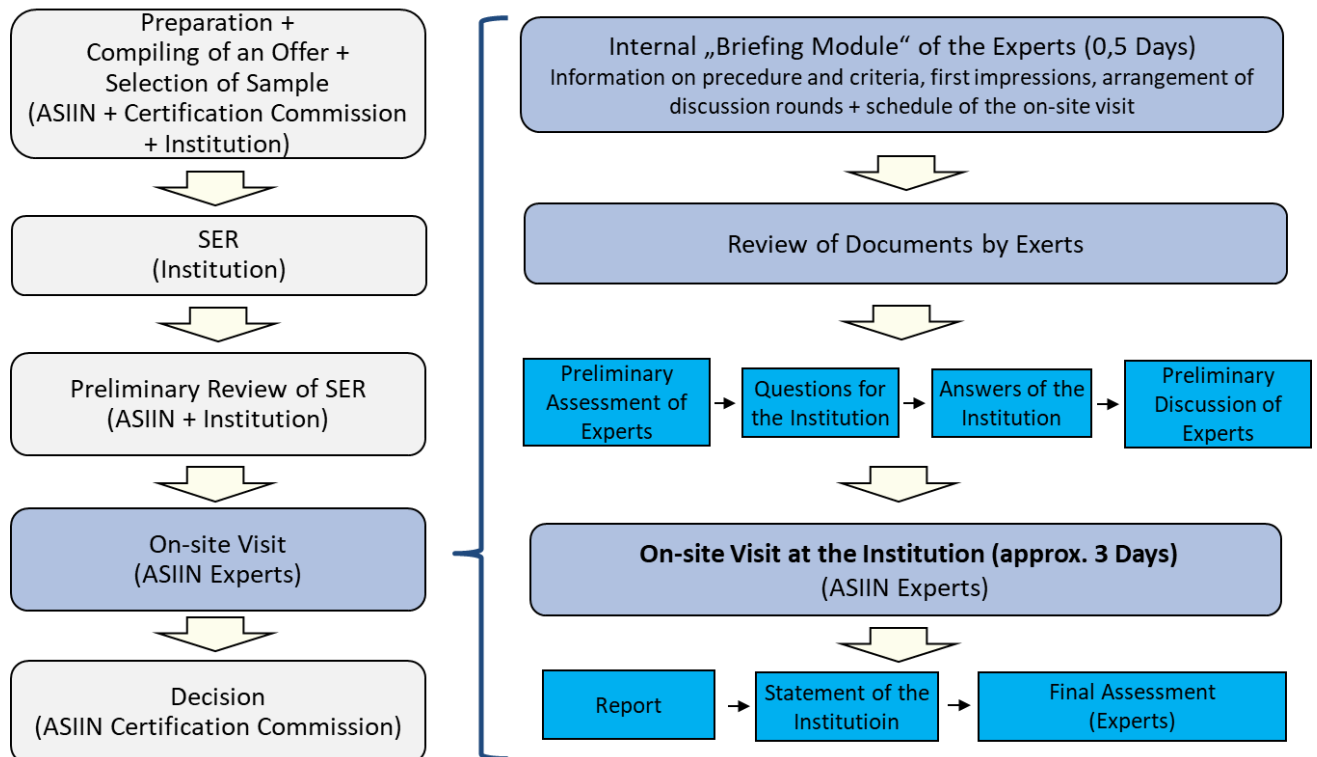


Figure 1: Procedure for obtaining the ASIIN certificate

The following **steps** are detailed below:

1. Preparation + Compiling of offer	Institution + ASIIN	The institution contacts the agency.  The agency needs basic information about the institution (date of foundation, legal status, form of organisation, sponsorship, size, educational offer, structure and internal organisation, existing certifications or accreditations, etc.) and its quality management in short form.  Preparatory discussion on the desired certification seal, the procedure and the criteria.
2. Conclusion of contract	Institution (+ ASIIN)	Acceptance of the offer by the institution (declaration of acceptance of costs) or conclusion of the contract.
4. Preliminary re- view of SER	Institution  ASIIN	Submission of the self-assessment + evidence of fulfillment of the requirements for the ASIIN certificate based on the institution's own documents / data collection.  The ASIIN project managers review the institution's documents for validity and completeness.

4. On-site visit	Institution + ASIIN	Before the final submission of the self-evaluation report, ASIIN offers the opportunity to discuss the results of the preliminary review. This discussion can take place at the ASIIN office or via video conference (will be determined in the process of compiling the offer).
	Institution	The institution has the option to supplement or revise the self-evaluation report and its supporting evidences.
	ASIIN	ASIIN puts together an expert group.
	Institution	The institution hands in the final version of the self-evaluation report and its supporting evidences.
	ASIIN (Expert:innen)	<p>Internal „Briefing Module“ of the experts to</p> <ul style="list-style-type: none"> <li>- present the procedure and criteria</li> <li>- determine the first impressions of the application documents and identify open questions or missing documents</li> <li>- clarify the schedule for the on-site visit</li> <li>- determine the chair/speaker of the expert group</li> </ul> <p><i>Afterwards:</i></p> <p>The experts will review the documents, prepare a list of questions and, if necessary, queries for the institution to answer before the on-site visit.</p>
	Institution	The institution answers to the queries of the experts.
	ASIIN + Institution	Fine-tuning of the schedule for the on-site visit between ASIIN and the institution in accordance with the procedural principles.
	ASIIN + Institution	The expert group conducts the on-site visit at the institution, including round of discussions with various stakeholders from the institution on the basis of the application document.
	ASIIN	The expert group compiles the certification report and determines, whether and which additional documents are required for the continuation of the procedure.
	Institution	The institution hands in its feedback on the certification report.
ASIIN	<p>The experts consolidate the results in the report and give their final evaluation of the results.</p> <p>The experts recommend a resolution to the Certification Commission.</p>	

6. Decision	ASIIN	<p>Decision on certification by the Certification Commission of ASIIN.</p> <p>Notification of the decision to the applicant institution.</p> <p>Delivery of the final certification report to the institution.</p> <p>Online publication of the results in accordance with European Standard and Guidelines (ESG).</p>
-------------	-------	--

The institution and ASIIN agree on the concrete **schedule** in the course of preparing the offer.

## 4.2 Subsequent Institutional Certification

If the QMS of the institution has already been the subject of an **institutional evaluation** that was carried out on the basis of the aforementioned standards and was carried out no more than two years ago (case c, Section 4.1.1), a **subsequent certification procedure** can be connected as part of a related procedure. The same applies if the evaluation procedure was carried out by another EQAR-listed agency, provided that the underlying criteria essentially correspond to the following standards. If necessary, this will be determined by the ASIIN office on the basis of a synopsis of the criteria/standards.

Subsequent certification can be carried out in a way that saves resources and costs if the aforementioned requirements are met. The specific conditions are agreed between the institution and ASIIN during the offer procedure.

## 4.3 Results and Deadlines of the Procedure

The ASIIN certification seal is always awarded for a limited period of time. The initial award is granted for six years, the re-certification and all subsequent certification for a total of eight years.

The certificate is awarded to the institution and also covers its individual educational programs, provided that these are demonstrably and continuously subject to the reviewed QMS. The certificate is generally awarded for six or eight years (in the case of re-certification) and the award is reviewed after three or four years (“external monitoring procedure”; see Section 4.6).

The following outcomes of a certification procedure are possible:

- a) Certification *without requirements* for the full certification period
- b) Certification *with requirements* for the full certification period; yet after nine months the fulfilment of the requirements must be proven (see Section 4.4)
- c) No final decision is (yet) made by the Certification Commission. The procedure is suspended (“procedural loop”): A one-time *suspension* of the procedure is possible for usually 12, at most 24 months (see Section 4.5).

- d) *Rejection* of the award of the ASIIN Certification Seal: A new procedure can only be carried out on the basis of a new or substantially changed concepts. The Certification Commission decides whether this is the case.

#### 4.4 Review of Fulfillment of Requirements

If a certification is granted with requirements, the institution must prove that the requirements have been fulfilled within the stipulated period of time.

If the Certification Commission determines that the requirements have been met in full, the certification is automatically extended to the full period.

If it is determined that the requirements have not yet been fulfilled entirely, the Certification Commission can grant a one-time extension of six months to complete the fulfilment of the requirements.

The procedure for verifying the fulfilment of requirements is as follows:

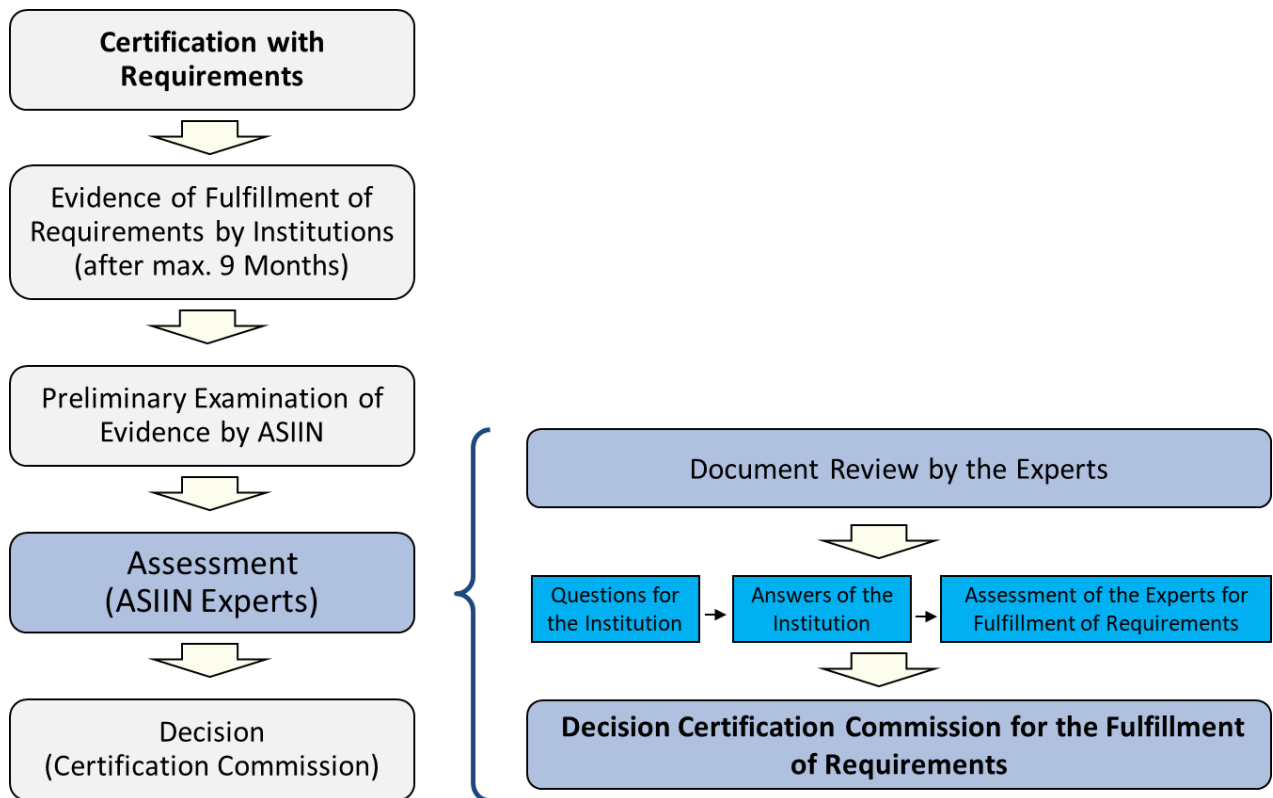


Figure 2: Sequence of the procedure for the fulfillment of requirements

#### 4.5 Resumption of the Procedure after Suspension

If the procedure is suspended, the institution may request the resumption of the procedure within the time limit specified in the decision.

With the suspension, the Certification Commission also decides on the prerequisites that must be fulfilled in order to continue the certification process. Generally, procedures are suspended

for a period of 12 months; in justified exceptional cases, the expert group can apply for an extension of up to 24 months. With its application for resumption of the procedure, the institution demonstrates how it has fulfilled these preconditions.

If a suspension of the procedure is pronounced, the Certification Commission can determine that the resumption must take place within the framework of a new on-site visit by the expert group. However, the decision on the necessity of a further on-site visit can also be made during the process of resumption. The procedure is then concluded with the regular procedural steps as described in Section 4.1.4 (beginning at the time of compiling the certification report).

The procedure for the review of resumption is as follows:

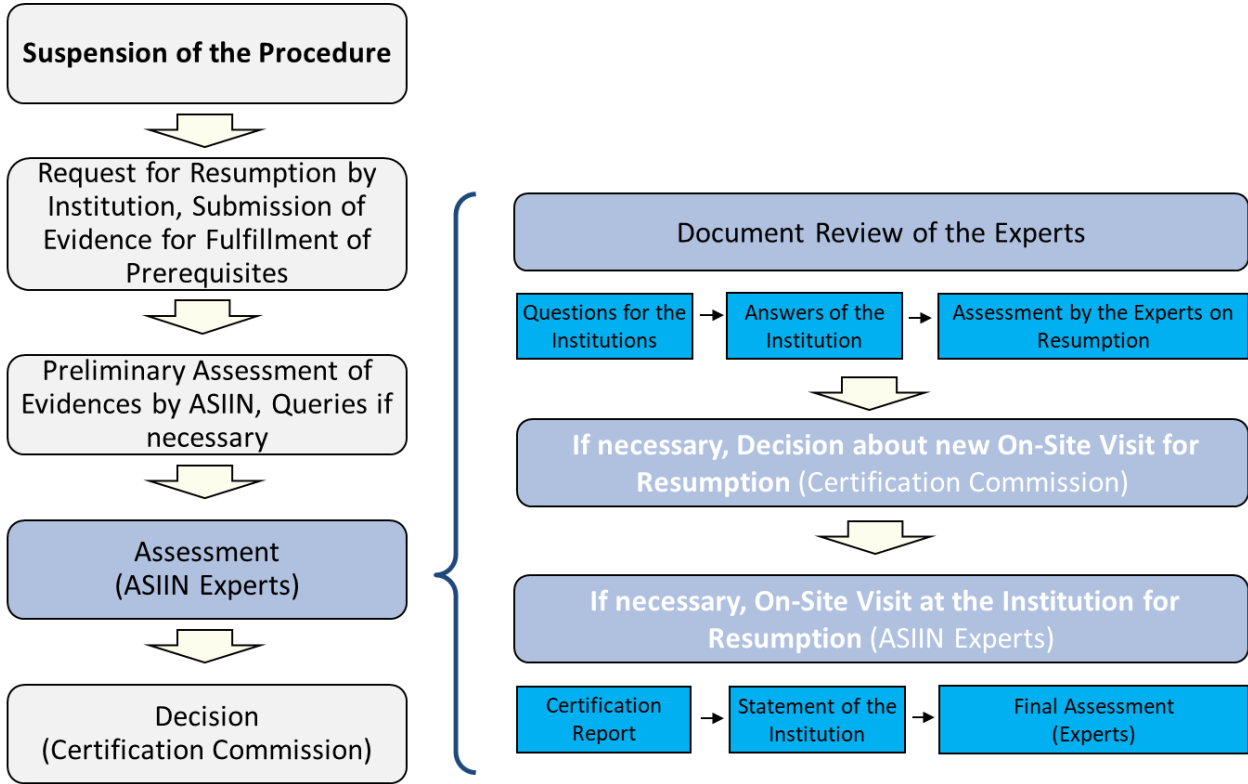


Figure 3: Sequence of the process of resumption after suspension

#### 4.6 External Monitoring Procedure

The certificate is awarded to the further education institution and to all training courses that are developed, set up and implemented in accordance with the institution’s reviewed internal QMS. After successful (re-)certification, the further education institution informs ASIIN annually of the educational offerings that are set up and implemented in accordance with the internal QMS.

External monitoring also includes an external review of the requirements for awarding the certificate by ASIIN every three years (or every four years in the case of re-certification). In

this process, random samples of newly established training courses offered by the training institution at EQF levels 5 - 8 are checked to ensure that the selected courses (courses, modules, short-cycle programs) were or are effectively subject to the QMS during their establishment, implementation and quality assurance. The random sample is usually determined by the ASIIN Certification Commission three months before the end of the three-year period.

The review is carried out as a desktop review by two members of the original expert team (usually a university lecturer and a representative of professional practice); an on-site visit is usually not planned. If necessary, the expert teams can arrange additional virtual or face-to-face discussion rounds with the further education institution. Mid-term reports on the sample in the monitoring procedure should be prepared in a way that conserves resources as much as possible and should draw on existing documents and information wherever possible.

In the event of a consistent positive assessment of the educational offers reviewed in the sample, ASIIN will issue an informal confirmation of the certificate. In the event of inconsistent assessments or if the progress report is assessed negatively, the procedure is resubmitted to the Certification Commission for a decision. The certificate can subsequently be withdrawn by decision of the Certification Commission.

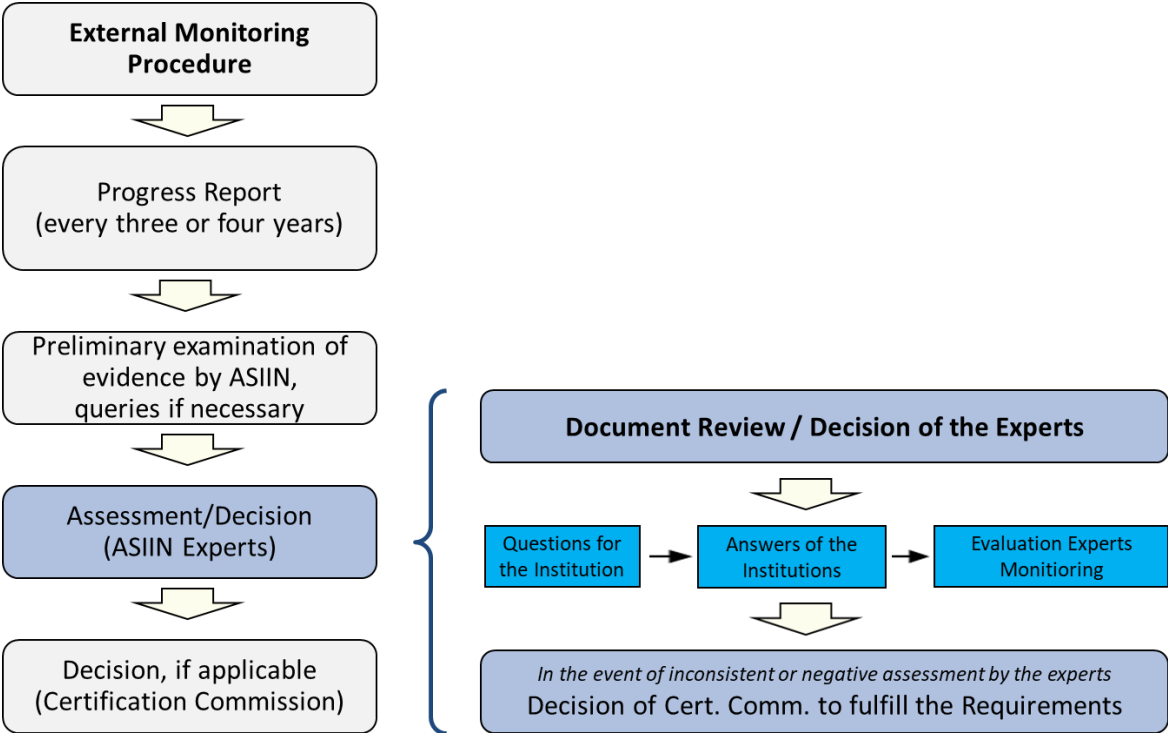


Figure 4: External Monitoring Procedure

4.7 On-Site Visit at the Institution

The on-site visit at the institution includes the following elements:

- Discussions with different internal and external stakeholders of the further education institution (individual discussions or in groups)
- Internal stakeholders: management, administration/management, learners, teachers, quality management officers
- External stakeholders, as required and possible: professional practice, graduates, „owners“ of the further education institution, cooperating institutions/organisations
- On-site review of documents
- Inspection of the facilities (rooms, equipment and infrastructure) available for teaching and learning
- Internal discussion of the expert team

#### 4.8 Criteria for the Selection of Experts

The Certification Commission appoints the experts

The expert team usually consists of four members:

- two teachers with experience/expertise in the field of leadership and quality management at further education institutions,
- one representative from professional practice,
- one student with experience in self-administration and certification.

Due to its composition, the expert group should

- be able to oversee and evaluate aspects of governance and quality management, especially for studies and teaching as well as methods and design of teaching/learning processes;
- be in a position to understand the interests of the stakeholders affected by a specific training program and include them in their assessment;
- be able to include experience with international or European standards in the assessment.

#### **ASIIN criteria for experts from the field of further education; they should**

- have certification experience, didactic skills specifically in further education, international experience, experience in self-administration ( preferable),
- have certification experience, didactic skills specifically in further education, international experience, experience in self-administration ( preferable),
- make use of trainings offered for certification activities (preferable)

**ASIIN criteria for experts from the industry; they should**

- hold notable technical experience and/or professional expertise in quality management
- have experience in certification, higher educational didactic competences, international competences, experience in self-administration (preferable)
- make use of trainings offered for certification activities (preferable)

**ASIIN criteria for experts from the group of learners; they should**

- have experience in self-administration and certification or evaluation procedures (preferable)
- make use of trainings offered for certification activities (preferable)

**Exclusion criteria: Experts may not be**

- involved in application procedures (neither in their own appointment procedure nor as part of an appointment committee) at the institution which is to be assessed;
- involved in any board or panel at the institution which is to be assessed;
- employed by the institution which is to be assessed and/or depend on it;
- representatives working at management level for a higher education institution from the same region.

Before the start of the procedure, every expert signs a declaration of confidentiality and impartiality. The applying body will be informed of the composition of the expert team. If a member is suspected to be biased, the higher education institution may put forward reasons for requesting a substitute. The Certification Commission will then deal with the request.

#### **4.9 Role and Function of the ASIIN Project Manager**

A full-time project manager at the ASIIN offices is in charge of the overall coordination of each certification procedure.

The ASIIN project managers organise and coordinate the certification procedures. They ensure that all procedural requirements are adhered to, time schedules are met and all mandatory process steps are taken. Based on their experience and background, they can provide information and advice to all other parties involved in the procedure. Project managers accompany the expert team during the on-site visit and take part in all committee meetings. They draft reports, propose resolutions and document the procedure. In addition to that, they act as contact persons for the applying institution and accompany it through the procedure.

Project managers are therefore the central link between the further education institution, the expert team and all committees involved.

Any exchange of information between the institution, the expert team and the ASIIN committees is only relevant and can only be considered in the procedure if it was submitted to the ASIIN office.

#### 4.10 Complaints and Appeals Procedure

Reports of procedural deficiencies are first submitted to the ASIIN management for review. If the management comes to the conclusion that an implication of the reported deficiency/deficiencies on the certification decision cannot be excluded, this will be brought to the attention of the Certification Commission. If the institution does not agree with the decision and/or the reaction of the Certification Commission, the Appeals Committee may be involved.

Complaints against substantive decisions by the Certification Commission must be submitted to the office in writing, stating the reasons for the complaint. The office will present the complaint to the Certification Commission at its next meeting. If the Commission considers the complaint to be well-founded, it shall remedy it. If the Commission does not remedy the complaint, an independent Complaints Committee, which is called upon by the office, shall decide. The Appeals Committee is informed annually of appeals against decisions of the Certification Commission.

#### 4.11 Withdrawal of the Application

The applying institution is entitled to withdraw its application at any time before the decision of the Certification Commission without stating reasons. It shall then bear the costs incurred by ASIIN up to the time of withdrawal. If the institution wishes to resume the procedure at a later point in time, the Certification Commission decides on the admission for resumption.

#### 4.12 Changes during the Certification Period

ASIIN supports further qualitative developments of the QMS during the certification period in the sense of continuous improvements.

If changes to the framework conditions for further education are planned or implemented at an institution, it must be checked whether these are changes of a substantial nature which directly affect the requirements for the award of the ASIIN certification seal.

If an institution plans to implement changes, the following procedural steps must be observed:

<b>1. Information about Change(s)</b>	Institution	Written information to the ASIIN office with an overview of the planned or implemented changes and a corresponding justification.
---------------------------------------	-------------	---

<b>2. Examination of the Change(s)</b>	ASIIN	The Certification Commission examines the documents submitted.
<b>3. Decision</b>	ASIIN	The Certification Commission decides <ul style="list-style-type: none"> <li>a) whether a significant change is present and</li> <li>b) whether the certification can be maintained under these new conditions. If this is not the case, the Certification Commission withdraws the certification or decides on any further steps that may be necessary before a final decision can be made.</li> </ul>

ASIIN reserves the right to withdraw the certification seal after reviewing the facts even if it learns of a significant change by other means.

#### 4.13 Renewed Certification („Re-Certification“)

If the ASIIN certificate is applied for no later than six months before the certification expires, the certification can be extended for one year by decision of the Certification Commission in order to carry out the re-certification procedure.

The extension of the certification is counted towards the full certification period in the event of successful re-certification.

#### 4.14 Contractual Basis

The cooperation between ASIIN Consult GmbH and a further education institution is based on a **contract**. This comes into being as soon as the applicant institution accepts the relevant offer of ASIIN for the certification procedure.

The relevant conditions for the formulation of this contractual relationship are set out in detail in the offer submitted by ASIIN and the associated General Terms and Conditions (GTC).

An essential feature of the contract between ASIIN Consult GmbH and an institution is that the implementation of the certification procedure, but not its result, is contractually regulated.