



**INTERNATIONAL ISLAMIC UNIVERSITY,
ISLAMABAD
QUALITY ENHANCEMENT CELL**

Nomination Form for Focal Person/Program Team of QEC Membership

Name of Department: _____ Faculty: _____

Name: _____ Designation: _____

Contact No : (Office & Mobile No) _____ Email (IIU Address) : _____

Role in Program Team: Focal Person/Program Team Member

Besides his/her own Responsibilities, s/he will also be responsible for the following:

1. To attend the SAR meetings as and when required.
2. To ensure that Self Assessment Mechanism is being implemented as per given guidelines.
3. To prepare drafts of the SAR on the given dead line and send them to QEC for timely feedback.
4. To keep the record of all the supporting documents addressing various standards of the SAR.
5. To circulate all the applicable feedback forms to the target stakeholders and include the analysis of the same in the SAR.
6. To communicate with the management on the effectiveness and suitability of the SA mechanism with chairman and Dean.

Declaration of the Focal Person/Program Team Member:

I am quite willing to be a part of this team and assure that I would do my best to play my role in the working of Program Team for improvement of quality of Education in my Department.

(Signature of Focal Person/Program Team Member)

Approved by _____
(Head of the Department / Institute)