

Subject: REPORT OF COMPLIANCE IMPLEMENTATION PLAN OF SECOND (S-RIPE) 2025: OF HAZARA UNIVERSITY

- i. As per HEC's revamped policy related to QA i.e. PSG - 2023 the second Self Review of Institutional Performance & Enhancement (S-RIPE) of Hazara University for the period of 01 July 2024 to 30 June 2025 was conducted on 11-13 Aug 2025 to evaluate the IPER and performance of the University.
- ii. The Report of Second Self-Review of Institutional Performance (S-RIPE) was approved by the Honorable Vice Chancellor on 26 Aug 2025.
- iii. A comprehensive Compliance Implementation Plan (CIP) has been prepared based on approved S-RIPE Report and will be submitted to IQC for its consent; **hence the approval may be sought in anticipation of the IQC.** The Compliance report will be submitted by Registrar Office with all required Annexes to IQEA (Dir QE) as per planned dates.
- iv. Submitted for approval as stated at iii-underlines, please.

[Signature]
17/09/2025
Assistant Director QE

- 2- Director QE a. Upon approval of S-RIPE's report, the CIP has been prepared (placed opposite) and submitted for approval & consent of sending to the Registrar for onward work of the activity (i.e. compliance) in anticipation to the IQC's approval.
- 3- Vice Chancellor The detail will be kept to IQC in its next meeting.

3. Vice Chancellor

[Signature]
17/09/2025

4. DQE

Scant for 12th

5. DDQE+ADQE

22/09/2025

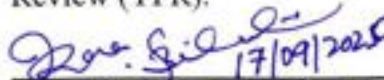


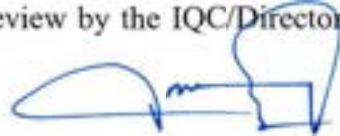
COMPLIANCE IMPLEMENTATION PLAN (CIP):
SECOND (2nd) SELF-REVIEW OF INSTITUTIONAL PERFORMANCE AND ENHANCEMENT (S-RIPE)'s
HELD ON 11-13 AUGUST 2025
FOR PERIOD OF REPORT IPER 2024-25 OF HAZARA UNIVERSITY MANSEHRA

The 2nd *Self-Review of Institutional Performance and Enhancement (S-RIPE)* of the Hazara University was held from 11 to 13 August 2025. Institutional Performance and Enhancement Report (IPER) for the period 01 Jul 2024 to 30 June 2025 was prepared according to the **16 Quality Standards as per new HEC Policy PSG-2023** upon compilation of the *IPER document* and provision of the *answers to questionnaire by the relevant administrative/managerial Directorates/Sections & Registrar Office*. The reviewers examined the evidence by checking the originals of the documents and carried out their detailed discussions with the Deans, Chairpersons, faculty members, graduate & undergraduate students, administrative heads, officers and staff regarding the below mentioned standards and also visited on-site departments, Library and various Laboratories;

- | | |
|---|--|
| 1- Vision, Mission, Goals and Strategic Planning | 10- Student Support Services |
| 2- Governance, Leadership and Organization | 11- Impactful Teaching and Learning and Community Engagement |
| 3- Institutional Resources and Planning | 12- Research, Innovation, Entrepreneurship and Industrial Linkage |
| 4- Audit and Finance | 13- Fairness and Integrity |
| 5- Affiliated Colleges/Institutions | 14- Public Information and Transparency |
| 6- Internationalization of Higher Education and Global Engagement | 15- Institutional Effectiveness, Quality Assurance and Enhancement |
| 7- Faculty Recruitment, Development and Support Service | 16- CQI and Cyclical External Quality Assurance |
| 8- Academic Programs and Curricula | |
| 9- Admission, Progression, Assessment and Certification | |

The University activities were reviewed and evaluated as per HEC's described criterion. The Reviewing team draft the report during the review days (2 & 3) simultaneously and was signed, while both the external members finalized it via online/emails. The report is approved by the Competent Authority on **26 Aug 2025** for implementation. The following **implementation plan** has been prepared for **compliance by all concerned through the Registrar's office** and will be disseminated for compliance within target time/period. **THE TARGET DATES ARE SHOWN IN COLUMN-IV**. The Registrar is required to submit the consolidated **COMPLIANCE REPORT/Corrective measures as per COLUMN-V**. By the due date **25 December 2025 (03 months target)** for onward preview by the IQC/Directorate Quality Enhancement and inclusion in the Yearly Progress Review (YPR).


 17/09/2025
 Rana Bilal, Assistant Director QE

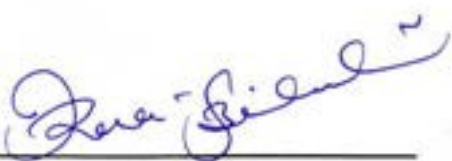

 Dr Aurangzeb, Deputy Director QE


 17/09/2025
 Lt Cdr (R) Dr Mahmood Khan, Director QE



STANDARD – 1: VISION, MISSION, GOALS AND STRATEGIC PLANNING

<u>I</u> <u>SN</u> <u>No.</u>	<u>II</u> <u>S-RIPE's</u> <u>REPORT-</u> <u>FINDINGS/RECOMMENDATIONS</u>	<u>III</u> <u>IMPLEMENTATION</u> <u>Activity/Action Plan</u>	<u>IV</u> <u>TARGET</u> <u>DATE</u>	<u>V</u> <u>COMPLIANCE REPORT BY REGISTRAR</u> <u>(RESPONSE OF THE UNIVERSITY) alongwith</u> <u>Evidence</u>
1	1.1 COMMENDATIONS University has prepared its mission statement and to some extent publicized it, as it is mentioned in the prospectus and available on the website. 1.2 FINDINGS 1.2.1 Strategic plan matured in 2023 while new strategic plan is drafted for 10 years that is 2024 to 2034. This plan is comprehensive and addresses all the components of vision and mission providing direction to the university for all activities. However, the strategic plan yet to be approved by the statutory bodies. 1.2.2 The university vision and mission well devised and approved from relevant bodies. Moreover, revision in the vision and mission are reprint with the consultation of relevant stakeholders recently. 1.2.3 University vision and mission drives the strategic planning and along with that all the activities of the university should be aligned with the strategic plan, including the management of its academic resources appropriate to the needs of its students and its wider group of stakeholders. Subsequently, the vision and mission of the departments and programs require revision and alignment with the new vision and mission statement of the university. The realignment will require statutory approvals.			To be noted

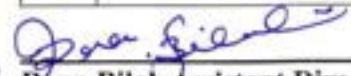

Rana Bilal, Assistant Director QE

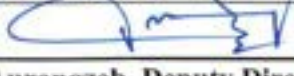

Dr Aurangzeb, Deputy Director QE


Lt Cdr (R) Dr Mahmood Khan, Director QE



I SN o.	II S-RIPE's REPORT- FINDINGS/RECOMMENDATIONS	III IMPLEMENTATION Activity/Action Plan	IV TARGET DATE	V COMPLIANCE REPORT BY REGISTRAR (RESPONSE OF THE UNIVERSITY) <i>alongwith</i> <i>Evidence</i>
1.	1.1 COMMENDATIONS University has prepared its mission statement and to some extent publicized it, as it is mentioned in the prospectus and available on the website.			
	1.3 FINDINGS 1.3.1 Strategic plan matured in 2023 while new strategic plan is drafted for 10 years that is 2024 to 2034. This plan is comprehensive and addresses all the components of vision and mission providing direction to the university for all activities. However, the strategic plan yet to be approved by the statutory bodies. 1.3.2 The university vision and mission well devised and approved from relevant bodies. Moreover, revision in the vision and mission are reprint with the consultation of relevant stakeholders recently. 1.3.3 University vision and mission drives the strategic planning and along with that all the activities of the university should be aligned with the strategic plan, including the management of its academic resources appropriate to the needs of its students and its wider group of stakeholders. Subsequently, the vision and mission of the departments and programs require revision and alignment with the new vision and mission statement of the university. The realignment will require statutory approvals.		To be noted	
	1.4 RECOMMENDATIONS 1.4.1 Finalize statutory approvals for the strategic plan and align all departmental/program statements with the updated university vision and mission.	Approval of Strategic Plan of Hazara University from Statutory Bodies i.e Syndicate and Senate for better understanding of all stake holders. [Actn: REGISTRAR]	Immediate Not later than 25-11-2025	
	1.4.2 Once the strategic plan is approved, all academic and non-academic activities are suggested to be aligned with the university vision and mission. 1.4.3 Strategic plan progress review process is proposed for follow-up, review of the progress, and timely actions.	Through <i>Deans' Committee/other manner</i> , aligning all academic and non-academic activities with the university's mission and vision and to design check lists as per 1.3.2. [Actn: REGISTRAR]	Completion in 03 MONTHS By 28-12-2025	
		Preparation of the process to follow-up, review of the progress and actions of strategic plan of Hazara University and Complete Report to be submitted to Vice Chancellor about the process effectiveness.	Quarterly report on 30-09-2025 31-12-2025 31-03-2026	

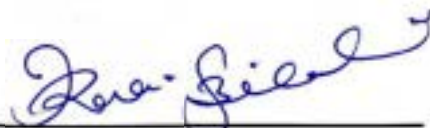

 Rana Bilal, Assistant Director QE


 Dr Aurangzeb, Deputy Director QE


 Lt Cdr (R) Dr Mahmood Khan, Director QE



		[Actn: Director P&D Coord: REGISTRAR]	30-06-2026 and onward.	
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Rana Bilal, Assistant Director QE

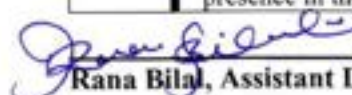

Dr Aurangzeb, Deputy Director QE

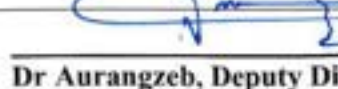

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STANDARD – 2: GOVERNANCE, LEADERSHIP AND ORGANIZATION

SNo.	S-RIPE's REPORT- FINDINGS/RECOMMENDATIONS	IMPLEMENTATION Activity/Action Plan	TARGET DATE	COMPLIANCE REPORT BY REGISTRAR (RESPONSE OF THE UNIVERSITY)
2.	2.1 COMMENDATIONS Some of the University Authorities/statutory bodies (like Syndicate, Academic Council, F&P Committee, Advanced Studies and Research Board) are holding their meetings on regular basis as per their statutes, however the Senate meetings did not held during the evaluation period as well BOS & BOF found deficient. 2.2 FINDINGS 2.2.1 System of organization and governance is well responsive to the present and future needs, and it is reflected in the variety of academic programmes as well as in the development of infrastructure. Meetings are taking place as per the requirement of the act and the meeting merits and decisions are well recorded and notified on time the power and functions of every statutory position as well defined and in place according to the act and statutes. 2.2.2 Since the approval of it is observed that the last approved organogram is not recent while several positions in the administration note present in the approved organogram for example QEC, ORIC etc. 2.2.3 Job descriptions of the administrative positions other than the positions mentioned in the act are not prepared nor approved. 2.2.4 Communication policy formally approved to 2.2.5 The regular administrative positions, that is registrar, treasurer, director works, director A&R, P&D, admin, Provost are on additional charge Which affects the efficiency and effectiveness of work. 2.2.6 Research projects found to be very limited. It is also found that weightage is not assigned in the ACR for the research projects. 2.2.7 Classrooms are not equipped with the latest technology which might affect the learning and teaching efficiency and effect to create and sustain an environment in which high quality teaching and learning can be fostered. 2.2.8 The learning objectives and outcomes of the program are not reviewed to understand the student progression. 2.2.9 Limited faculty development programme entraining on the pedagogical knowledge to enhance the teaching of the curriculum and appropriate use of assessment has been reported. This affects the understanding of modern techniques and use of contemporary teaching style that can benefit students in the current time. 2.2.10 Top management meetings with the students and the student bodies are limited which limits their engagement in decision making. Under the purview of PSG 2023, students are the centre of every activity in the university including their presence in the IQC.		-	
			To be noted	

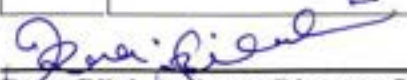

Rana Bilal, Assistant Director QE

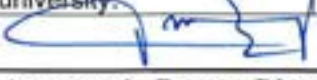

Dr Aurangzeb, Deputy Director QE


Lt Cdr (R) Dr Mahmood Khan, Director QE



2.2.11 Currently faculty feedback and course review are the only surveys conducted to get valuable input from the students. However, there is no mechanism to make each non-academic and support service departments feedback at library, examination, student affairs, career counselling, IT, department, transportation, hostel, cafeteria, sports, QEC, ORIC etc. 2.2.12 To increase the university efficiency and productivity automation and operational CMS is in place. The website is updated regularly, and all notifications and policies are uploaded to the website for the information of stakeholders however at the same time a lot of paperwork and decisions are approved as well as circulated in the heart form. Keeping in view the environmental aspect and sustainable practices automation and paperless environment is not yet fully functional. 2.2.13 Grievance redressal committees what time and time again communicated by HEC to be notified along with the scope and TORs. It was observed that student's grievance committee faculty grievance committee and grievance committee for the admin officers/staff are not developed nor notified. Only TTS grievance committee is formulated. 2.2.14 Faculty/teachers annual appraisal system does not exist. The excellent and poor teachers are dealt with the same measure.		
2.3 RECOMMENDATIONS 2.3.1 Approval of updated organogram from relevant forum/Senat to reflect current positions, including QEC, ORIC & Dir A&R. 2.3.2 Develop job descriptions for all administrative roles and especially the senior position like Directors/Provosts/Director works etc. 2.3.3 Approve job descriptions through statutory processes and to be notified by Principal Administrator. 2.3.4 Fill key administrative positions on a substantive basis. 2.3.5 Increase the number of research projects undertaken by the institution.	"UPDATED-ORGANOGRAM" of the University to be approved from the relevant Authority (Syndicate/Senat) as per 2.3.1 <i>[Actn: Registrar]</i> Clear JOB Description (JDs) to be approved from the relevant Authority (Syndicate/Senate) and notified for each post especially for senior positions (against each appointment) by the University as per 2.3.2 & 2.3.3. <i>[Actn: REGISTRAR]</i> Advertising/Filling the key administrative Positions on immediate basis as per law/statutes/criteria. <i>[Actn: REGISTRAR]</i> Proper mechanism to be framed for increasing the number of research projects for university.	By 20-12-2025 IMMEDIATE & MOST ATTENTIVE. Not later than 30-11-2025 IMMEDIATE By 30-11-2025


Rana Bilal, Assistant Director QE


Dr Aurangzeb, Deputy Director QE


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2.3.6 Upgrade classroom technology to support modern teaching methods. 2.3.7 Establish formal mechanisms for student engagement in decision-making processes. 2.3.8 Form Centralized-Standing-Grievance-Committee for Faculty, Administration and students with representation of the three categories other than the ex-officio members. 2.3.9 Notify the grievance committee with defined terms of reference for each category. 2.3.10 Create a feedback system for all non-academic and support service units. 2.3.11 Faculty annual appraisal system (FAAS) to be approved from competent forum. 2.3.12 The performa for the FAAS to be designed and approved.	[Actn: Director ORIC Coord: REGISTRAR]		
	Upgrading the Classroom as per the latest standards introduced for supporting the teaching methods. [Actn: REGISTRAR & Director IT]	IMMEDIATE	
	Making arrangements & devising Regulation for involving Students/Student's body for participation in the University's governance system. [Actn: REGISTRAR]	By 30-11-2025	
	Development of mechanisms to avoid conflict of interest at the level of each Authority/statutory body. Formation of Centralized-Standing-Grievance-Committee for Faculty, Administration and students with representation of the three categories and to be notified accordingly. as per 2.3.8 & 2.3.9. [Actn: REGISTRAR]	IMMEDIATE NOT LATER THAN 25-10-2025	
	Preparation of separate feedback system/Policies for Non-Academic and Support Service Units. [Actn: REGISTRAR]	By 15-12-2025	
	Preparation for FAAS Proforma and Approval of Faculty Annual Appraisal System (FAAS) and Proforma from the competent forum (Syndicate/Senate). [Actn: REGISTRAR]	By 15-12-2025	

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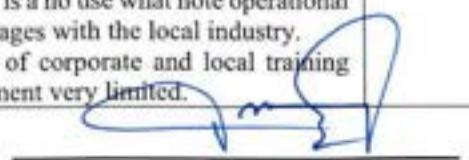
Lt Cdr (R) Dr Mahmood Khan, Director QE



STANDARD – 3: INSTITUTIONAL RESOURCES AND PLANNING

SNo.	S-RIPE's REPORT- FINDINGS/RECOMMENDATIONS	IMPLEMENTATION Activity/Action Plan	TARGET DATE	COMPLIANCE REPORT BY REGISTRAR (RESPONSE OF THE UNIVERSITY)
3.	3.1 COMMENDATIONS The university is having good infrastructural facilities. The university has appropriate resources, and the institution demonstrates effective utilization and development of these resources. The facilities at hostel, digital library/E-brary and smart classroom are adequate. 3.2 FINDINGS 3.2.1 Academic blocks newly established Is purpose built; however the distribution mechanism requires revisiting to ensure that the available infrastructure efficiently utilized and distributed in the most efficient manner. 3.2.2 Hostel and housing facilities are upgraded new development is well planned. Master plan of the university needs to be aligned with the strategic plan and future requirement of the university 3.2.3 Academic classrooms are equipped with multimedia without any computers and digital screens that can enhance the classroom learning and teaching experience. Faculty members are not provided with laptops currently they are expected to teach while connecting their personal laptops you want the multimedia in the classroom which limits their capabilities and ability teach effectively. 3.2.4 Procurement process and procurement committee are as per the rules, however the procured items utilization report is not prepared. Similarly, the resource allocation and resource need assessment reports are not practiced. 3.2.5 Keeping in view the financial position of the universities in the province, alternate revenue sources and self-sustainability are on the priority of the provincial government. Alongside the strategic plan well thought and well-planned document to generate alternative revenue from other sources are essential for the sustainability of universities. 3.2.6 The technological infrastructure of Hazara university is limited and it needs upgradation to ensure seamless connectivity availability of reliable Internet backup and storage and classroom upgradation. 3.2.7 The electricity issue was observed during the visit and some of the backup generators what also found out of order. 3.2.8 Industry academia linkages are essential and most important for the university. Around 90 MOUs are signed power this is a no use what note operational or 4 X5 means to be reactivated and utilized 4 linkages with the local industry. 3.2.9 Services for the community comprising of corporate and local training programme, micro credentials and alumni engagement very limited.			
			To be noted	


Rana Bilal, Assistant Director QE

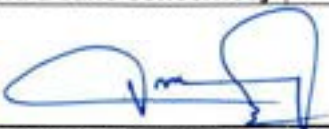

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3.2.10 The library comprises 76,000 books, however huge amount of books outdated editions and it was also found that the last purchases in the library in 2020 to 23 the library was not asked for budget demand in the current fiscal year. Most of the old books are still in the record which needs to be phased out and replaced by new books in the current budget 1.2 million is allocated for the library and purchase of books.			
3.3 RECOMMENDATIONS 3.3.1 Review and optimize space allocation in academic and administrative areas. 3.3.2 Upgrade classroom technology to include multimedia systems and digital screens. 3.3.3 Provide institutional laptops to faculty members. 3.3.4 Prepare annual-resource-utilization reports (ARUR). 3.3.5 Conduct annual needs assessment for resources. 3.3.6 Develop a formal alternate revenue generation plan. 3.3.7 Upgrade IT infrastructure to ensure reliable connectivity and backup systems. 3.3.8 Modernize library holdings by replacing outdated books. 3.3.9 Allocate an annual budget for the purchase of updated library materials. 3.3.10 Strengthening industry linkages through active engagement and partnership programs. 3.3.11 Facilitate QEC and ORIC in establishing databases (based on	The academic blocks must be revisited and reviewed for optimization of space allocation to ensure that the available infrastructure is efficiently utilized and distributed in the most efficient manner. [Actn: Registrar & Dir Admin] To equip the classrooms with state-of-the-art technology (multimedia & digital screens) for facilitating the students in provision of quality education. [Actn: Registrar & Dir IT & Deans] Preparation & approval of the policy for issuance of Institutional laptops to faculty members for their maximum contribution. [Actn: Registrar & Dir IT] Preparation of Annual Reports of <u>Resource Utilization</u> and present them to the forum concerned for approval. [Actn: Registrar, Dir P&D & Treasurer] The need assessment for resources must be conducted on Annual Basis by the Need-Assessment-Committee for clear picture and allocation of required resources. [Actn: REGISTRAR, Treasurer and Deans concerned]	PRIORITY PRIORITY By 25-12-2025 (Each year by 05 January) By 05-01-2026 (Each year by 05 January) By 05-01-2026	

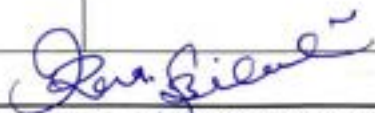

Rana Bilal, Assistant Director QE

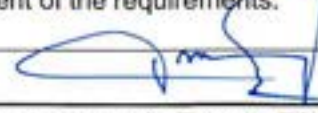

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modules at CMS) and reporting as required. 3.3.12 Lab assessment for the lab operational staff is proposed for fulfillment of the requirements.	Develop a formal policy/plan for revenue generation along with the student fee for smooth running of university operations and get it approved by the concerned body. [Actn: Registrar+Dir P&D+Deans Advisor:Treasure]	By 25-12-2025	
	Upgrade IT infrastructure to ensure reliable connectivity and backup systems. [Actn: Registrar & Dir IT]	IMMEDIATE.	
	Replacement of outdated books with the newly updated books to Modernize library holdings [Actn: Librarian, Coord: Registrar]	PRIORITY	
	Allocation of annual budget for the purchase of updated library materials to equip with the latest trends. [Actn: Treasurer & Registrar Coord: Librarian]	BY 15-01-2026	
	MoUs should be initiated for strengthening industry linkages through active engagement and partnership programs. [Actn: Dir ORIC Coord: Registrar]	PRIORITY	
	Databases for QEC and ORIC must be established (based on modules at CMS) to facilitate them for best output for the university [Actn: Dir IT and Registrar]	Most urgent Compliance Not later than 15-11-2025	
	Need-Assessment for the lab operational staff must be conducted for fulfillment of the requirements.	PRIORITY	


Rana Bilal, Assistant Director QE


Dr Aurangzeb, Deputy Director QE


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		[Actn: Registrar and Deans Concerned]		
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Rana Bilal, Assistant Director QE

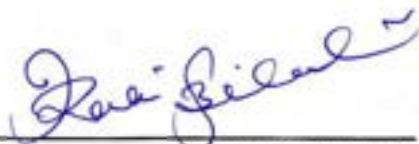
Dr Aurangzeb, Deputy Director QE

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STANDARD – 4: AUDIT AND FINANCE

SNo.	S-RIPE's REPORT- FINDINGS/RECOMMENDATIONS	IMPLEMENTATION Activity/Action Plan	TARGET DATE	COMPLIANCE REPORT BY REGISTRAR (RESPONSE OF THE UNIVERSITY)
4.	4.1 COMMENDATIONS The university has good financial overall. University is dependent on own sources mostly and revenue is generated from many sources and activities. University has well defined procedures for finance and other related activities. Formal alternate revenue generation plan is required.			
	4.2 FINDINGS 4.2.1 Finance and Accounts department is performing and preparing the budget as well as financial forecast as required. 4.2.2 HEC requires at least 10% of the students with financial support including fee exemption and scholarships on a need basis, however, in HU the percentage is around 3%.		To be noted	
	4.3 RECOMMENDATIONS 4.3.1 Expand financial aid programs to meet or exceed HEC's 10% benchmark.	A proper mechanism may be developed to meet the HEC's benchmark of 10% by expanding the Financial Aid Programs. <i>[Actn: Director UFAO Coord: Registrar and Deans]</i>	Within six months' time	
		Awareness sessions must be conducted for the students at departmental levels for clear understanding of the financial support and scholarships on need basis. <i>[Actn: Director UFAO, Deans & Deprtt. Focal Persons]</i>	Regular Basis	


Rana Bilal, Assistant Director QE

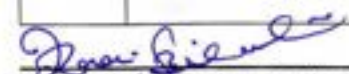

Dr Aurangzeb, Deputy Director QE

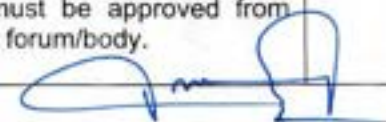

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STANDARD – 5: AFFILIATED COLLEGES/INSTITUTIONS

SNo.	S-IPE's FINDINGS/RECOMMENDATIONS	REPORT- IMPLEMENTATION Activity/Action Plan	TARGET DATE	COMPLIANCE REPORT BY REGISTRAR (RESPONSE OF THE UNIVERSITY)
5.	5.1 COMMENDATIONS The Academic section look after the affairs of the Affiliated Colleges (Acs). University has approved colleges affiliation statutes. The faculty members and students from affiliated colleges are encouraged to participate in the seminars, workshops and conferences organized by the university. There is also Quality Enhancement Cell for Affiliated Colleges (QECAC) functioning effectively, however the project completed and formal approval for permanent QECAC does not exist.			
	5.2 FINDINGS 5.2.1 27 colleges are affiliated with Hazara university the HEC affiliation policy is adopted. 5.2.2 Inspection committee and inspection procedures annual review are also taking place at regular interval guidelines are provided colleges for quality improvement. 5.2.3 QC chapter for affiliated colleges is established in Hazara university. 5.2.4 The representation to affiliated colleges in statutory bodies are not provided. 5.2.5 Exams are conducted as per the HEC guidelines. 5.2.6 Affiliation office is mixed with Academic Section, which has not focused on data collection and keeping watch on other activities (e.g. regular BOG meetings etc) due to heavy workload of the academic activities of the university, therefore a separately dedicated Affiliation Office or Section is required in the university. 5.2.7 During observation on transparency, the documentation shows that several cases for demand of information related to governance and management are kept pending and not replied/data not provided and more worrisome that the Khyber Pakhtunkhwa Right to Information Act is being complied in this regard.		To be noted	
	5.3 RECOMMENDATIONS 5.3.1 Establish a dedicated affiliation office within the university (i.e. separate from Academic Section) under the Registrar of the University.	Establishment of a "dedicated affiliation office" under the Registrar, separating it from Academic Section. <i>[Actn: Registrar]</i>	Initiation 25-11-2025 Formalities completion 31-03-2026	
	5.3.2 Structure, organization and terms of reference of the above-mentioned Affiliation Office to be	The Affiliation Office and its structure, organization and terms of reference must be approved from the relevant forum/body.	BY 31-03-2026	


Rana Bilal, Assistant Director QE


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approved formally from relevant competent forum. 5.3.3 Separate the affiliation function from academic operations. 5.3.4 Provide representation to affiliated colleges in statutory bodies. 5.3.5 Ensure full compliance with the RTI Act by responding to all information requests in a timely manner in regard to affiliation/affiliated colleges issues.	[Actn: Registrar] Proper and separate mechanisms may be developed for affiliation functions that should be apart from academic operations. [Actn: Registrar, Coord: DR(Acad/Affiliation)]	ATTENTIVE ACTION BY 31-03-2026	
	College's representation must be included in the statutory bodies and proper approval may be sought from the competent forum. [Actn: Registrar]	BY 31-03-2026	
	Introduction of sub-portal for responding the information requests in a timely manner regarding affiliation/affiliated colleges issues in the University website as per 5.3.5. [Actn: Registrar & Dir IT]	IMMEDIATE AND PRIORITY	

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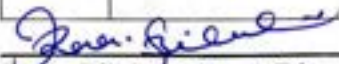
Dr Aurangzeb, Deputy Director QE

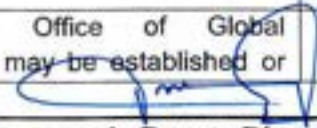
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STANDARD – 6: INTERNATIONALIZATION OF HIGHER EDUCATION AND GLOBAL ENGAGEMENT

SNo.	S-RIPE's FINDINGS/RECOMMENDATIONS	IMPLEMENTATION Activity/Action Plan	TARGET DATE	COMPLIANCE REPORT BY REGISTRAR (RESPONSE OF THE UNIVERSITY)
6.	6.1 COMMENDATIONS The university is promoting the integration of curriculum that should incorporate global issues, cross-cultural competence, and international standards to prepare students for diverse challenges and international contexts. University has signed MoUs with national organizations to boost academic and industry linkages. The University is constantly engaged in adopting digital technologies for virtual classrooms, online courses, and global e-learning aspects to enhance global collaboration, making education accessible and engaging despite geographical limitations. 6.2 FINDINGS 6.2.1 International collaboration with the donor agencies and funding agencies hey well utilised institutional collaboration I'm agreements with similar universities at international level is weak. There is no dedicated office to collaborate and coordinate with the international partners with rest to student and faculty exchange programmes, staff and statutory position experience exchange program, joint and collaborative research, involvement of the international partners in academic improvement, and improvement in governance and quality assurance mechanism. 6.2.2 The quality enhancement cell s not being provided opportunities for international exposure and learning from the international best practices through physical or virtual participation in international QA networks, seminar, workshop, trainings. 6.2.3 HU is established for more than 2 decades. During this time sufficient efforts could have been initiated for international accreditation for example ABET, AACSB etc. At present there is no evidence of such accreditation being in process. 6.2.4 Student, faculty and staff exchange mechanism hey not developed due to wedge limited guidelines are available and no guidance with respect to encouraging students and faculty in academic mobility is evident. Due to wedge there is limited opportunities being exploited and no formal training or means of communication are available. 6.2.5 Hazara university participation in the ranking is encouraging at present staff from quality enhancement cell hey working on Sri international rankings. The staff training on international rankings is limited which limits the capabilities of the concerned staff. 6.3 RECOMMENDATIONS	A full-time Office of Global engagement may be established or	To be noted PRIORITIZE	-


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6.3.1 Establish an international office or designate to any relevant section to manage global partnerships, student/faculty/staff exchange and collaboration. 6.3.2 Initiate processes for international accreditations such as ABET and AACSB. 6.3.3 Develop formal faculty and student exchange policies. 6.3.4 Provide QEC staff with training and exposure on international quality assurance practices. 6.3.5 Expand participation in international rankings. Training and visits of the staff concerned to the universities perform exceptionally well on the rankings.	designated to any relevant section to manage global partnerships, student/faculty/staff exchange and collaboration.		
	[Actn: Registrar and Dir ORIC]		
	The Processes for International Accreditations must be initiated.	PRIORITIZE	
	[Actn: Registrar]		
	Developing formal policies for faculty and student exchange at both national and international levels.	BY 31-03-2026	
	[Actn: Registrar, Dir ORIC and Deans]		
	The QEC staff must be given the opportunities (Trainings) for getting the exposure on international quality assurance practices.	ATTENTIVE	
	[Actn: Registrar]		
	For international ranking the visits of exceptional performing universities should be arranged for the staff concerned.	PRIORITIZE	
	[Actn: Registrar]		

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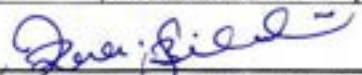
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STANDARD – 7: FACULTY RECRUITMENT, DEVELOPMENT AND SUPPORT SERVICES

<u>SNo.</u>	<u>S-RIPE's REPORT- FINDINGS/RECOMMENDATIONS</u>	<u>IMPLEMENTATION Activity/Action Plan</u>	<u>TARGET DATE</u>	<u>COMPLIANCE REPORT BY REGISTRAR (RESPONSE OF THE UNIVERSITY)</u>
7.	7.1 COMMENDATIONS There are well qualified PhD faculty members at university. The faculty is motivated to excel in the university. The faculty appointment/hiring process is comprehensively defined in the university statutes which is followed in true spirit. There is regular mechanism of faculty teaching/course evaluation that is carried out at the department level. However, the overall Annual Appraisal system does not exist in the university to judge the performance of teachers. A total of 60% of the faculty members hold PhD degrees. The university provides opportunities and encourages/facilitate faculty members to participate in professional training/workshops for their professional development that are organized at National/International level. 7.2 FINDINGS 7.2.1 Faculty appointment according to the statutory provisions and it is well documented. 7.2.2 For the newly hired faculty and staff there is a lack of orientation mechanism and orientation policy. It is very important for the universities to provide orientation that ensures all faculty members have mandatory advance knowledge of the university governance structure, about the act, statutes, rules and regulations, and communication as well as pedagogical skills. 7.2.3 Faculty development policy non existing due to wage institutional mechanism to provide necessary facilities and support to the faculty for career development training and capacity building is limited. 7.2.4 Faculty engagement with the industry is limited, a handful number of faculty out of 390 faculty are having any or connection with the industry which affects the capability of faculty to provide contemporary and industrial driven knowledge and skills to students. 7.2.5 Merely any faculty is having active research project. The performance over the past 5 years with reference to research project awarded by any donor agency is very limited. For example, in 2018 only one project was awarded. In 2021, 3 projects were awarded while in 2022, 12 projects were awarded. 2023-24 only 4 projects were awarded while in 2025 only one project has been awarded. Numbers in comparison to 390 faculty is not encouraging. Similar pattern is evident in conferences, workshops, trainings, community engagement and related activities.			
			To be noted	

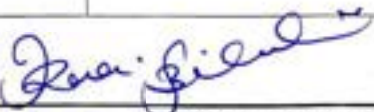

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7.2.6	Visiting faculty load is high while the regular faculty was underload as per the record of the course surveys and CMS.		
7.3	RECOMMENDATIONS		
7.3.1	Develop and implement an orientation policy for new faculty and staff.		
7.3.2	Establish a comprehensive faculty development policy.		
7.3.3	Increase faculty engagement with industry.		
7.3.4	Encourage faculty participation in research projects.		
7.3.5	One publication as first author to be made mandatory for annual increment.		
7.3.6	Review faculty workload distribution to balance teaching between regular and visiting faculty.		
7.3.7	Introduce annual appraisal scheme of teachers in the university.		
	The university may constitute committee(s) to frame the following policies: a. Faculty Orientation Policy b. Faculty Training and Development Policy [Actn: Registrar]	BY 15-12-2025	
	Developing a mechanism where faculty members can easily engage with industry in accordance with their research interest. [Actn: Dir ORIC Ensure: Registrar]	PRIORITIZE ACTION	
	Prepare a system for faculty maximum participation in getting the research projects. [Actn: Dir ORIC Ensure: Registrar & Deans]	PRIORITIZE ACTION	
	For faculty annual increment One publication as FIRST Author to be made mandatory. [Actn: Registrar, Deans and Chairpersons]	ATTENTIVE POLICY DECISION 25-12-2025	
	The faculty teaching/work load distribution must be reviewed. SEE 7.3.6 [Actn: Dean/Chairperson, DR(A)]	PRIORITIZE ACTION	
	Annual appraisal scheme of teachers may be introduced as per 7.3.7. [Actn: Registrar in consultation with Deans]	ATTENTIVE YEARLY BASE BY 31-12-2025 Each year	


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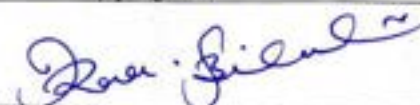

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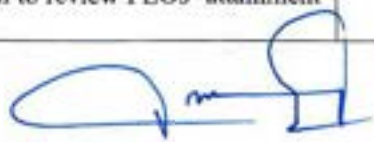

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STANDARD – 8: ACADEMIC PROGRAMMES AND CURRICULA

SNo.	S-RIPE's REPORT-FINDINGS/RECOMMENDATIONS	IMPLEMENTATION Activity/Action Plan	TARGET DATE	COMPLIANCE REPORT BY REGISTRAR (RESPONSE OF THE UNIVERSITY)
8.	8.1 COMMENDATIONS The departments, through departmental committees design the academic programs offered by university. Courses are designed in the light of HEC approved curricula and sent for approval of programs to academic council. The final approval of the program is granted by Syndicate. Curricula are not revised for long. Master copies of curricula and approved schemes of studies are not available in relevant offices i.e. Academic Section and Directorate A&R.			
	8.2 FINDINGS 8.2.1 Hazara university has well established academic rules and regulations. These rules and regulations are reviewed and improved regularly. 8.2.2 The curriculum is approved from all statutory bodies and revised as per the NCRC guidelines. However, involvement of relevant industry and other stakeholders is very limited. 8.2.3 Research & publication policy related to Advance/Graduate studies and its publishing alongwith the graduate scholars ethics and supervisory ethics does not exists and COPE committee is not notified. 8.2.4 Inclusion of the input from faculty (course review) and students (course review) are not taken into consideration during preparation for the review and revision of the curriculum. Both surveys are conducted by QEC and accessible to the departments. 8.2.5 Skill assessment e.g. critical thinking, creativity, collaboration, communication, etc. are assessed as a part of curriculum. However, these assessments may require other mechanism to track progress of the individual students. These skillsets are essential demand of the industry which may not be reviewed in the traditional grading system. 8.2.6 Curriculum approved by the statutory bodies has not been recorded in the academic section and neither available in the Directorate of academic & Research. Master files of all approved curriculum for correspondence and proper record keeping in the registrar office (relevant section) are required in sequence yearwise or approval date-wise. 8.2.7 Mission, PLOs and PEOs are reported in SAR (PREE), however, attainment of the PLOs and PEOs is not reported. For example, graduating survey, alumni survey, and employer surveys are fundamental to review PEOs' attainment progress.		To be noted	


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8.2.8 New programs i.e. BS Statistics with Data Science and BS Mathematics with Finance has a nomenclature not aligned with NQF and deviation from the degree nomenclature guideline of HEC. 8.2.9 BS-Forestry has been commenced/offered under the department of Botany, for which prior commencement the accreditation with the relevant Council (NAEAC) is required. Further, the main Main-field of Forestry is "Agriculture, forestry, Fisheries and veterinary" and does not fall under relevance of the Botany which is itself narrow field of Biological Sciences. Hence the relevancy of teachers & program are required to be done by the University relevancy/feasibility committee in formal manner.			
8.3 RECOMMENDATIONS 8.3.1 Involve industry stakeholders in curriculum development. 8.3.2 Incorporate faculty and student feedback in curriculum revisions. 8.3.3 Develop mechanisms for tracking skill attainment. 8.3.4 Maintain a centralized master file of approved curricula in the academic section. 8.3.5 Scan copies to the Master copies to be kept on HU-web/CMS. 8.3.6 Conduct surveys to measure PLO and PEO attainment. 8.3.7 Align program nomenclature with HEC guidelines. 8.3.8 Seek required accreditations for all existing programs and seek it for new programs before commencement. 8.3.9 75% attendance is mandatory requirement of HEC. The same reflected in uniform semester guidelines is adopted, however, it is not practiced. It is recommended ensure compliance of the HEC policy.	The stakeholders from the industry should be the members of Curriculum Development Committee for aligning the curriculum with the industry's needs and requirements. [Actn: Registrar]	PRIORITIZE ACTION	
	The university may frame "Curriculum-Review-Policy" to streamline the review of the academic programs regularly. The policy may cover the consideration of teacher and student feedback. [Actn: Registrar and DR (Acad)]	Within three months By 25-12-2025	
	Development of mechanisms for tracking skill attainment for identifying, cataloging, and monitoring skills within an individual and organization to create a dynamic record of capabilities, identify gaps, and plan for future development [Actn: Registrar]	IMMEDIATE	
	A centralized Master File of approved curricula must be retained with the Academic-Section of the University. [Actn: Registrar] Scan copies of the approved curricula to be uploaded on the University	HIGH PRIORITY FOCUS ACTION IMMEDIATE	

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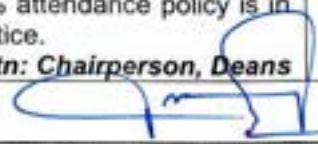
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8.3.10 Relative grading system for the class strength above 20 students may be considered as per the HEC guidelines.	website and CMS for the information of public and all stakeholders. [Actn: Director IT Ensure: Registrar]		
	Surveys must be conducted to measure the Program Learning Outcomes (PLOs) and Program Educational Objectives (PEOs). [Actn: Deans and Chairpersons Coord: Registrar]	By the end of each semester Regularly	
	A report shall be prepared by academic section of the university for "Aligning the Nomenclature of all degree programs with HEC guidelines (NQF & PQR)". [Actn: Registrar]	ATTENTIVE COMPLIANCE By 25-12-2025	
	A committee comprise of Concerned Dean, Director A&R, Director QE, Controller of Examination and officers from Registrar office may prepare "Academic Programs Accreditation Report" covering the status of existing programs and all the new programs planned for future before launch and submit their recommendations to competent forum. [Actn: Registrar]	BY 25-12-2025	
	The Chairmen must ensure a. The mandatory attendance requirement of HEC for students before appearing in final exams. b. 75 % attendance policy is in practice. [Actn: Chairperson, Deans]	Before the Examination in each semester	

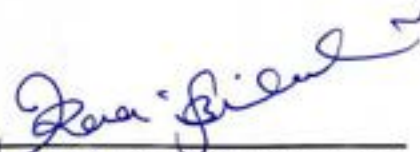

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		Coord: Registrar] Relative grading system may be considered as per HEC policy SEE. 8.3.10. [Actn: Deans and Chairperson]	ATTENTIVE	
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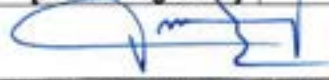

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STANDARD – 9: ADMISSION, PROGRESSION, ASSESSMENT AND CERTIFICATION

SNo.	S-RIPE's REPORT- FINDINGS/RECOMMENDATIONS	IMPLEMENTATION Activity/Action Plan	TARGET DATE	COMPLIANCE REPORT BY REGISTRAR (RESPONSE OF THE UNIVERSITY)
9.	9.1 COMMENDATIONS The university has well-defined and approved policies for admission of students in different academic programs. The university has a well-established Admission and Student Affairs office responsible for contacting prospective students individually through various means, i.e messaging and use of social media. There is also a good mechanism for the award and disbursement of scholarships and financial aid for students through different donor agencies.			
	9.2 FINDINGS 9.2.1 Admission mechanism is standardized and compatible with the institutional mission and objectives. The system is transparent and reliable. 9.2.2 Admission strategy/policy is not devised. Similarly, the marketing strategy is not explicitly drafted in accordance with the university's strategic plan. 9.2.3 The course drop (withdrawal) ratio in fall-2024 and spring 2025 is high. 1047 students dropped students as per the provided list from CMS. The number is quite high and requires further investigation. 9.2.4 Retention rate in some departments e.g. Conservation studies, Education, Tourism & Hospitality, Pharmacy (no data), Zoology, and Physics is in double digits (more than 10%). Fact finding committee under the Deanship to probe the matter after discussion with the dropped students. 9.2.5 Pharmacy program/department record is not available/updated on CMS related to all matters.		To be noted	
	9.3 RECOMMENDATIONS 9.3.1 Develop a formal admission strategy. 9.3.2 Prepare a marketing plan aligned with the strategic plan. 9.3.3 Investigate high course drop rates. 9.3.4 Identify and address causes of low retention in specific departments.	Development of a formal and clear admission strategy that shall be aligned with Graduate Education Policy (GEP) and Undergraduate Education Policy (UEP). [Actn: Dir SSC and Provost Ensure: Registrar]	ON PRIORITY By 31-12-2025 PRE-ADMISSION ACTIVITY	
		The university may prepare the marketing plan that will be aligned with the Strategic Plan of the University. [Actn: Registrar]	BY 20-01-2026	


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9.3.5 Pharmacy department/program formal data to be kept on CMS.	A committee may be constituted for investigation of high course drop rate and will prepare the report/recommendations for overcoming the high drop rate. [Actn: Registrar]	IMMEDIATE	
	A committee may be constituted to identify and address the causes of low retention in specific departments and submit their recommendations accordingly. [Actn: Registrar]	BY 20-02-2026	
	Pharmacy department/program formal data to be kept on CMS. [Actn: Dir IT Ensure: Registrar]	IMMEDIATE ON PRIORITY	

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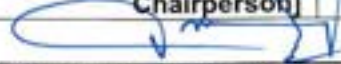
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STANDARD – 10: STUDENT SUPPORT SERVICES

SNo.	S-RIPE's REPORT- FINDINGS/RECOMMENDATIONS	IMPLEMENTATION Activity/Action Plan	TARGET DATE	COMPLIANCE REPORT BY REGISTRAR (RESPONSE OF THE UNIVERSITY)
10.	10.1 COMMENDATIONS The university has formulated student-related policies viz. admission policy, student guidelines etc., through statutory process. These policies are being reviewed and are also being updated frequently. The University has an active web portal for online admission from the year 2020 and admissions via online system has been processed successfully. There is Provision of curricular and co-curricular facilities/resources (libraries, computer labs, recreation, hostel, mess and sports facilities etc.), invitations to events, and participation in activities to all the students irrespective of the program/area of study and without any discrimination. The policy of awarding scholarships is available and implemented by the Finance office in coordination with departments. Financial aid programs, scholarships and grants do exist. Feedback from course evaluation, teacher evaluation is conducted by the respective departments with the facilitation from the QE directorate.			
	10.2 FINDINGS 10.2.1 Students are the major stakeholder as per the PSG-2023. Engagement of students in committees at departmental level and university level is recommended under PSG. At present, student involvement is limited. 10.2.2 SCALE is not notified. 10.2.3 Student support services review and progress review are not conducted. Periodic review and decision-making process helps in improving support services. 10.2.4 Formal mechanisms to solicit and take account of student and other stakeholder feedback are missing. 10.2.5 Hazara University has thousands of graduated students. The alumni engagement, including alumni association, is weak. Hazara University has very limited record of graduated students and weak bonding with alumni. Extensive involvement and engagement with alumni are highly beneficial for the university and students. 10.2.6 Records of the employers of the alumni are not provided.		To be noted	
	10.3 RECOMMENDATIONS 10.3.1 Increase student representation in committees. 10.3.2 Notify and operationalize SCALE.	Devise a system for representation of students in committees concerning students matters. It will help in minimizing the conflicts of students. [Act: Registrar, Deans and Chairperson]	Regular feature	


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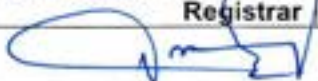

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10.3.3 Conduct periodic reviews of student support services. 10.3.4 Establish formal feedback mechanisms for students. 10.3.5 Create and maintain an alumni database and prepare action plan for alumni engagement. 10.3.6 Internship arrangements has become a major challenge for the universities. CCPC has limited capacity to facilitate student placement. The role of ORIC linkages office and faculty advisors is important in ensuring internship placement. A framework may be devised for smooth functioning. 10.3.7 Classroom audits by Deans is suggested on on-going basis to provide timely feedback to the faculty. 10.3.8 The Deans and HoDs may conduct random classroom visits to ensure conducive learning environment.	The policy for Student Council for Academic Learning & Enhancement (SCALE) has been framed by a committee and submitted to Registrar for approval. The SCALE shall be notified and operationalized accordingly. [Act: REGISTRAR Coord: Deans & Chairperson]	BY 10-11-2025	
	Periodic surveys and review reports of Student Support Services may be prepared and published by Student Support Services section. [Act: Dir SSC Coord: Registrar]	First report By 31-12 2025 and onward periodically	
	The Feedback system for students is available on CMS which needs to be properly monitored by Chairpersons and Deans and further prepare the reports for the student's feedback results. [Act: Chairpersons and Dean Ensure: Registrar]	First report By 31-12 2025 and onward periodically	
	(1) The office of Alumni Association may be created. (2) Maintain alumni database and prepare action plan for alumni engagement in different activities. [Act: Incharge Alumni Office Coord: Registrar]	By 25-12-2025	
	A framework may be devised for smooth functioning of Internship arrangements. The role of CCPC, ORIC linkages office and faculty advisors may be defined as which is important in ensuring internship placement [Act: Incharge CCPC and Registrar]	By 15-02-2026	


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		Coord: Dir ORIC & Faculty Advisors]		
		a. Dean's directives to be issued to its Faculty's Chairpersons/HoDs to conduct random classroom visits to ensure conducive learning environment and b. The Dean conducts the Classroom Audits on an ongoing basis to provide timely feedback to faculty. c. The Deans submits the consolidated report of classroom visits/audits to the Vice Chancellor. [Act: Dean(s) of each faculty]	Regular Feature Report BY 31 Dec 2025	

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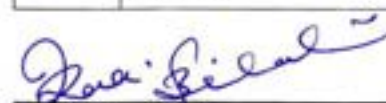
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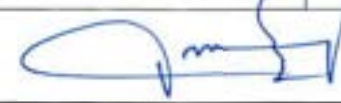
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STANDARD – 11: IMPACTFUL TEACHING AND LEARNING AND COMMUNITY ENGAGEMENT

SNo.	S-RIPE's FINDINGS/RECOMMENDATIONS	REPORT- IMPLEMENTATION Activity/Action Plan	TARGET DATE	COMPLIANCE REPORT BY REGISTRAR (RESPONSE OF THE UNIVERSITY)
11.	11.1 COMMENDATIONS The university has well-managed and well-maintained teaching facilities such as classrooms, libraries (including centralized digital library), laboratories, grounds, material, technology etc. The university is fully equipped with cost-effective resources but also to be quality controlled and well-maintained departments. Self-assessment report of academic programs is available and regularly monitored. Multiple Scholarships are available and processed through a centralized financial aid office. 11.2 FINDINGS 11.2.1 Enabling environment to support teaching with technology is essential for learning using modern teaching pedagogies. However, the classrooms are not equipped with digital tools for teaching. 11.2.2 Hazara University has only one smart classroom. 11.2.3 Old books in the library. No recent purchases have been made in the last three years. 11.2.4 Efforts are being made to educate students about SDGs and the university is also participating in the impact ranking. 11.3 RECOMMENDATIONS 11.3.1 Increase the number of smart classrooms. 11.3.2 Upgrade digital teaching tools in the existing classroom. 11.3.3 Increase access to modern learning resources. 11.3.4 Prepare action plan to shift towards paperless environment as compliance with the sustainability practices. 11.3.5 Training need assessment of the administrative staff and officers is recommended for onward capacity building.	Smart Classrooms are not enough an urgent need of more smart classrooms is required. <i>[Actn: REGISTRAR & Dir IT]</i> University may develop a mechanism for upgradation of digital teaching tools in the existing classrooms and to increase the access to modern learning resources as described in 11.3.2 & 11.3.3. <i>[Actn: Dir IT Coord: Deans & Registrar]</i>	- To be noted IMMEDIATE ON PRIORITY BY 31-03-2026	


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		Development of policy towards paperless environment as mentioned in 11.3.4 and get it approved by the bodies. [Actn: Registrar]	BY 20-01-2026	
		A proper mechanism must be developed for training need assessment of administrative staff and officer for capacity building. [Actn: Registrar & Dir Training]	IMMEDIATE ON PRIORITY and onward periodically	

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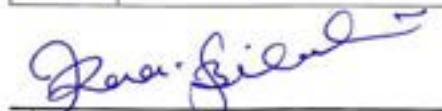
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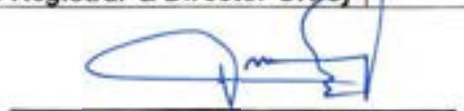
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STANDARD – 12: RESEARCH, INNOVATION, ENTREPRENEURSHIP AND INDUSTRIAL LINKAGE

SNo.	S-RIPE's FINDINGS/RECOMMENDATIONS	REPORT- IMPLEMENTATION Activity/Action Plan	TARGET DATE	COMPLIANCE REPORT BY REGISTRAR (RESPONSE OF THE UNIVERSITY)
12.	12.1 COMMENDATIONS The university has established the Office of Research, Innovation, and Commercialization (ORIC) which effectively facilitates faculties' as well as students in research contributions. The office assesses the faculty's engagement in continuing education activities, such as attending conferences, workshops, and pursuing additional certifications. Encourage lifelong learning and professional growth to stay abreast of emerging trends and technologies in all disciplines. It also recognizes the faculty's involvement in community outreach programs, volunteer initiatives, and public awareness campaigns. Highlight their contributions to addressing disparities, promoting education, and improving access to services in underserved areas.			
	12.2 FINDINGS 12.2.1 ORIC is not yet registered with HEC. Moreover, the BIC registration is also pending. 12.2.2 ORIC has not prepared policy on research, innovation, and entrepreneurship. 12.2.3 Intellectual property rights policy is in draft stage. 12.2.4 Research ethics policy is not approved. 12.2.5 Research integrity policy is not approved. 12.2.6 Spinoff policy for staff and faculty is not prepared. 12.2.7 Industrial linkages record is incomplete and communication with the departments is limited. The activities organized and conducted by the departments with the industry are not shared with ORIC office. Mechanisms for centralized databases is not defined. 12.2.8 ASRB is actively performing the tasks as per requirements. 12.2.9 Training for the research students and research related workshops is limited. 12.2.10 Training on patent filing is not conducted. 12.2.11 Support from ORIC for the faculty to write winning research proposals for the award of projects from the donor agencies and industry are not evident.		To be noted	
	12.3 RECOMMENDATIONS 12.3.1 Register ORIC and BIC with HEC.	The University to ensure that ORIC and BIC are registered with HEC. [Actn: Registrar & Director ORIC]	IMMEDIATE ON PRIORITY	

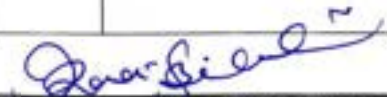

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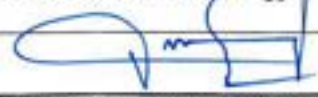

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12.3.2 Approve and implement research, innovation, and entrepreneurship policies. 12.3.3 Finalize Institutional research ethics and research integrity policies. 12.3.4 Develop a spinoff policy for staff and faculty.	The Research, Innovation, and entrepreneurship policies need to be approved from the concerned bodies and university to ensure their implementation in true letter and spirit. [Actn: Director ORIC, Coord: Registrar]	REQUIRED TO COMPLY BY 25-02-2026	
12.3.5 Establish a centralized database for industry linkages. 12.3.6 Provide training in research proposal writing. 12.3.7 Conduct workshops on patent filing. 12.3.8 Increase institutional funding and external funding opportunities for faculty-led research projects. 12.3.9 Establish a grant-matching program to encourage external funding applications.	The University's Research Ethics and Research Integrity Policies need to be finalized. This will enhance the university's research infrastructure, facilitate interdisciplinary collaboration, and promote innovative-driven solutions to address business challenges. This will also help address plagiarism prevention, intellectual property rights issues, and strengthen interdisciplinary collaboration. [Actn: Dir ORIC and Dir A&R, Consultation: Registrar]	IMMEDIATE ON PRIORITY Not later than 20-11-2025	
12.3.10 Create annual targets for peer-reviewed research publications. 12.3.11 Partner with industry to co-develop research projects addressing market needs.	Development of Spinoff Policy for staff and faculty. [Actn: Registrar and Deans]	BY 10-03-2026	
12.3.12 Maintain a publicly accessible database of completed and ongoing research projects.	The ORIC may establish a centralized database for industry linkages. [Actn: Director ORIC]	BY 10-03-2026	
12.3.13 Organize research collaboration forums to connect faculty with industry partners. 12.3.14 Provide dedicated administrative support for grant and project management under ORIC.	The ORIC may organize training and workshops for the faculty members to motivate them to register more patents and for research proposal writing. SEE 12.3.6 & 12.3.7 [Actn: Director ORIC Consultation: Dir Training]	BY 25-02-2026 and onward periodically	

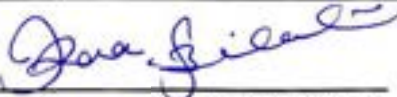

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12.3.15 ORIC in collaboration with the departments may devise plan for commercialization of the assets e.g. labs and infrastructure. 12.3.16 Research grants and funding for the student to conduct research may be devised in consultation with the departments under R&D fund.	University may increase institutional funding and external funding opportunities for faculty-led research projects and establish a grant-matching program to encourage external funding applications. [Actn: Director ORIC Coord: Registrar & Deans]	ATTENTIVE	
	A system must be devised to Create annual targets for peer-reviewed research publications and to Partner with industry to co-develop research projects addressing market needs. [Actn: Registrar]	BY 20-11-2025	
	ORIC may develop and maintain a publicly accessible database of completed and ongoing research projects. [Actn: Dir ORIC Consultation: Dir IT & Registrar]	BY 10-03-2026	
	University may organize research collaboration forums to connect faculty with industry partners for winning the more opportunities and projects. [Actn: Dir ORIC Consultation: Dir IT & Registrar]	ATTENTIVE and complied periodically	
	University must provide dedicated administrative support for grant and project management under ORIC. [Actn: Registrar Consultation: Dir ORIC]	IMMEDIATE ON PRIORITY	

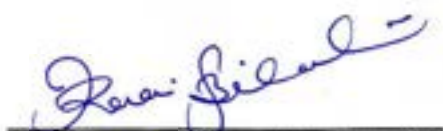

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		ORIC may devise plan for commercialization of the assets e.g. labs and infrastructure in collaboration with the departments. [Actn: Dir ORIC Consultation: Deans, Chairpersons & Registrar]	BY 10-03-2026	
		The university may devise a system in consultation with the departments under R&D fund about Research grants and funding for the student to conduct research. [Actn: Registrar Consultation: Dir ORIC, Deans & Chairpersons]	Priority	


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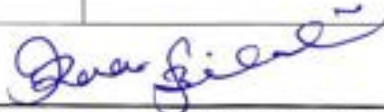

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STANDARD – 13: FAIRNESS AND INTEGRITY

SNo.	S-RIPE's FINDINGS/RECOMMENDATIONS	IMPLEMENTATION Activity/Action Plan	TARGET DATE	COMPLIANCE REPORT BY REGISTRAR (RESPONSE OF THE UNIVERSITY)
13.	13.1 COMMENDATIONS The university ensures ethical values when dealing with stakeholders through direct communication and approved fair, and transparent procedures. The university has established faculty/student grievance committee, has adopted the HEC's Plagiarism policy, is duly in place and has also implemented the HEC's approved software "Turnitin" for checking similarity index of faculty and students works. Departmental level constituted Grievance committees addresses grievances of students. Research Culture in the university is prevailing in the university. The university embeds a clear policy of equality and diversity covering recruitment, admission, retention, promotion, and disciplinary processes for students.			
	13.2 FINDINGS 13.2.1 Complaint mechanisms and TORs are not available on the website. Similarly, the notification of grievance redressal of students, faculty, and staff is not available. 13.2.2 RTI and citizen portal complaints are not addressed timely.		To be noted	
	13.3 RECOMMENDATIONS 13.3.1 Publish grievance committee details and TORs online. 13.3.2 Grievance redressal time period of 07 working days as per government policy to be fully complied. 13.3.3 Improve response times for RTI and citizen portal complaints. 13.3.4 KPIC response time to be fully complied.	Grievance Redressal committee should widely be publicized online along with its TORs among the stakeholders. The complaint/grievance may be dealt based on first cum first serve and the grievance redressal time period of 07 working days must be fully complied as per Government Policy. <i>[Actn: Registra]</i> University may Improve response times for RTI and citizen portal complaints and publish a consolidated report for the knowledge of General Public.	MUST-ACTION BY 15-02-2026	
		<i>[Actn: Registrar]</i>	BY 25-02-2026 and onward periodically	


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		Khyber Pakhtunkhwa Information Commission-KPIC response time must be fully complied with by the University. <i>[Actn: Registrar]</i>	ATTENTIVE and MUST compliance	
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STANDARD – 14: PUBLIC INFORMATION AND TRANSPARENCY

SNo.	S-RIPE's REPORT-FINDINGS/RECOMMENDATIONS	IMPLEMENTATION Activity/Action Plan	TARGET DATE	COMPLIANCE REPORT BY REGISTRAR (RESPONSE OF THE UNIVERSITY)
14.	14.1 COMMENDATIONS The university Act/ statutes/ rules/ regulations along with approved policies and SOPs are available on website. The university website informs the public about its mission, objectives, admission merit list and examination results and expected learning outcome, requirements and procedures and policies related to admission and transfer to credit, student fees, charges and refund policies. A brief introduction/profiles with contact details of Faculty of various programs offering in institute/college/school/department is provided on website for student facilitation. Ample information regarding curricula, fee structure and relevant details are provided for all programs			
	14.2 FINDINGS 14.2.1 Contact details of the members of statutory bodies is not uploaded on the website. 14.2.2 Policies and mechanisms to review and evaluate public information for accuracy are missing. 14.2.3 Fairness and integrity policies are not developed. 14.2.4 Review of the complaints in an academic year, and the quality of the decisions along with the list of pending complaints/appeals of the students, faculty, and administration are missing.		To be noted	
	14.3 RECOMMENDATIONS 14.3.1 Publish contact details of statutory body members on the website. 14.3.2 Develop a mechanism for reviewing public information. 14.3.3 Create a fairness and integrity policy. 14.3.4 Document and review complaint resolution processes.	The Contact details of the statutory body's members should be published on the website of the University for the information of Public. <i>[Actn: Director IT, Registrar]</i> The University may develop a mechanism for reviewing public information. <i>[Actn: Registrar]</i> The Fairness and Integrity policy of Hazara University must be devised <i>[Actn: Registrar]</i> The University may review complaint resolution processes and devise a	ATTENTIVE And IMMEDIATE BY 15-01-2026 BY 25-02-2026 PRIORITY IMMEDIATE	

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		mechanism to properly document them for record purposes. <i>[Actn: Registrar]</i>	COMPLIAN CE	
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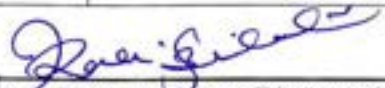
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STANDARD – 15: INSTITUTIONAL EFFECTIVENESS, QUALITY ASSURANCE AND ENHANCEMENT

SNo.	S-RIPE's FINDINGS/RECOMMENDATIONS	IMPLEMENTATION Activity/Action Plan	TARGET DATE	COMPLIANCE REPORT BY REGISTRAR (RESPONSE OF THE UNIVERSITY)
15.	15.1 COMMENDATIONS The management of the University knows importance of Quality Enhancement and seems determined to improve the quality of education in the institution. Hazara University has established Directorate of Quality Enhancement which is working in the right direction for developing policies and procedures to improve the quality of education. The HU QA policy-2024 is approved by Syndicate and is implemented. The various international rankings for assessment year reflect the efforts of the university in maintaining and improving its quality.			
	15.2 FINDINGS 15.2.1 Compliance and actions taken on the recommendations of PREE, GPR, and RIPE are very weak. No action or delay in actions affects the university's progression and hinders the CQI process. 15.2.2 Analysis and progress reports of the relevant qualitative and quantitative information for effective management and continuous improvement is limited due to lack of periodic progress review. 15.2.3 QEC staff have limited exposure and linkages with international universities and bodies. The lack of such exposure limits the overall standardization and adaptation of latest trends. 15.2.4 IQC has been established and operational as per PSG guidelines. 15.2.5 The format for RIPE report is very extensive and comprehensive. However, the focus is diverging from the essence of RIPE/PSG. The focus is expected to remain on the EOIs, identification of existing practices, future plans, and best practices. Similar standards and EOI based evaluation will be performed by HEC team, therefore, the effort is expected to be on responding to EOIs specific to the RIPE document.		To be noted	
	15.3 RECOMMENDATIONS 15.3.1 Implement timely actions on review recommendations. 15.3.2 Conduct regular progress reviews. 15.3.3 Facilitating international exposure for QEC staff is required to participate in international QA	The timely actions needed on Review (S-RIPE etc) recommendations for Implementation in true letter and spirit. [Actn: Registrar Consultation: Dir QE] It is recommended to conduct the progress reviews on regular basis. [Actn: Dir QE and whole HU team]	ATTENTIVE And IMMEDIATE COMPLIANCE	
			ATTENTIVE	


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conferences/meetings of organizations like INQAAHE/APQN etc. 15.3.4 Align IPER document as per PSG EOIs requirement/matchable.	The University should facilitate the DQE staff/officers for getting International Exposure by their maximum participation in International QA Conferences/meetings of Organization (INQAAHE, APQN etc). [Actn: Registrar Coord: Dir QE]	ATTENTIVE and PRIORITY COMPLIED	
	It is recommended that the IPER Document should be aligned with PSG EOIs requirements. [Actn: IPER Committee Coord: Registrar]	IMMEDIATE and PRIORITY COMPLIED BY Month of July Each Year	

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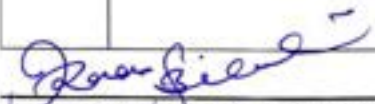
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STANDARD – 16: CQI AND CYCLICAL EXTERNAL QUALITY ASSURANCE

SNo.	S-RIPE's FINDINGS/RECOMMENDATIONS	IMPLEMENTATION Activity/Action Plan	TARGET DATE	COMPLIANCE REPORT BY REGISTRAR (RESPONSE OF THE UNIVERSITY)
16.	16.1 COMMENDATIONS University has set highest standards of quality in its core mission of academic teaching, learning and research, through a process of Quality Assurance and continuous Quality Improvement and enhancement. The directorate of QE is operational with the support of top leadership to strengthen institutional quality culture and generate recommendations against given quality indicators. The IQC is established whose meetings are held on STEP cycle base to align with the CQI scheme of the university. 16.2 FINDINGS 16.2.1 IQA policy is developed and published. 16.2.2 CQI is relatively new requirement of PSG-2023. Being an integral part of the continuous improvement, it requires universities to develop CQI policy, framework, and implementation across the board. Alignment of CQI with the university vision, mission, goals, and objectives will help in continuous improvement. At present, the CQI policy is not developed. 16.2.3 The surveys, feedback, and engagement with the stakeholders will provide information to the management for informed and timely decision making. 16.3 RECOMMENDATIONS 16.3.1 Develop and implement a CQI policy. 16.3.2 Aligning CQI framework with institutional mission and goals. 16.3.3 Increase stakeholder engagement in continuous improvement processes. 16.3.4 Policies, frameworks, progress reports, analytical reports, and other evidence required under the revised RIPE were reviewed. The missing evidence list is attached for the management to review and devise action plan as per the need and requirement of the university.	The university may develop the CQI Policy and get it approved from the concerned forum and then make sure its implementation properly. [Actn: Dir QE Consultation: Registrar] It is recommended the CQI framework must be aligned with Institutional Mission and Goals. [Actn: Dir QE Coord: Registrar] The University may devise a system to increase the stakeholder engagement in continuous improvement process. [Actn: Registrar]	- To be noted BY 20-02-2026 ATTENTIVE and PRIORITY BY 20-02-2026	


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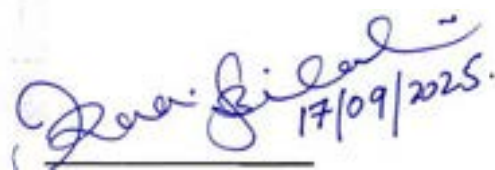

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		Consultation: Director QE] The University may review and devise action plans as per the requirement of the University. SEE 16.3.4 [Actn: Dir QE]	ATTENTIVE BY 20-02-2026	
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The Actn, coord, ensuring officers mentioned upto the best knowledge of Dir QE as deemed fit/relevant. The Hon. Registrar has the authority to change it within his domain wherever is necessary.


17/09/2025.

Rana Bilal Iqbal
Assistant Director QE
Hazara University



Dr Aurangzeb
Deputy Director QE
Hazara University


17/09/2025.

Lt Cdr (R) Dr Mahmood Khan
Director Quality Enhancement
Hazara University

Consent by Competent Authority/IQC:..... Dated --/--/2025

