

Appendix 1: Good Practice Template

INQAAHE Database on Good Practice in Quality Assurance (GPQA)

Template to submit Good Practices

Mandatory Fields to be filled:

1. Name of the QA agency

xxx

2. Web site address of the QA agency

xxx

3. Title of the good practice

xxx

4. Purposes achieved by, or objective of, the good practice

xxx

5. Context

xxx

6. Practice

xxx

7. Evidence of success, impact or realization the objectives

xxx

8. Resources required

Xxx

Optional:

9. Notes

xxx

10. Pictures

xxx

11. Captions/titles for pictures

xxx

12. Attachments

xxx

13. Details of the contact person

Name, Position, Work Phone, Mobile Phone, Fax, Email, Photo of Contact Person.

Completed submissions should be sent to the Administrator Mark Frederiks at the INQAAHE Secretariat at inqahe@nvao.net