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
11. Captions/titles for pictures

12. Attachments

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 inqaahe@nvaonet