



جامعة الإمام عبد الرحمن بن فيصل
IMAM ABDULRAHMAN BIN FAISAL UNIVERSITY

كلية الصيدلة | College of Pharmacy

Policy and Procedure Manual 2025



Compiled by
Vice Deanship for Development and Community Partnership



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IMAM ABDULRAHMAN BIN FAISAL UNIVERSITY

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Partnership
2025

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Preface

This manual serves as the official compilation of the policies and procedures governing the academic, administrative, and operational activities at the College of Pharmacy, Imam Abdulrahman Bin Faisal University. It is intended for use by all faculty members, staff, and students, each of whom is expected to adhere to its contents in accordance with their respective roles and responsibilities.

The manual establishes a framework of standards that guides professional conduct, interpersonal interactions, and institutional processes. It reflects the values, mission, and strategic objectives of the University, and supports a culture of accountability, excellence, and continuous improvement. All members of the College community are expected to familiarize themselves with the policies and procedures outlined in this manual. Should any questions or clarifications arise, the Office of the Vice Dean for Development and Community Partnership should be consulted for guidance and support.

Overview

Imam Abdulrahman Bin Faisal University

The Imam Abdulrahman Bin Faisal University opened its doors to women and men in 1975 with two pioneering colleges, the College of Medicine and the College of Architecture. Almost four decades later this academic institution has grown into a leading research university with 19 colleges spread throughout the Eastern Province and a student population of over 30,000.



As a preeminent research-based institution, the Imam Abdulrahman Bin Faisal University continues to grow and develop, continually assessing and improving its curricula and expanding its academic capabilities in all disciplines, while at the same time engaging the public in addressing environmental and community challenges. The university has four clusters of colleges:

- Health Professional Cluster Colleges.
- Engineering Cluster Colleges.
- Sciences and Management Professional Cluster Colleges.
- Arts and humanities Cluster Colleges.

Vision

A leading University achieving distinction nationally, regionally and internationally.

Mission

providing creative knowledge, research, and professional services with effective community partnerships.

Values

Loyalty, Excellence, Teamwork, Transparency, Diversity, Creativity and Social Responsibility.

College of Pharmacy

Overview

The College of Pharmacy (COP) at Imam Abdulrahman Bin Faisal University is a forward-looking academic institution dedicated to excellence in pharmaceutical education, research, and community engagement. Originally established by Royal Decree on July 8, 2011, the College began its journey as the College of Clinical Pharmacy, launching its flagship Doctor of Pharmacy (PharmD) program in 2012/2013 academic year. The College proudly celebrated the graduation of its first cohort in May 2017. In 2025, following extensive consultation with internal and external stakeholders, the College was renamed the College of Pharmacy (COP). This strategic rebranding reflects the College's expanding academic scope, its commitment to international standards, and its readiness to introduce diverse pharmaceutical programs beyond clinical training.

The PharmD program at COP is fully accredited by the National Center for Academic Accreditation and Evaluation (NCAAA) through April 2028, highlighting the College's commitment to quality, continuous improvement, and alignment with national academic standards. As part of its strategic growth, the College will launch its first postgraduate offering, the Master of Integrative Pharmaceutical Sciences, in Fall 2025. This innovative program is designed to bridge the gap between scientific research and applied pharmaceutical practice, preparing graduates for impactful roles in drug development, regulatory sciences, and interdisciplinary research.

Through academic excellence, innovative research, and community partnerships, the College of Pharmacy continues to position itself as a national leader in advancing pharmacy education and contributing meaningfully to the healthcare sector in Saudi Arabia and beyond.

COP Vision

A leading college in pharmacy education, transformative healthcare, community service, and innovative and translational research.

COP Mission

To advance pharmacy profession through innovative teaching and learning practices, impactful research, inter-professional collaboration, partnerships, and community engagement in a sustainable environment.

COP Values

Equality, Professional Excellence, Teamwork, Diversity, Creativity & Innovation, Life-Long Learning, Social responsibility.

COP Strategic Goals

1. Excellence in teaching and learning in Pharmacy Education.
2. Excellence in research and innovation in pharmacy.
3. Promote social responsibilities of the pharmacy profession.
4. Build human resource capacity.
5. Maintain a positive working environment.
6. Establish an advanced and efficient administrative management system.
7. Establish the culture of financial sustainability.
8. Integrate high-tech solutions across various aspects in the college.

PharmD Program Vision

A PharmD program distinguished for its excellence in teaching and learning, research and community engagement through innovation and collaboration.

PharmD Program Mission

To graduate Pharmacists competent in serving the profession in all sectors, providing collaborative patient-centered care, and conducting quality research to promote the health and wellbeing of the public.

PharmD Program Values

Professionalism, Accountability, Partnership Working & Collaboration, Integrity, Leadership, Empathy, Distinction, Social responsibility.

PharmD Program Goals

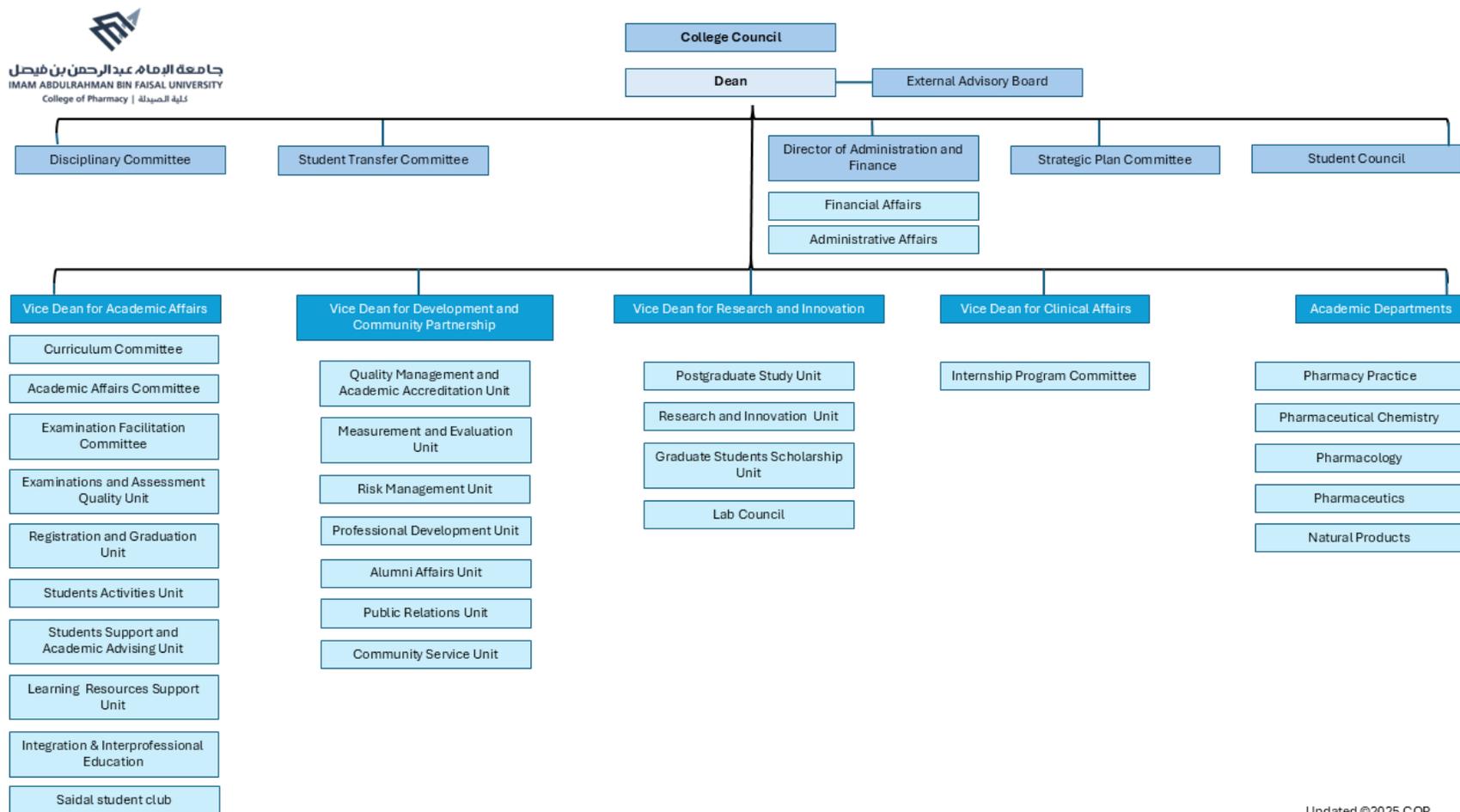
1. Promote excellence in pharmacy education.
2. Foster interprofessional education and collaboration.
3. Commit to professional and leadership development.
4. Advance research and innovation in pharmacy.
5. Enhance community engagement and well-being.

Administration

College of Pharmacy Administration

College of Pharmacy (COP) has a well-defined organizational hierarchy for administration. As a governmental university, it follows the rules and regulations set by the Ministry of Education. The College Board is the highest authority in the College and is responsible for all major decisions and for ensuring compliance with institutional policies and procedures. The Dean heads the college administration. There are four vice deans and one director of administration. The Dean nominates Vice Deans and Department Chairs based on the recommendations of a selection committee formed for this purpose at the university level. The selection committee evaluates potential candidates in accordance with the University's policies and strategic priorities. Following the committee's recommendation and the Dean's nomination, appointments are formally approved and issued by the University President.

Organizational structure



Faculty Academic Responsibilities and Duties Policy and Procedure

 <p style="margin: 0;">جامعة الإمام عبد الرحمن بن فيصل IMAM ABDULRAHMAN BIN FAISAL UNIVERSITY كلية الصيدلة College of Pharmacy</p>	
Policy Title:	Faculty Academic Responsibilities and Duties Policy and Procedure
Policy Code:	COP-AD-001
Date of Initial Approval:	May 2016
Date of Last Review:	January 2025
Next Review Data:	January 2028
Approved by:	College Council
Responsible Office:	Vice Dean for Academic Affairs

Purpose

This policy outlines the academic responsibilities and expected duties of faculty members at the College of Pharmacy, Imam Abdulrahman Bin Faisal University. It is intended to ensure consistency, accountability, and quality in teaching, mentoring, curriculum development, and student engagement.

Scope

This policy applies to all academic staff including professors, associate professors, assistant professors, lecturers, and demonstrators involved in teaching, mentoring, and academic support at the College of Pharmacy.

Policy Statement

The University regards teaching and educational engagement as central to the mission of the College of Pharmacy. Faculty members are expected to uphold high standards in teaching, student mentorship, curriculum contribution, and professional conduct.

Responsibilities and Duties

1. Teaching Responsibilities

- Deliver course content accurately and effectively in accordance with the approved course specifications and intended learning outcomes (CLOs and PLOs).
- Communicate course objectives and evaluation methods to students at the beginning of each semester.
- Generate a positive and supportive learning environment that encourages student engagement, critical thinking, and academic excellence.
- Serve as a mentor, advisor, and academic guide to students outside the classroom.

2. Teaching Load

- Teaching loads vary by academic rank. Standard teaching load per semester:

#	Position	Teaching units
1	Professor	10
2	Associate professor	12
3	Assistant professor	14
4	Lecturer	16
5	Demonstrator (Teaching assistant)	16

- Additional responsibilities such as graduation project supervision, summer training supervision, and course coordination may be counted toward total load.
- Adjustments to teaching load may be made for those assigned administrative or research duties, subject to departmental and college approval.

3. Curriculum Development

- Faculty are expected to actively participate in reviewing, updating, and developing course content to align with scientific advancements, national frameworks, and accreditation standards.
- Propose improvements to course learning outcomes and instructional strategies where appropriate.

4. Course Scheduling

- All course schedules are managed centrally by the Deanship of Admissions & Registration in collaboration with the College Registration and Graduation Unit.
- Requests to modify assigned schedules must be submitted through the Vice Deanship for Academic Affairs with valid justification.

5. Conduct of Classes

- Faculty must begin and end lectures and lab sessions on time as per the assigned schedule.
- They are responsible for maintaining discipline, ensuring productive learning, and utilizing classroom technology effectively.

6. Office Hours

- Faculty must maintain a reasonable number of weekly office hours for student consultations.
- Office hours should be scheduled at times accessible to students and posted on the Student Information System (SIS) and the course page on Blackboard at the start of the semester.

7. Student Records and Attendance

- Faculty must ensure that only registered students are attending the course, as confirmed by the official class roster.
- Faculty must record student attendance regularly and adhere to the university's attendance policy:
 - **>15% unexcused absences** → DN grade
 - **>25% total absences (excused + unexcused)** → DN grade
- Absence data must be updated in the SIS and communicated to the academic advisor.

8. Class Cancellations and Make-Up Classes

- Instructors may cancel a class only due to illness, emergency, or approved university business.
- The department and students must be notified in advance.
- Faculty must reschedule missed classes and inform the department of the make-up sessions.

9. Textbooks and Course Materials

- Each course should have a designated textbook approved by the department.
- Faculty may supplement with additional references and materials, including self-developed lecture notes.
- Proposals for new or alternative textbooks must follow university procedures and obtain department and college-level approvals.

10. Course Portfolio

- At the end of each semester, faculty must prepare and submit a complete Course Portfolio, which includes:
 - Course specification
 - Instructor report
 - Sample student work
 - Assessments (quizzes, exams, projects)
 - Course report
 - CLOs assessment Excel sheet and report
- A detailed checklist of required course portfolio materials is appended at the end of this policy. Faculty members are expected to use this checklist to ensure completeness and consistency in documentation.

- This documentation supports accreditation and continuous quality assurance.

Non-Compliance

Failure of a faculty member to meet the duties outlined in this policy may lead to formal warnings or disciplinary action as per university regulations.

Appendix: Course portfolio checklist

وزارة التعليم
Ministry of Education
043



المملكة العربية السعودية
Kingdom of Saudi Arabia

Deanship of Quality & Academic Accreditation | عمادة الجودة و الاعتماد الأكاديمي

Course Portfolio Contents and Checklist

Content	Soft copy	Hard copy	Comments
Front Page with details			
1 Faculty member CV			
2 Course Specifications (Signed)			
3 Course Report (signed)			
4 Field Experience Specification (signed) (If applicable)			
5 Field Experience Report (signed) (If applicable)			
6 Evidences of Teaching process and feedback			
6.1 Course Related Material			
6.1.a Teaching Material (PPT/PDF)			
6.1.b Handout			
6.1.c Any updates about the course from journals, internet, etc			
6.2 Assessment and Extent of Student Learning	Excellent Average Needs Improvement	Excellent Average Needs Improvement	Note: Names and ID of students have to be masked
6.2.a Quiz			
6.2.b Quiz Answer Key			
6.2.c Midterm Exam/Jury Paper			
6.2.d Midterm Exam Answer Key (if relevant)			
6.2.e Final Exam/Jury Paper			
6.2.f Final Exam Answer Key (if relevant)			
6.2.g Assignments			
6.2.h Projects			
Other			
6.3 Reports of Students Evaluation for teaching Effectiveness results			
6.3.a Report of the formal surveys' results (CES, SSLS, etc)			
6.3.b Report of the informal surveys' results (on LOs, group discussion, etc)			
7 Reports of Attainment of CLS Outcome for every semester			
8 Reflections (What's done and what's need to be improved?)			

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التاريخ: / / _____
المشروعات: _____

Recruitment of Saudi Faculty and Staff Policy and Procedure

 <p style="margin: 0;">جامعة الإمام عبد الرحمن بن فيصل IMAM ABDULRAHMAN BIN FAISAL UNIVERSITY كلية الصيدلة College of Pharmacy</p>	
Policy Title:	Recruitment of Saudi Faculty and Staff Policy and Procedure
Policy Code:	COP-AD-002
Date of Initial Approval:	May 2016
Date of Last Review:	January 2025
Next Review Data:	January 2028
Approved by:	College Council
Responsible Office:	Vice Deanship of Development and Community Partnership

Purpose:

The aim of this procedure is to provide guidelines for Governing affairs of Saudi Faculty members based on the rules and regulation stipulated on the Commission of higher Education.

Scope:

This procedure applies to all Saudi Faculty members of the College of Pharmacy.

Procedure:**Appointment and Promotion:**

A permanent committee, concerned with the affairs of lecturers, demonstrators, language teachers and researchers' assistants headed by the Deputy President for Graduate Studies and Scientific Research, is set in each University by a decision of the University Council on the recommendation of the President of the University. The committee presents its recommendations to the University Council. Some of its tasks are the following:

1. Suggests the general policy for selecting lecturers, demonstrators, language teachers and researchers' assistants and distributing them in departments and Colleges.
2. Considers the recommendations of Faculty Boards of Colleges concerning the appointment of lecturers, demonstrators, language teachers and researchers' assistants according to the following criteria:
 - a. The number of Saudi staff members and their ratio to the total number of staff members in the department, their specialties and teaching loads.
 - b. The number of lecturers, demonstrators, language teachers and researchers' assistants in the department.
 - c. The number of scholarship students in the department, their specialties and the dates they are expected to return.
3. Suggests distributing the jobs of lecturers, demonstrators, language teachers and researchers' assistants according to the departments' present and future needs.
4. Studies recommendations concerning the transfer of lecturers and demonstrators to administrative jobs in the university or transferring them to the Ministry of Civil Service.

The appointment of a demonstrator is controlled by:

1. A bachelor's degree from a Saudi university, or another recognized university.
2. With a GPA of at least "Very Good" standard at university level.
3. Any other conditions made by the University Council.

The appointment of a lecturer and a language teacher is controlled by:

1. A master's degree or equivalent from a Saudi university or another recognized university.
2. With a GPA of at least "Very Good" standard at master's level.
3. Any other conditions made by the University Council.

The appointment of a research assistant is controlled by:

1. For a master's degree holder (research assistant A):
 - a. A master's degree or equivalent from a Saudi university or another recognized university, with a GPA of at least "Very Good" standard.
 - b. Any other conditions considered by the University.
2. For a bachelor's degree holder (researcher assistant B):
 - a. A bachelor's degree with a GPA of at least "Very Good" standard from a Saudi university or another recognized university.
 - b. Any other conditions considered by the University.

Lecturers, demonstrators, language teachers are appointed on the recommendation of the department where they will be working, the College Faculty Board, and the permanent committee for the affairs of lecturers, demonstrators, language teachers and researchers' assistants. The appointment decision is made by the University Council.

A researcher's assistant is appointed by the University Council decision on the recommendations of Faculty Boards of the concerned Department and College, and the permanent committee for the affairs of lecturers, demonstrators, language teachers and researchers' assistants.

A Demonstrator whose university study average is seven years is appointed in the fourth degree in the rank of a demonstrator.

The appointment in the rank of Assistant Professor is controlled by obtaining a Doctorate degree from a Saudi university or another recognized university. The University Council might add any other conditions.

The University Council, in cases of necessity, and on the recommendations of the Faculty Boards of Department and College concerned, and the Scientific Council, might appoint in the rank of Assistant Professor without the condition of obtaining a Doctorate degree in specialties where Doctorate degrees are not offered, according to the following rules. The nominee:

1. Should have a master's degree or equivalent from a Saudi university or another recognized university.
2. Worked for at least three years as a lecturer.
3. Should present an academic authorship of not less than three units published after receiving the master's degree, at least one of them is sole academic authorship. The academic authorship should be in accordance with Article 29 of these regulations.

Considering the rules of Article 12 of the Higher Education Council, the appointment in the rank of Associate Professor is controlled by the following:

1. A Doctorate degree from a Saudi university or another recognized university.
2. An experience of not less than four years as a staff member after being appointed in the rank of Assistant Professor in the university or other recognized universities.
3. Should be academically promoted to the rank of Associate Professor by a Saudi university or another recognized university.

Considering the rules of Article 12, the appointment in the rank of Professor is controlled by the following:

1. A Doctorate degree from a Saudi university or another recognized university.
2. An experience of not less than eight years as a staff member, at least four of them in the rank of Associate Professor in university or another recognized university.
3. Should be academically promoted to the rank of Professor by a Saudi university or another recognized university.

Staff members are appointed to the recommendations of the Faculty Boards of the Department concerned and College, and the Scientific Council. The appointment decision is made by the University Council.

1. A holder of a Doctorate degree who is transferred from any of the job ranks to staff members, lecturers or demonstrators' ranks at the university, is classified in the rank of Assistant Professor in the specialty of the Doctorate degree and given the first degree of the rank of Assistant Professor. If his/her salary, at the time of transfer, is equal to or more than the salary of the new rank, he/she is given the salary of the rank exceeding his/her salary. If his/her salary exceeded the maximum salary for the rank of Assistant Professor, he/she is given the difference in the form of a reward till the difference vanishes by promotion and reward.
2. If the classified person was a staff member before, he/she is appointed on the same rank he/she was occupying with and then treated according to Item 1 above.
3. If the transferred person has experiences acquired after obtaining the academic qualification required for the appointment, and his/her salary earned according to Item 1 of this Article, in case of considering his/her experience, is less than he/she deserves, this experience should be considered on the basis of each year as a reward, if the experience is in the field of specialty.

Items 1, 2 and 3 are applied to bachelor's and master's degree holders to be appointed in the ranks of demonstrators or lecturers.

If a nominee has acquired experience after obtaining the academic qualification required for the appointment, and he/she is not included in Article 16, this experience should be considered on the basis of each year as a reward, if the experience is in the field of specialty.

The appointed staff members, and equivalent, are given the first rank of the job he/she was appointed to. If his/her salary, at the time of appointment, is equal to or more than the salary of this rank, he/she is given the salary of the first rank exceeding his/her salary. The promoted staff members, and equivalent, are given the salary of the first rank of the job he/she was promoted to. If his/her salary, at the time of promotion, is equal to or more than the salary of this rank, he/she is given the salary of the first rank exceeding his/her salary.

Staff members, lecturers and demonstrators are treated like government employees concerning allowances, rewards and benefits on the basis of the following equation:

- Demonstrator..... 8th Rank.
- Lecturer 9th Rank.
- Assistant Professor12th Rank.
- Associate Professor.....13th Rank.
- Professor.....14th Rank.

The monthly transportation allowance for the rank of Professor is 650 Saudi Riyals.

If the Professor's salary reaches the maximum salary for staff members, he/she will not be prevented from the annual increment as it is affected by rules. This is applied only to the rank of Professor.

The minimum qualifications for promotion from the rank of Assistant Professor to the rank of Associate Professor are:

1. At least four years of professional experience in the rank of Assistant Professor a Saudi university, or another recognized university. The experience in Saudi universities should not be less than one year.
2. Fulfilling the minimum academic output determined for promotion and stated in Article 32 of these regulations.
3. The academic output presented should be published or accepted for publication while occupying the rank of Assistant Professor.

The minimum qualifications for promotion from the rank of Associate Professor to the rank of Professor are:

1. At least four years of professional experience in the rank of Associate Professor a Saudi university or another recognized university. The experience in Saudi universities should not be less than one year.
2. Fulfilling the minimum academic output determined for promotion and stated in Article 32 of these regulations.
3. The academic output presented should be published or accepted for publication while occupying the rank of Associate Professor.

A staff member is entitled to apply for promotion six months before the regular duration.

The loan, secondment or delegation for the purpose of promotion is to be counted as follows:

1. The full duration should be counted if the loan, secondment or delegation was to a scientific organization and the work was in the field of specialty.
2. Half duration should be counted, if the loan, secondment or delegation was to a non-Scientific organization, but the work was in the field of specialty.
3. No part of the duration should be counted if the work done during the loan, secondment or delegation was not in the field of specialty.

Duties

Staff members are expected to demonstrate the following characteristics:

1. Faithfulness and good conduct, and adheres to the regulations, instructions and rules of conduct, not breaching the job charter.
2. Follow the latest developments in his/her specialization and contribute to the advancement of his/her specialization through academic activity.
3. To convey the latest development in his/her specialization to his/her students and instill into them the desire for knowledge and sound scientific thinking.
4. To participate actively in the duties of the Departmental Faculty Board and other committees and Boards in which he/she is a member on the level of the department, the faculty, and the

university, and to participate in community service activities carried out by the department, the faculty and the university.

5. To dedicate his/her time to work at the University. He/she is not allowed to work outside the university unless with prior agreement according to rules and regulations.
 - A staff member should report to the department chairman any incident of gross misconduct by a student in his/her class for investigation and disciplinary action.
 - The teaching workload for staff members, and their equivalent, is as follows:
 - Professor: 10 teaching units
 - Associate Professor: 12 teaching units
 - Assistant Professor: 14 teaching units
 - Lecturer: 16 teaching units
 - Demonstrator: 16 teaching units
 - Language Teacher: 18 teaching units
 - The teaching unit is a weekly theoretical lecture the duration of which is not less than 50 minutes, or a practical or field session with duration not less than 100 minutes. The teaching unit continues for a full semester.
 - The staff members, and their equivalent, perform 35 hours of work per week, likely to be raised to 40 by the University Council decision, spent in teaching, research, guidance, office hours, academic committees, and other duties assigned by the specialized parties in the University.
 - The teaching load for faculty members who hold the administrative ranks of deputy President, deans, deputy deans, directors of academic centers and heads of departments is decreased to be at least three teaching units.
 - The head of a department, and his/her designee, presents an annual report to the dean of the College, and his/her designee, about the work process in the department and the academic activities of the staff members. The dean of the College, and his/her designee, presents an annual report to the President of the University.

Salaries, Rewards, and Allowances

- The salaries and increments scales attached to these regulations are applied to staff members, lecturers and demonstrators.
- A monthly reward of 3,000 (Three thousand) Riyals is paid to the Deputy President of the University.
- A monthly reward of 1,000 (One thousand) Riyals is paid to the Dean, and his/her equivalent, up to a maximum amount of 10,000 (Ten thousand) Riyals annually. A monthly reward of 800 (Eight hundred) Riyals is paid to the Deputy Dean, up to a maximum amount of 8,000 (Eight thousand) Riyals annually. A monthly reward of 500 (Five hundred) Riyals is paid to the Head of a department or a director of academic center, up to a maximum amount of 5,000 (Five thousand) Riyals annually.
- An annual reward of 10,000 (Ten thousand) Riyals is paid to the Secretary of the Scientific Council, if he/she is a staff member of the university. Otherwise, he/she will be treated according to the Civil Service regulations.
- The reward for staff members, and their equivalent, from inside the university, who are assigned by the university to prepare and teach outside-the-curriculum teaching units, is determined as follows:

- Professor: 300 (Three hundred) Riyals
 - Associate Professor: 250 (Two hundred fifty) Riyals
 - Assistant Professor: 200 (Two hundred) Riyals
 - Lecturer and Language Teacher: 150 (One hundred fifty) Riyals
 - Demonstrator: 100 (One hundred) Riyals
- Deputy Presidents, deans, deputy deans, directors of academic centers, and heads of departments and staff members are entitled to receive compensation if assigned to execute summer duties during the time of their summer vacation. The summer compensation should be equal to the duration of assignment and should not exceed the amount of two-month basic salary.
- The compensation for participating in a university standing committee is 200 (Two hundred) Riyals for each session held during working hours, and 300 (Three hundred) Riyals for each session held after working hours. The maximum amount of compensation should not exceed 6,000 (Six thousand) Riyals per year. The description of standing committees is as follows:
 - a. To be set according to the Rules and Regulations of the Council of Higher Education and Universities.
 - b. Should not be of a work nature and responsibilities of only one person.
 - c. Should be permanent.
 - d. Its work should be at the university level.
 - e. Some of its members should be staff members or high ranked faculty who might not be treated according to overtime rewards.
- The members of scientific committees and the members of the committees organizing scientific conferences and symposiums held by the university, are treated the same as the members of standing committees.
 - If the teaching units for staff members, and their equivalent, increase to more than the approved load, they might receive an allowance of 150 (One hundred fifty) Riyals for each additional teaching unit with a decision from the College Faculty Board.
 - Staff members, lecturers and demonstrators, who specialize in the field of computer science and work in the same field of specialty, are eligible for a reward, determined by the University Council not exceeding 25% of the minimum salary of their rank.
 - Staff members, lecturers and demonstrators, who specialize in the field of pharmacy and work in the same field of specialty, are eligible for full-time allowance and overtime of 50% of the minimum salary of their rank.
 - Staff members, lecturers and demonstrators, who specialize in the field of medicine and work in the same field of specialty, are eligible for full-time allowance and overtime of 70% of the minimum salary of their rank. As for staff members, lecturers and demonstrators, who specialize in the field of veterinary medicine and work in the same field of specialty, are eligible for full-time allowance and overtime of 25% of the minimum salary of their rank.
 - Staff members, lecturers and demonstrators, who are not specialized in the field of medicine, but they work in the same field of clinical specialty in hospitals, are eligible for full time allowance and overtime of 20% of the minimum salary of their rank.

Summer Holidays

- Summer vacations for staff members, lecturers, demonstrators and language teachers are considered the annual holidays. The University Council determines the return time for staff members. Summer vacations start after finishing examinations and announcing the results.
- The President of the University might assign a staff member, a lecturer, a demonstrator and a language teacher to execute summer duties during the time of their summer vacations, and they are entitled to receive a compensation equal to the duration of the assignment with an additional salary equal to his/her salary in this period. The duration of assignment should not exceed a period of sixty days a year.
- Based on work necessities, the President of the University may agree to delay the annual holidays of a staff member, and his/her equivalent, or a part of it.
- Other holidays are granted according to the Civil Service regulations and executive rules.
- By a decision from the President of the University and for logical reasons, a staff member, and his/her equivalent, is granted an exceptional leave without pay for a period not more than six month and within three years.

Sabbatical leave

By a decision from the University Council, based on the recommendations of the Faculty Boards of the Department and College concerned, and the Scientific Council, a staff member is granted sabbatical leave for one year after serving the university for a minimum period of five years, or five years from his/her last sabbatical leave. He/she is granted sabbatical leave for one semester after serving the university for a minimum period of three years, or three years from his/her last sabbatical leave, provided that does not affect the progress of the educational process. The duration of secondment is not regarded as a part of the required duration.

Based on the suggestion of the Scientific Council, the University Council makes the rules governing sabbatical leave.

The sabbatical leave is conditioned by the following:

- The sabbatical leave is not granted to more than one staff member or 10% of staff members within a department, in one year.
- The applicant should prepare a complete proposal that states clearly the academic program he/she is planning to achieve during the sabbatical leave.
 1. The sabbatical leave benefits include the following:
 2. Full monthly salary and the regular transportation allowance for the full duration.
 3. Return air tickets for the staff member and his/her spouse, sons below 18 years old and the unmarried daughters.
 4. The book allowance paid for the university postgraduate scholarship students.
 5. Scientific research expenses, estimated for each case separately by the Scientific Council decision.
 6. Medical allowance for staff members spending their sabbatical leave outside the Kingdom. An allowance of 5,000 (Five thousand) Riyals is granted to a staff member on his/her own, an allowance of 10,000 (Ten thousand) Riyals is granted to a staff member with his/her family and half of the two amounts is granted to those whose sabbatical leave is for one semester.

7. Full time allowance for doctors' staff members for working full time and not less than three hours a day as additional hours including Thursdays. They are granted an allowance of not less than 3,000 (Three thousand) Riyals, if the sabbatical leave is in government hospitals inside the Kingdom.

Delegation and secondment are not allowed for a staff member who is on sabbatical leave. He/she is also not allowed to engage himself/herself with another work or consultation.

A staff member should execute the academic program he/she planned to achieve during the sabbatical leave as approved by the University Council. A sabbatical leave detailed report must be submitted to the appropriate Department Board no later than the end of the semester next to the end of the leave. Attached to the report copies of associated scientific activities conducted at the host institution in preparation to be presented to the College Board and then to the Scientific Board.

Consultation

Staff members are allowed to provide consultations with government and private sectors as well as national, regional and international organizations located in the Kingdom, according to the following:

1. He/she should be a consultant in the area of specialization.
2. A consultant should not hold more than one consulting job at a time.
3. The maximum duration of consultation is one renewable year.
4. The consultation request should be submitted, from the authorized Minister for Government Institutions, or from the Director of private sector institutions and regional or international organizations to the Minister of Higher Education.
5. The agreement on the consultation and renewal will be by a letter from the Minister of Higher Education based on the recommendation of the Faculty Board of the Department and College and approved by the President of the University.
6. The consultant must submit an annual report to the Minister of Higher Education at the end of the consultation period about his/her achievements. The President of the University should be provided with copies of those reports.
7. The work performance of the staff members must not be affected by the part-time consultation, especially in the following aspects:
 - a. The teaching workload of the staff members.
 - b. His/her availability in the office during office hours, and in clinics, laboratories or computer centers as work required.
 - c. Participation in Boards and committees which the University considers the need for his/her participation in them.

Conferences, Symposia, and Seminars attendees

Staff members might participate in conferences and symposiums held both inside the Kingdom and abroad, on the following basis:

1. There should be a relationship between the topics of the conference or the symposium and the specialty of the staff member or the responsibilities of his/her work.
2. The participation in conferences or symposiums inside the Kingdom should be based on the recommendation of the Department and College Faculty Boards and approved by the President of the University.

3. The participation in conferences or symposiums outside the Kingdom should be by the approval the Chairman of the University Board based on the recommendation of the Department and College Boards and supported by the President of the University.
4. Based on the recommendation of the Scientific Board, the University Board develops the executive rules governing the attendance of conferences and symposiums.
5. A participant in a conference or a symposium should present a report about that to the university.

The university might grant both round-trip tickets and a delegation allowance to a participant in a conference or a symposium, or round-trip tickets only, or it might be limited to permission to attend without any financial obligation.

Delegation and Secondment

- A staff member, and his/her equivalent, is entitled to delegation to work in governmental institutions. The secondment is secured by a decision from the University Board upon recommendations of the Faculty Board of the Department and College concerned. The University pays his/her salary and transport allowance, unless agreed otherwise.
- A staff member, and his/her equivalent, is entitled to secondment to work in governmental institutions. The secondment is secured by a decision from the University Board upon the recommendations of the Faculty Board of the concerned Department and College. The University Board might cancel the secondment before the end of its duration.
- Staff members' secondment is conditioned by the following:
- Serving at the university for a minimum period of three years. The University Board might, in necessity cases, make exceptions to this condition. Only one staff member or 10% of the staff members within a department might be seconded in one year. Before he/she is eligible for a new secondment, a staff member should serve the university for at least the same duration of his/her last secondment. Provided that the secondment does not affect the progress of the educational process, throughout the duration of secondment. Any other conditions considered by the University Board.
 - The secondment might be to the following institutions:
 - Universities and University Colleges inside the Kingdom and abroad.
 - Ministries and governmental institutions.
 - Public and private institutions.
 - Governments and national and international institutions.
- The duration of secondment is one year, renewable, once or more, on an annual basis for like period. The duration of secondment should not exceed a period of five continuous years. However, the University Board might make exceptions to this condition to a maximum period of two years. The total periods of secondment should not exceed a period of ten years during the staff member's duration of service at the university or any other university.
- The host institution must assume the secondee's salary, allowances and rewards from the date he/she starts working for it. Concerning seniority and benefits, the seconded staff member is treated as if he/she is in the parent university and should be subject to retirement deducts and evaluation of secondment duration for promotion purposes, according to Article 24 of these regulations.

- The secondment approval decision might include the assignment of the secondee to participate in some academic tasks such as teaching, academic supervision, training, etc. provided that the university will not assume any expenses consequently.

Academic Communication

- By a decision from the University Board based on the recommendations of the Scientific Board and the Faculty Board of the concerned Department and College, a staff member might be delegated for a mission outside the headquarters of the University for a period not exceeding 4 months. If necessary, the Board is allowed to extend the period to one year, and the delegated is treated as a secondee if the period does not exceed one month. If the period exceeds one month, he/she is treated as an employee sent for training abroad.
- Considering the applied instructions, and by a decision from the University Board based on the recommendations of the Faculty Board of the Department and College concerned, a staff member might be delegated to teach abroad. He/she is treated as delegated officially to work abroad, provided that the duration of delegation should not exceed four years.

By a decision from the University Board based on the recommendations of the Scientific Board and the Faculty Board of the concerned Department and College, a staff member might be allowed to travel to conduct research in another university during the summer holidays according to the following:

- The staff members should present a travel request, including supporting documents.
- He/she should submit a report after his/her return to the Departmental Faculty Board concerned regarding the research achievements, which is then presented to the Scientific Board.
- He/she is granted air tickets.

Transfer

- A staff member, and his/her equivalent, might be transferred, within the field of specialization, from one department to another within the same College by a decision of the President of the University based on the recommendations of the Scientific Board, the Faculty Boards of the College and the two concerned Departments.
- A staff member, and his/her equivalent, might be transferred from one College to another within the same university by a decision of the President of the University based on the recommendations of the Scientific Board, the Faculty Boards of the Department and College transferred from and those of the Department and College transferred to.
- By a decision from the University Board based on the recommendations of the Scientific Board and the Faculty Boards of the Department and College concerned, a staff member, and his/her equivalent, might be transferred to a job outside the university.

Discipline

- A disciplinary committee for staff members, and their equivalent, is formed by a decision from the President of the University, as follows:
 - One Deputy President, as chairman.
 - A Dean other than the one that investigates, as a member.
 - A staff member with a rank not less than Professor, as a member.
 - One of the specialists in Shari'ah or regulations, as a member.

- Taking into account the regulations of staff discipline, one of the Deans, appointed by the President of the University, investigates a staff member directly, if he/she fails to perform his/her duties. The Dean reports to the President of the University the results of the investigation that transfers the investigated member to the disciplinary committee, if necessary.
- The President of the University may suspend the work of a staff member, and his/her equivalent, for investigation, if necessary. The suspension period must not be more than 3 months, unless with a decision from the disciplinary committee.
- Suspension period or periods might be extended once or more, based on the investigation circumstances. However, the suspension period should not be more than one year each time.
- The suspended staff receives 50% of his/her basic salary. If he/she is innocent or penalized by other than termination, he/she receives the rest of his/her salary. If he/she is penalized by termination, he/she will not need to pay back what he received, unless the disciplinary body decides otherwise.
- The President of the University notifies the staff member, and his/her equivalent, who is referred to the disciplinary committee, with the accusations and a copy of the investigation report by a registered letter at least 15 days before the trial session date.
- The staff member, and his/her equivalent, which is referred to a disciplinary committee might see the investigations carried out in the days chosen by the President of the University.
- The disciplinary committee reviews the referred case as follows:
 1. The secretarial tasks of the committee are carried out by an employee selected by its chairman.
 2. The committee holds its meetings by invitation from the chairman. The investigated staff member is notified in writing by a registered letter to be present before the committee to listen to his/her statements and defense.
 3. The committee holds meetings in the presence of the staff member investigated or his representative. If he/she or his/her representative did not attend the meeting the committee reviews the case and completes the investigation steps confidentially. The committee may listen to witnesses, when necessary.
 4. The disciplinary committee decides by a majority of vote, and its meetings will not be valid unless all of the members attend the meeting. The committee presents its decisions to the President of the University, attached with the case file, within not more than two months from the referral date. If the President of the University does not approve the committee's decision, the decision will be returned to the committee. If the committee insists on its decision, the matter will be raised to the University Board which gives the final decision.
 5. The President of the University notifies the investigated staff member, and his/her equivalent, with the committee's decision, once it is issued, in writing by a registered letter.
 6. The staff member, and his/her equivalent, may contest the decision by a letter presented to the President of the University within 30 days from the date of being notified of the committee's decision, unless the decision is final. If the contest is received before the due date, the President of the University returns the case to the disciplinary committee for a new review. If the committee insists on its decision, the matter will be raised to the University Board, which gives the final decision.

- Taking into account the rules of Article 32 of staff discipline regulations, the disciplinary penalty to be inflicted on staff members, and their equivalent, are:
 1. Warning.
 2. Blaming.
 3. Salary deduction of no more than the basic salary of three months and the monthly deduction should not exceed third of the basic salary.
 4. Prevention from one periodical increment.
 5. Postpone promotion for one year.
 6. Exclusion from academic work, and, assigning to another work for a maximum period of five years. The exclusion period is not included in the duration counted for promotion.
 7. Termination.
- No impact of the disciplinary proceeding on other legal proceedings arising from the same incident.
- The President of the University might warn the staff member, and his/her equivalent, which breaches his/her duties orally, or, in writing. He might inflict both penalties of warning and blaming on the staff member after investigation and listening and writing his/her statements and defense. The decision of President of the University in this case is reasoned and final.
- Based on the information from the heads of departments, or, on their own observations, the Deans should notify the President of the University of Staff Members, and their equivalent, who are in breach of required duties or any other violations.

End of Employment

- The service of staff members is terminated based on any of the following reasons:
 - Resignation.
 - Apply for retirement before reaching the approved age according to the retirement regulations.
 - Job cancellation.
 - Health disability.
 - Absence without excuse or refusal to implement a transfer decision.
 - Termination on disciplinary grounds.
 - Termination by a Royal Decree, or a Decision from the Board of Ministers.
- The staff member, and his/her equivalent, is referred to retirement by a decision from the President of the University, if he/she completed 60 Hijri years. The President of the University might extend the employment of a 60-year-old staff during the academic year to the end of that same year. Based on the recommendation the President of the University, the University Board might extend the employment of a 60-year-old staff for one period or periods until the age of 65.
- If a staff member, and his/her equivalent, failed to do his/her duties due to illness, the President of the University reports that to the University Board, in order to consider the termination of his/her employment.
- The University Board, based on the recommendations of the Faculty Boards of the concerned Department and College and the Scientific Board, might consider accepting the resignation of a staff member, and his/her equivalent, or referring them to early retirement upon their own request.

Rule & Regulation for Casual staff members

- The University might use part-time staff members from previous faculty or distinguished scholars, who have long experience in the field of specialty they will teach. They should not be assigned to any administrative work.
- The use of part-time staff members should not be for more than two years, subject to renewal by a decision from the President of the University based on the approval of the University Board and the recommendations of the Scientific Board and the Faculty Boards of the concerned Department and College.
- Part-time staff members receive a reward equal to the minimum salary of the academic rank they used to have. If they are not previous staff members, the University Board determines the reward, which should not exceed the minimum salary of the rank of Assistant Professor, based on the recommendations of the Scientific Board and the Faculty Boards of the Department and College concerned.
- Taking into consideration the rules of Article 96 of these regulations, part-time staff members have to adhere to the duties of full-time staff members stipulated in these regulations. Concerning teaching extra units, they are treated according to the rules of Article 51 of these regulations.
- If a part-time staff member breaches any of his/her work duties, the rules of staff discipline stipulated in these regulations are applied to them.

Regulations Governing encouragement of Qualified Saudis to teach at the University Colleges & institutes.

Non-staff members who are hired to take credit teaching units included in the study plans, are paid a reward for each teaching unit according to the following:

1. Ministers, Deputy Ministers and those occupying high ranks 1,000 Riyals
2. Staff members from other universities:
 - a. Professors 400 Riyals
 - b. Associate Professors 350 Riyals
 - c. Assistant Professors 300 Riyals
3. Those included in employment scale ranks:
 - a. Ranks 14 & 15 400 Riyals
 - b. Rank 13 350 Riyals
 - c. Rank 12 300 Riyals
 - d. Ranks 9, 10, 11 250 Riyals
4. Those included in educational job scale:
 - a. 6th level 250 Riyals
 - b. 5th level 200 Riyals
 - c. 4th level 150 Riyals
5. Retired Individuals: According to their academic degrees, job ranks and military ranks before retirement.
6. Non-employees: other than those mentioned in the above Items, qualified Saudis might be hired to teach at the University Colleges, institutes and centers by the approval of the University Board based on the recommendations of the Faculty Boards of the concerned Department and College. Their rewards should not exceed the minimum salary of the rank of Assistant Professor.
7. If staff members, and other personnel, are hired from outside the university or from outside the headquarters of its branches, in addition to the rewards mentioned in Article 101 of these regulations, they are eligible for a return ticket and a delegation allowance stipulated for his/her

equivalent, or the university should assume his/her housing, transportation and living expenses during his/her stay.

Recruitment of Non-Saudi Faculty Policy and Procedure

 <p style="text-align: center;">جامعة الإمام عبد الرحمن بن فيصل IMAM ABDULRAHMAN BIN FAISAL UNIVERSITY كلية الصيدلة College of Pharmacy</p>	
Policy Title:	Recruitment of Non-Saudi Faculty Policy and Procedure
Policy Code:	COP-AD-003
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Next Review Data:	January 2028
Approved by:	College Council
Responsible Office:	Vice Deanship of Development and Community Partnership

Purpose

To issue rules and regulations that govern the contractual terms of non-Saudis employed at the university, in relation to their salary, compensation, and allowances, on the basis of directives issued by the Ministry of Education, the Ministry of National Economics, and the Ministry of Civil Service.

Definitions

- Contract Employee – is a non-Saudi person working for the university under a contract.
- Country of Origin – the country whose nationality the contract employee holds. The country where he/she resides at the time of contracting, if residence duration exceeds two continuous years.
- Year – twelve Hijri months, unless otherwise specified.
- Month – 30 days, unless otherwise specified.
- Personal Contract – non-transferable, i.e. a contract employee cannot be transferred from his /her university to another employer.

Policies

Recruitment requirements

Recruitment of non-Saudi employee was based on the rules and regulation stipulated on the commission of higher education, Article 4, 5, 6, & 7

- Recruitment is determined by:
 1. The availability of a job vacancy approved in the budget or availability of funds earmarked specifically for the purpose of recruitment as provided for in chapter on salaries.
 2. Unavailability of a Saudi national to occupy the job.
 3. A clear statement of the job description, job responsibilities and minimum qualifications.
- A contract employee should:
 1. Be at least 20 but less than 60 years old. Hiring shall be based on the recommendations of the College Faculty Board and the University Board. However, the maximum age limit may be bypassed by ten years for professors and associate professors, by five years for assistant professors, and by three years for other categories.
 2. Be healthy and eligible for work as attested to by a current health certificate issued by a medical body recognized by the university.
 3. Be of good conduct and behavior.
 4. Have the qualifications required for the job.
 5. Not having a contract with another institution in the Kingdom.
 6. Work for the university as a full-timer.
- The duration of this contract may be less than one year, one year, or more than one year, renewable for a similar duration or for a duration determined by the university.
- This contract is effective from the day the contract employee leaves his/her country of origin heading to his/her place of work in the Kingdom by the shortest route within a period of time, not exceeding three days from departure to starting work. Or the effective contract date may be the day the contract employee starts work if he/she is already a resident of the Kingdom.

Salaries and Allowances

Salaries and allowances policies and procedures were adopted on Article 8,9,10,11,12,13, & 14 from the Commission of higher Education.

Article 8

- Salaries are determined according to the Tables in Appendix 1 enclosed with these rules and regulations. The University has the right to pay a contract salary less than that shown in the table if the two parties agree on it.
- If a staff member is promoted by another institution and the University approves that promotion, he/she will be eligible to the starting salary of the new rank at contract renewal. He/she should be given the higher of the two salaries and the increment of the new rank. This is also applicable to those promoted by the University.
- A non-faculty member contractee can be promoted to a higher rank within the same category at contract renewal, if he/she fulfills the requirements.
- If the contractee reaches the maximum salary of his/her rank, the University Board may grant him/her the increment of that rank each two years, based on the recommendation of the head of department.

Article 9

1. The University Board may increase the salary shown in the table by 50% for those contracted with from Europe, America or any other developed countries determined by the Board.
2. The University Board may contract with faculty members, doctors, etc. with rare specialties, academically reputed, experienced, and highly skilled, highly qualified from famous Universities and grant them salary increment not exceeding 100% of the salary earned. With the agreement with the Ministry of Civil Service, the University Board may apply these rules to other categories.
3. On the basis of the recommendation of the Scientific Board, the University Board may bypass the scientific conditions determined by the rules of recruitment to contract with experienced faculty and staff members with distinguished scientific reputation.

Article 10

1. A faculty member, who has teaching experience at University level after getting his/her degree or title, is entitled to receive annual increments according to the tables in Appendix 1.
2. Faculty members' non-teaching experiences in the same field of specialty after getting their degrees or titles can be counted as two years for one year for recruitment. They can also be counted for scientific promotion by the Scientific Board decision based on the recommendation of the College Faculty Board concerned.
3. The experience for non-faculty members is counted after getting the last degree, and a course in specialty after getting the last degree is counted as similar to its duration. The experience and the course duration should not be taken in at the same time. The degree and the experience should be awarded by an institution recognized by the University.

Article 11

A maximum of five years' experience is counted for the categories mentioned in Article 1 of these Rules and Regulations at the beginning of the contract. The University Board, however, in exceptional cases, may bypass this condition by a maximum of 15 years.

Article 12

A contractee, who holds a higher degree related to the nature of his/her work, is entitled to receive annual increments as similar to the duration of study for the higher degree, not more than two increments for

the period between BA/BSc and MA/MSc, three increments for the period between MA/MSc and PhD, and, five increments for the period between BA/BSc and PhD according to the tables in Appendix 1.

Article 13

A contractee is entitled to receive an annual increment of not more than 5% of his/her salary, not exceeding the salary limit determined for each category in the salary tables. Those who complete ten and a half months are considered as completing a full year for this purpose for those whose contracts duration is related to the academic year.

Article 14

It is illegal to restrain the contractee's salary except with an order from the legally authorized body. The president of the University has the right to deduct any amounts due to the Government. Except for the Finance Department, the amount deducted monthly should not exceed one third of the salary. When there is a conflict, the priority is given to the Finance department then to the amounts due to the Government.

Required Working Hours

- Staff members, lecturers, demonstrators, and language teachers' work for 40 hours per week spent in teaching, research, academic counseling and other academic and administrative activities assigned by the authorized bodies in the university.
- Other university faculty work for 48 hours per week, spent in teaching, research, and training duties and other tasks assigned by the authorized bodies in the university. The working hours for those who work in hospitals should not exceed 55 hours per week. The university, however, has the right to determine the beginning and the end of working hours, or divide them according to work requirements.
- Contract employees are treated the same as Saudi staff members in regard to the teaching load and the compensation rules for additional hours.

Allowances and Compensations

Article 16

1. The University Board is entitled to pay a maximum amount of 30% of the first basic salary for faculty members holding rare specialties and working in their fields. The Board determines these specialties and the amount of the allowance to be given to each. This allowance should not be given together with any of those mentioned in Items 1 & 2 in Article 9.
2. The University Board is entitled to pay a maximum amount of 80% of the basic salary to doctors, dentists, staff members, lecturers, demonstrators and research assistants who work in hospitals as an allowance for additional hours. This allowance should not be given together with the rarity allowance mentioned in Item 1 above.
3. Pharmacists and staff members, lecturers, demonstrators and research assistants specialized in applied medical sciences and who work in hospitals are entitled to a maximum allowance of 50% of the basic salary for additional hours. This allowance should not be given together with the rarity allowance mentioned in Item 1 above.

Article 17

The university provides air tickets to the expatriate faculty member and his/her family when brought for residence. The maximum number of tickets must not exceed four including his/her own ticket. The family members are entitled to their tickets whether they travel with the contract employee or alone, according to the following:

1. Once when he/she travels from his/her country of origin at the start of contract, if he/she is not a resident in the Kingdom during contracting.
2. Round-trip air tickets from the Kingdom to his/her country of origin every year at the time of his/her annual vacation. Similar to that of a contract employee recruited from within the Kingdom whose contract completed two years, and if he/she is not a resident in the Kingdom during contracting.
3. One-way tickets will also be provided to the expatriate faculty member and their dependents for final repatriation upon completion of the employment contract or termination of service. This excludes contract employees who were residents of the Kingdom at the time of contracting and did not complete two years of service, or those who transferred their Iqama to another institution within the Kingdom in accordance with applicable regulations.

Article 18

The contract employee's family members are:

1. The wife, the husband, or a chaperon.
2. His/her direct dependents:
 - Sons are less than 18 years of age
 - Unmarried daughters
 - Parents
 - Brothers are less than 18 years of age
 - Unmarried sisters

Their being brought to the Kingdom is subject to the approval of the concerned authorities according to the prevailing regulations.

Article 19

1. If any female contract employee works for the university and her chaperon works for another government institution, the tickets are issued by the same institution paying the housing allowance.
2. The attendant is not entitled to a back ticket if his/her Iqama is transferred to a non-government institution.

Article 20

The university provides air tickets to the contract employee by the most direct routing through Saudi Arabian Airlines (SAUDIA), if its services are available. It may, in exceptional cases, pay him/her in cash to buy the tickets. A contract employee gets compensation of half the price of the tickets, if he/she does not use them.

Article 21

1. The air tickets are issued for a Business Class if the contract employee's rank is a professor, and for an Economy Class for other ranks.
2. The contract employee is entitled to change the route of his/her tickets according to the regulations of Saudi Arabian Airlines (SAUDIA), with no liability placed on the university.

Article 22

If the contract employee splits his/her annual vacation according to Article 33 (clause 4.5.2), tickets are issued for the last part of it. If the vacation is split by the university, two tickets are issued only for him/her.

Article 23

According to work requirements, a contract employee's inside or outside travel should be by air on Economic Class through Saudi Arabian Airlines (SAUDIA) whenever possible. The university may permit the contract employee to travel by land at his/her own expenses, if that does not affect his/her arrival to the workplace on time, and he/she is eligible for compensation of the full price of air tickets on Economic Class, if that is possible. If he/she has to travel to a destination not connected to his/her place of work with air travel facilities, the university should provide a means of land travel or permit him/her to travel at his/her own expenses, and he/she is eligible for compensation of full price of traveling by land through public transport.

Article 24

The university provides on-campus housing for a contract employee or pays him/her an annual housing allowance according to salary tables in Appendix 1. This allowance can be paid in advance at the beginning of the duration of the contract, and at the beginning of each new contracting year. Those who do not complete a full year are paid a housing allowance corresponding to the duration of their contract. When contracting a female and her chaperon, only the largest housing allowance is paid. This rule is also applicable if one of them works for another government or non-government institution. A female contract employee who is married to a Saudi national living in the Kingdom is not entitled to a housing allowance.

Article 25

1. If the university does not provide furnished housing to the new contract employee, he/she is eligible for furniture allowance of 50% of the annual housing allowance, paid only once within the duration of the first contract. A contract employee who completed at least two years since he/she left work with another government institution inside the Kingdom and signed a new contract with the university and was not paid that allowance is considered a new contract employee.
2. When contracting with a female and her chaperon, only the largest allowable furniture allowance is paid.
3. The chaperoned contract employee is not entitled to furniture allowance, if the chaperon works for the university or any other institution inside the Kingdom.
4. If the contract employee has been chaperoned for someone who worked for another institution inside the Kingdom before contracting with the university, he/she is not eligible for furniture allowance unless he/she spent a duration not less than two years since he/she left the Kingdom and he/she was not paid that allowance by the previous institution.
5. If the contract is for less than one full year, the furniture allowance is paid in proportion to the duration of the contract. The rest is paid when the contract is renewed for another duration of not less than one year.

Article 26

The contract employee is entitled to receive a fixed monthly transportation allowance against local transportation expenses. This benefit is considered on the basis of his/her academic rank as shown in the salary tables. Instead of paying this allowance, the university may provide the contract employee with a suitable means of transportation. Those who live in the place of work or are attached to it are not entitled to this allowance.

Article 27

1. The contract employee is entitled to receive a daily secondment allowance if he/she is delegated on an official task outside his/her place of work as follows:

- 450 Riyals for a salary of 7,000 Riyals or more.
 - 300 Riyals for a salary of 4,500 and less than 7,000 Riyals.
 - 255 Riyals for a salary of 2,700 and less than 4,500 Riyals.
 - 160 Riyals for a salary of less than 2,700 Riyals.
2. The secondment allowance is increased 50% if the secondment is outside the Kingdom, and an additional transportation allowance of 1/30 of the determined monthly transportation allowance is paid.

Article 28

If a faculty member contract employee is transferred from one city to another inside the Kingdom, he/she is eligible for a freight allowance of SAR 4,000. If the transfer is from inside to outside the Kingdom, or vice versa, or from one place to another outside the Kingdom, a freight allowance of SAR 5,000 is paid. Other faculty members are eligible for a freight allowance of SAR 3,000 in both cases. This freight allowance is paid for only once during a financial year together with traveling tickets according to the Articles 17 – 22. If two contract employees are transferred, and one of them is an attendant chaperon for the other, only the largest allowable freight allowance is paid.

Article 29

1. A contract employee (staff member, lecturer, demonstrator, technician or other staff related to teaching) receives end-of-service benefit (termination benefit) equivalent to a half month of basic salary for each full year of service upon completion of two full years of service with the university. [A duration of 22 months is considered two full years.] However, upon completion of five years of service consecutively, he/she is entitled to a termination or end-of-service benefit equivalent to one month of his/her basic salary for each year of service based on his/her basic salary at the time he/she leaves the university. (A duration of 58 months is considered five full years). The accumulated amount of termination benefit, not exceeding SR 100,000, is payable at final termination of the contract. The end-of-service benefit (termination benefit) is paid only for full years and continuous duration of service. Other faculty members receive an end-of-service benefit (termination benefit) equivalent to a half month of basic salary with accumulated amount not exceeding SR 50,000.
2. Based on the recommendation of the College Faculty Board or the authorized body, and the agreement of the University Board and the Higher Education Board, the end-of-service benefit (termination benefit) can be increased up to 100%; however, this cannot in any case exceed the accumulated amounts mentioned in this article.

Article 30

During contracts periods, the contract employees and their families benefit from the general medical services available in the Kingdom. The University Board, however, may decide otherwise, if necessary.

Article 31

The university provides a contract employee faculty member with tuition fees for education from primary school to completion of secondary school, not including transportation fees, according to the following conditions:

1. Impossibility of being accepted in government schools.
2. The authorized dependent children should be of school age (defined as six through eighteen years).
3. Should attend schools inside the Kingdom.

4. Tuition fees are paid for up to a maximum of four authorized dependent children, and the total amount for an eligible contract employee must not exceed a maximum of SAR 25,000 per year. The University Board determines the amount to be paid for each student.

Holidays

Article 32

In addition to weekends and the two Eids, the contract employee is eligible for an annual holiday for 60 days (for faculty members) and 45 days (for other staff members), with full salary paid at the beginning of the holidays. They are due for a part of a year accordingly. A contract employee is eligible for a full annual holiday, if his/her contract started within a month from the date of the beginning of the contracts in the university. The University Board changes the period of holidays according to the academic calendar. If the two parties agree in writing, the duration of the holidays can be less than what is determined. The university has the right to determine the beginning and end of holidays. They are not due for the duration of secondment, exceptional leave or absence.

Article 33

Based on the contract employee's request and the recommendation of his/her place of work and the approval of the president of the university, the annual holidays may be split into two parts, if necessary. The duration of any of these two parts should not be less than one third of the holidays. The contract employee should use one part during the same year in which the holidays are due.

Article 34

1. According to work necessities, or, at the contract employee's request, the president of the university may delay the annual holidays or a part of it for a period not more than six months from the new contracting year.
2. According to work necessities, the president of the university may change the time of the contract employee's weekends.
3. The president of the university may cancel the contract employee's annual leaves or a part of it. He/she should be compensated for this cancellation in a manner similar to when his/her salary in the year when the holiday is due. On the other hand, he/she is not entitled to get his/her own ticket. The cancellation of the annual holidays should be with the consent of the contract employee, except in case of extreme necessity.
4. The president of the university may cancel the two Eid leaves or a part of them according to work necessities. The cancellation of the annual holidays should be with the consent of the contract employee, except in case of extreme necessity. He/she should be compensated for this cancellation in terms equivalent to its duration, either in cash payment or days off.

Article 35

The contract employee is eligible for paid emergency leave for up to 10 days a year. This leave is deducted from his/her annual holidays and he/she is not entitled to get tickets for it.

Article 36

In circumstances considered by the university, the contract employee faculty member may be granted leave without pay for a period not more than a semester. He/she is not entitled to any privileges mentioned in the contract, because the service is considered discontinuous.

Article 37

A contract employee faculty member is eligible for temporary sick leave for one fully paid month. If necessary, the leave may be extended for two additional months at half salary. However, sick leave benefits are not applicable if a contract employee faculty member falls sick outside the Kingdom. If the illness is caused by the work, he/she is entitled to double temporary sick leave mentioned above. Regulations that are applied to Saudi employees are also applied to non-Saudi contract employees to prove the illness and determine the duration of the temporary sick leave.

Article 38

A female contract employee faculty member is eligible for maternity leave for 45 days and a husband's death leave for 130 days for Muslims, and for one month for non-Muslims.

Article 39

A contract employee faculty member is eligible for more than one of the due leave periods during one year when there are good reasons to use them.

Secondment and Transfer

Article 40

The University Board may second the contract employee for a period not more than six months, according to rules developed by the Board. His/her financial merits are paid by the institution to where he/she is seconded. He/she is not entitled to an end of service allowance, because the service is considered discontinuous.

Article 41

The university may transfer the contract employee from outside the university or to another job inside the university, on the following conditions:

1. Unavailability of a Saudi national to occupy the job.
2. The contract employee fulfills the job requirements.
3. The contract employee and his/her previous place of work agree to the transfer. If the transfer was completed before the end of the contract, he/she would be treated according to the ongoing contract. Then his/her situation is changed at the end of the contract or at beginning of the nearest contracting year if its duration is more than one year.

Article 42

If the contract employee is transferred to the university from a governmental institution, he/she will be treated according to the following:

1. His/her contract is considered continuous as regards holidays and end of service benefits. The duration of the service is considered experience for faculty members and their equivalent as mentioned in Article 10 (clause 4.2.5).
2. As for the end of service allowance for the previous service, he/she is treated according to the contract with the previous place of work. Thereafter, he/she is treated according to these rules and regulations for his/her service to the university.

Duties and Responsibilities

Article 43

In performing his/her duties and responsibilities, the contract employee is subject to the rules and regulations of the Civil Service, whenever applicable, for any duties and responsibilities not mentioned in the rules and regulations developed by the university.

Article 44

As for errors on the job, the contract employee is subject to the articles of these general rules and regulations, and rules pertaining to penalties as for Saudis.

Article 45

The contract employee is expected to abide by the rules and regulations effective in the Kingdom. He/she and his/her family members must respect the traditions and customs prevailing in the Kingdom and must not show prejudice against its religion or interfere in its politics.

Termination, Renewal and End of Service**Article 46**

The university may terminate the contract without no liability on its part if the contract employee does not start work within 15 days of the determined date of contracting.

Article 47

The contract is renewed automatically. Otherwise, either party should notify the other in writing of the desire to terminate the contract at least two months before the expiration date of the contract.

Article 48

The contract is terminated before its expiration date in the following cases:

1. If the contract employee gets Saudi nationality.
2. Acceptance of resignation.
3. Insisting on resignation though not accepted.
4. Unjustified absences for a continuous period of 15 days, or a discontinuous period of 30 days.
5. Cancellation of academic position.
6. Permanent sickness.
7. Job disqualification.
8. Low professional performance.
9. Disciplinary dismissal.
10. Requirements of public interest.
11. Involvement in a crime or severe rule violation; or if sentenced for an honor or honesty crime.
12. Death.
13. If sickness duration exceeds the sick leave duration mentioned in Article 37 (clause 4.5.5). In this case, the contract employee is given a one-way ticket and all allowances paid to him/her are not taken back.

Article 49

1. If the end of service is due to the reasons mentioned in Article 48 – Items 3, 4, 9 and 11 (clauses 4.8.3.3, 4.8.3.4, 4.8.3.9 and 4.8.3.11), the following procedures will result:
 - a. He/she is not entitled to back tickets for himself/herself and family, end-of-service benefit, holidays or compensation for holidays. In exceptional cases, however, the president of the university may agree to give him/her back tickets.
 - b. The housing allowance is taken back if the remaining period of contract is six months or more. The furniture allowance is also taken back if the termination of service is at least six months before the end of the first contracting year.
 - c. The contract employee should pay the university two-month salaries if his/her service ends according to Article 48 – Items 3 and 4 (clauses 4.8.3.3 and 4.8.3.4).

2. No.1–b above is applicable if the service ends according to Article 48 – Item 2.
3. If the end of service is according to the Article 48 – Item 1, he/she is not entitled to back tickets for himself/herself and family.

Article 50

The University Board may, in exceptional cases, exempt the contract employee from some or all expenses resulting from end of service or contract termination according to the items of article 48.

Article 51

1. If the service is terminated because of cancellation of the academic position or requirements of public interest, the contract employee is given compensation equal to two months' salary.
2. The contract employee is treated according to the regulations of Civil Service in cases of death, permanent sickness, or injury that completely prevents him/her from work, or a sickness or an injury that partly prevents him/her from work, on condition that, the death, sickness or injury is caused by work.

Article 52

If a contract employee dies, the university will take over the expenses of transportation of his/her body together with family members to their country of origin. If one of his/her family members dies, the university will take over the expenses of transportation of his/her body together with a return ticket for only one attendant.

Article 53

1. Taking into consideration the rules mentioned in Article 5 (clause 4.1.2), the university might contract with someone who has been working for another institution in the Kingdom and his/her termination of service is due to end of contract, resignation or job cancellation, on condition that his/her competence report for the last year was 'Very good' at least.
2. The university might not contract someone who has been working for another institution in the Kingdom in the following circumstances:
 - a. If the end of service was due to unjustified absences, except if he/she completed at least two years from the date of end of service.
 - b. If the end of service was due to job disqualification.
 - c. If the end of service was due to requirements of public interest, except if the previous sponsor agrees.
 - d. If the end of service was due to disciplinary dismissal or according to Article 48 Item 1.

General Rules

1. These regulations and their attachments are integral parts of the provisions of the recruitment contract mentioned in Article 3 (attachment 3).
2. These regulations are applicable from the date of issuance. As for ongoing contracts, they are applicable from the date of renewal.
3. Taking into account all contract employees' rights maintained by previous rules and regulations, these regulations cancel all other rules and regulations that contradict them.
4. Any unsolvable disagreement that might arise as a result of implementing the signed contract in accordance with these regulations is judged by legally qualified and concerned courts whose decision is final and binding on both parties.

5. The University Board and the president of the university may delegate some of their authorities to each other.
6. The University Board might develop executive rules that do not contradict these rules and regulations.
7. All matters, unless specifically provided in texts in these regulations, the rules and regulations of the Higher Education Board and Universities and the regulations, instructions, and decisions effective in the Kingdom, should be applied to them.
8. The Board of Higher Education has the right to interpret these regulations.

Procedure

The College procedure for recruitment

- Planning: College of Pharmacy regularly updates data on the available teaching staff, teaching loads and teacher/student ratio. A prediction plan relevant to those who will resign, retire or leave the University (for any Reason) is maintained.
- At the end of the first semester of each academic year, the college needs should be submitted to the Human Resources Department revealing the nature of teaching staff member required, specialization, sub specialization, vacant academic position, qualification, experience, sex, nationality age and any other recruitments.
- The Human Resources Department will prepare the job announcement and place it on the appropriate websites, local/international newspapers, and professional journals Advertising is also done through www.Higheredjobs.com.
- The advertisements include job title and description.
- The Recruitment section will record and maintain all of the applications received for the announced position and forward the applications to the College Search Committee Chair for review.
- The committee will begin screening the applicants, according to the basic eligibility criteria, using the Initial Screening Form.
- Selected candidates will be interviewed using the Interview Evaluation Form.
- Following interviews, the Search Committee Chair will recommend an applicant for further processing by the University's Recruitment Section.
- Each selected candidate will be asked to provide three letters of recommendation.
- The committee may choose to seek additional references to obtain additional information about the applicant.
- The Recruitment Section of the University will complete the primary source Verification (Education Record Check) of the candidate's educational degrees/ certificates.
- Upon selection of a candidate, an un-official offer letter outlining the terms and conditions and the compensation and benefits package will be forwarded to the candidate by the University's Recruitment Section.
- The Recruitment Section will notify the College Search Committee Chair regarding the candidate's response to the unofficial offer letter and specify the final salary and expected date of joining.
- In cases where the selected candidate has applied through a search firm or recruiting agents, all processing should be accomplished through these external entities, who will act as facilitators for the University and for the candidate.
- The Recruitment Section will initiate the immigration process for international candidates.
- International candidates will have their educational and family documents translated into Arabic and attested by their country's ministry of Foreign Affairs and the Saudi Cultural Attaché's office in their respective countries.

- Upon completion of documents, international candidates will be responsible for submission of their immigration application to the Saudi embassy in their respective countries, if hired independent of a recruitment firm or recruiting agent. In other cases, the immigration process should be completed for the candidate by the recruitment firm or recruiting agent.
- Upon arrival at the University, the candidate will submit all necessary documents to the Recruitment Section.

Responsibilities

The rules of these regulations are applicable to the following categories:

- Faculty members, Lecturers, Language Teachers and Demonstrators.
- Similar to faculty members are Researchers and their Assistants, Technicians holding University certificates or above, who are recruited as Researchers or Researchers' Assistants, or Technicians in Grade 6 whose work is related directly to teaching. The University Board, in exceptional cases, may bypass this condition.
- Doctors and Health Professionals.

Appendix

Table 1: Faculty members, lecturer and demonstrators

Job title	Starting salary	Annual increment	Maximum salary	Transport allowance	Housing allowance
Professor	9,100	500	13,600	600	25,000
Associate professor	7,250	450	11,300	600	25,000
Assistant professor	5,600	400	9,200	600	25,000
Lecturer	3,400	350	6,550	500	18,000
Demonstrator	2,700	300	5,400	500	14,000

Recruitment Provisions:

- 1) **Assistant Professors.** Appointed to this post are those who hold a PhD or who hold a title from any University recognized by the University concerned.
- 2) **Associate Professors.** Appointed to this post those who hold a title from any University recognized by the University concerned.
- 3) **Professors.** Appointed to this post those who hold a title from any University recognized by the University concerned.
- 4) **Lecturers.** A lecturer should hold at least a master's degree or any University degree considered by the concerned University equivalent to a Master's. Appointed on the first tier of the salary, except:
 - Lecturers in engineering, pharmacy, medical and applied sciences are appointed on the second tier of the salary.
 - Lecturers in clinical pharmacy are appointed on the third tier of the salary.
 - Lecturers in medicine and dentistry are appointed on the fourth tier of the salary.
- 5) **Demonstrators.** Demonstrators should hold a BA/BSc with a general standard of at least "Very Good". They are appointed on the first tier of the salary, except:

- Demonstrators in engineering, pharmacy and medical and applied science are appointed on the second tier of the salary.
- Demonstrators in clinical pharmacy are appointed on the third tier of the salary.
- Demonstrators in medicine and dentistry are appointed to the fourth tier of salary.

Appendix

Table 2: Researchers, Assistant Researchers and Technicians

Rank	Starting salary	Annual increment	Maximum salary	Transport allowance	Housing allowance
First	4,855	350	7,305	500	20,000
Second	3,955	300	6,955	500	15,000
Third	2,700	250	6,450	400	14,000

Recruitment Provisions:

- 1) **First Rank.** A PhD. in specialty or equivalent after a duration of three years of study after the BA/BSc.
- 2) **Second Rank.** A MA/MSc in specialty or equivalent.
- 3) **Third Rank.** A BA/BSc in specialty or equivalent with a general standard of at least "Very good". The University Board might, exceptionally, agree to the standard of "Good".

They are appointed on the first tier of the salary, except the graduates of engineering, pharmacy and medical and applied science are appointed on the second tier of the salary, the graduates of clinical pharmacy are appointed on the third tier of the salary and the graduates of medicine and dentistry are appointed on the fourth tier of the salary.

Appendix

Employment Contract for Non-Saudis

On the day /...../14..... H. corresponding to (..... /..... /20..... A. D.) This contract has been agreed upon and signed by:

A. IAU, represented by: as the first party and

B. Dr./Mr./Mrs./Miss..... of nationality as the second party.

The two parties agreed that the second party works as according to the following:

1. The first party will pay the second party a monthly salary of (.....) Saudi Riyals paid at the end of each month, in addition to fixed monthly allowances and annual increments.
2. The first party will provide the second party with free furnished accommodation or pay him/her an annual housing allowance of (.....) Saudi Riyals and a furnishing allowance of (.....) Saudi Riyals paid only once at the beginning of contracting.
3. The duration of this contract is day Month year, ending at the end of day/..... /14..... H. corresponding to (..... /..... /20..... A. D.)
This contract is automatically renewed unless one party notifies the other party in writing his/her desire to terminate the contract at least two months before the expiration date of the contract.
4. The regulations of employment of non-Saudis at the university and the changes made to them are considered a complementary part of this contract.
5. This contract is made of five copies, the first party keeps four of them and one copy is given to the second party together with a copy of the regulations of recruiting non-Saudis at the university as a reference to act according to them.
6. The regulations and contract might be translated into foreign languages, when there is a difference in translation between the Arabic version and the translated one, the Arabic version is relied on.

- Type of Contracting: Country:
- Place of Contracting: (City where the contract employee lives)
- Contract Employee's Address:

The First Party

The Second Party

Name: Name:

Signature: Signature:

Policies and Procedures for Faculty Promotion

 <p style="margin: 0;">جامعة الإمام عبد الرحمن بن فيصل IMAM ABDULRAHMAN BIN FAISAL UNIVERSITY كلية الصيدلة College of Pharmacy</p>	
Policy Title:	Policies and procedures for faculty promotion
Policy Code:	COP-AD-004
Date of Initial Approval:	May 2016
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Next Review Data:	January 2028
Approved by:	College Council
Responsible Office:	Vice Deanship of Research and innovation

Policy Statement:

Academic promotion is a critical and strategic decision undertaken by the University's academic departments, faculty boards, and the Scientific Council. Promotion decisions are governed by established institutional regulations and require the fulfillment of clearly defined criteria, including the production of high-quality, peer-reviewed scientific publications. These publications should demonstrate a meaningful contribution to advancing research excellence, innovation, and scholarly impact. Academic promotion is intended to support the continuous enhancement of the University's academic standards, foster a culture of research and innovation, and contribute to improving the University's visibility and standing in international rankings.

Purpose:

1. Increase the productivity of faculty members and their ability to lead in education and scientific research.
2. Encourage faculty members to improve their scientific research skills, and thereby positively impact their expertise and teaching competence in their fields of specialization.

Definitions:

- **Academic Promotion** – usually means a change in job title but may also refer to increments in salary and benefits.
- **Promotion** – means movement from one grade of academic employment to a higher grade. It does not refer to role changes within a single grade.
- **Faculty** – is the entire teaching force of a university, college, or school, some of whom may have administrative responsibilities as well.
- **Professor** – is a teacher and research scholar at the highest rank at a college or university.
- **Associate Professor** – is a college or university professor who ranks above an assistant professor and below a professor.
- **Assistant Professor** – it is usually below the position of associate professor.
- **Faculty Board** – is the principal decision-making body of a university faculty.
- **Departmental Board** – is the administrative body at the departmental level.

Scope:

This policy applies to all College of Pharmacy faculty members.

Policies:

1. Promotion from rank of Assistant to Associate Professor requires:
 - a. Working for 4 years in the rank of Assistant Professor in a Saudi or any other recognized university, provided the period spent in Saudi Universities is NOT less than ONE year.
 - b. Attaining the minimum required scientific product according to Policy 11 of these bylaws.
 - c. The scientific product of the applicant must have been published or accepted for publication during his work as Assistant Professor.

2. Promotion from the rank of Associate to Full Professor requires:
 - a. Working for 4 years in the rank of Associate Professor in a Saudi or any other recognized University provided the period spent in Saudi Universities is NOT less than ONE year.
 - b. Attaining the minimum required scientific product according to Policy 12 of these bylaws.
 - c. The scientific product of the applicant must have been published or accepted for publication during his work as Associate Professor.

Notes: In addition to the above Policies 1 & 2, the following should be considered:

- The applicant for promotion to Associate or Full Professor must have spent at least one year in the affiliated department in the IAU.
 - The duration that is spent by the applicant at the rank of Assistant or Associate Professor is calculated from the date of approval of promotion by the Scientific Board.
 - The scientific product submitted for promotion must be in the field of specialization of the applicant. The Scientific Board may accept not more than one unit of published or accepted multidisciplinary work undertaken by the applicant.
 - The submitted scientific product should be distributed as much as possible over the statute required period for promotion with exceptions for those holding administrative and leadership duties, including Vice-Presidents, Deans, Vice-Deans, Chairmen of academic departments, and others with similar administrative responsibilities.
 - The published or accepted scientific product must be in venues recognized by the Scientific Board of the IAU.
3. The Faculty Member has the right to apply to the department for promotion six (6) months before the completion of the statutory period of application.
 4. The period of secondment, deputation, or delegation of a faculty member is calculated as follows:
 - a. Full period if the secondment, deputation, or delegation is to a scientific entity and he/she was working in the area of specialization.
 - b. Half the period if the secondment, deputation or delegation is to a non-scientific entity but the work is in the area of specialization.
 - c. The period will not be considered if the work was not in the field of specialization of the applicant.

Notes: In addition to what is stated in Clause 4.4, the following should be considered:

- The Scientific Board will decide if the secondment, deputation or delegation is in the area of specialization of the applicant in accordance with the recommendations of the Departmental and Faculty Boards.
- The Scientific Board will issue the decision on the period of secondment, deputation

or delegation in accordance with the respective Faculty Board and opinion of the department concerned before submission for promotion.

5. Faculty members are promoted according to the following parameters:
 - a. Scientific Product
 - b. Teaching
 - c. University and Community Service

Notes: In addition to what is stated in Clause 5, the following should be considered:

- The University and Community service include participation in committees, departmental, college and university development, and various scientific, cultural and sport activities in addition to active interaction with community needs, national events and cooperation with governmental and non-governmental organizations.

6. The evaluation of a faculty member is based on a hundred-point scale as follows:
 - a. (60) Sixty points for Scientific Product
 - b. (25) Twenty points for Teaching
 - c. (15) Fifteen points for - The University Board will set the parameters for participation in teaching, university and community services in accordance with the recommendations made by the Scientific Board.

Notes: In addition to what is stated in Clause 6, the following parameters should be considered in evaluating teaching, university and community services:

- Teaching is an important parameter for promotion and it depends on the teaching attributes and a detailed teaching load for the period from obtaining the current academic rank to the time of application for promotion given in the form provided for teaching record.
- The teaching component should not be less than the minimum given in Clause 4 for the total period spent in the current academic rank except for cases where the given minimum cannot be achieved in the given department or any other circumstances acceptable by the bylaws.
- The faculty member activities in university and community services are taken into consideration for promotion based on the provided form.
- The minimum point score for participation in teaching, university and community services will be 25 out of 40 points.
- The evaluation should be annual and consecutive at least for the previous two years, or one year if the appointment of the faculty member is less than two years.
- The form for evaluation of faculty members should be completed by the chairperson of the department in liaison with the Scientific Board college representative and the Dean.

- The evaluation must be supported by official documents for all the score-point parameters that substantiate the promotion of the faculty member.
 - When completing the score-point forms for teaching and university and community services the point scores must be applicable to the applicant only.
 - The average students' evaluation for the applicant should be not less than good (more than or equal to 3) in all subjects taught over the two years preceding the application for promotion according to the provided form.
 - The average departmental members' evaluation for the applicant should be not less than good (more than or equal to 3) over the two-year period preceding the application for promotion according to the provided form.
 - The number of training courses in education attended should not be less than three for each promotion and preferably on different courses.
7. The total score-points for promotion of a faculty member should not be less than sixty, with a minimum of thirty-five points in the scientific product for promotion to Associate Professor and forty points for promotion to Full Professor. The promotion to Associate Professor will be based on the majority decision of the three referees but promotion to Full Professor will be based on a unanimous decision by the three referees. If one of the three referees was against the promotion the scientific product will be sent to a fourth referee and his decision will be final.
8. The minimum scientific product that is required for promotion includes the following:
- a. Published or accepted research for publication in peer-reviewed journals. The Scientific Board will set the standards for accepted refereed journals.
 - b. Peer-reviewed research that was presented in specialized conferences and scientific symposia if it is fully published or accepted for publication; only one point will be accepted for promotion from this work.
 - c. Peer-reviewed research that was published or accepted for publication by specialized university research centers.
 - d. Peer-reviewed university textbooks and scientific references count for one point only.
 - e. Peer-reviewed verified rare books count for one point only.
 - f. Peer-reviewed translations of specialized scientific books count for one point only.
 - g. Books and scientific research published by scientific corporations that are recognized by the Scientific Board and Peer-reviewed count for one point only.
 - h. Inventions and innovations that received patents recognized by the Scientific Board.
 - i. Distinguished innovative activity along regulations approved by the university Board according to the recommendation of the Scientific Board count for one point only.

Notes: In addition to what is stated in Clause 8, the refereed journal should be one of the following in two categories:

- A) Peer-reviewed journals fulfilling the following conditions:
- The journal is published by a scientific or research institution, a regional or international organization.
 - The journal should have a specialized Chief Editor with at least an Associate Professor rank.
 - The journal should have a specialized Editorial Board with two-thirds of the board at the rank of Associate Professor.
 - The journal has published six regular issues or has been publishing regularly for two years with the exception of the refereed scientific journals published by the IAU.
 - The journal should be applying rigorous scientific refereeing and following unified publication guidelines that appear in every issue and state that the research published by the journal is Peer-reviewed by a minimum of at least two specialized referees.
- B) Peer-reviewed journals in one of the following categories:
- Peer-reviewed journals that are regularly accredited and updated by the National Center for Academic Accreditation and Evaluation (NCAAA).
 - Refereed journals that are registered according to their Journal Impact Factor (JIF) based on the databases of the Institute of Scientific Information (ISI) or others issued by Scimago Spanish, Ulrich, ERA Australia or similar standards after approval by the Scientific Board.
 - Journals recommended by the departmental and faculty boards that apply publication standards approved by the Scientific Board and including those given in Policy 4.8.A above of the executive bylaws.

Notes: In all cases the condition for accepted refereed journals given in Clause 8B above will be implemented according to the following graded time schedule:

- At least 25% of the minimum required points for published research after two years from the date of approval of these bylaws and executive procedures by the University Board.
 - At least 50% of the minimum required points for published research after four years from the date of approval of these bylaws and executive procedures by the University Board.
 - 100% of the minimum required points for published research after six years from the date of approval of these bylaws and executive procedures by the University Board.
9. The scientific product of the applicant will not be accepted unless the name of IAU is clearly linked to the applicant for the published or submitted work for publication after the establishment of the University and not in acknowledgments or address of the applicant with

- exception of the work done during work periods of secondment or delegated assignments
10. The insertion of address of other universities or institutions for the work done in the IAU will not be accepted.
 - a. If the research was conducted in collaboration with authors from other universities or institutions, the names of those universities or institutions may be mentioned in the accepted sequence of publication.
 - b. If the applicant has joined IAU, the accepted scientific product for published and accepted work for publication at IAU should not be less than one point for the rank of Associate Professor and two points for Full Professor.
 11. Parameters for accepting Peer-reviewed electronic journals for promotion purposes:
 - a. Electronic journals without printed copies will be governed by the bylaws governing printed journals as given in Article 29 (Clause 9) of the executive and procedural bylaws for Saudi faculty members' affairs in universities.
 - b. Electronic journals in which the candidates' work is published should have archival systems similar to those for printed journals.
 - c. Not more than one point will be given for published or accepted work in these journals for the minimum requirement with the exception of electronic journals listed in the ISI databases or similar as given in item 2 of Clause
 - d. 8.B above.
 - e. The Scientific Board will evaluate the parameters for accepting the electronic journals for promotion purposes two years after its implementation.

Notes: The following should be taken into consideration in addition to items given in Clause 8.a for published or accepted work for publication in Peer-reviewed scientific journals:

- The faculty member should be keen to publish in highly reputed international Peer-reviewed scientific journals.
- The scientific product of the applicant may include works extracted from postgraduate theses that are supervised by the applicant provided that the postgraduate student is among the authors of the published work.
- Original articles should not be less than two points for the minimum requirement for promotion to Associate Professor and three points for Full Professor.
- Review articles should not be more than one point and should contain the relevant references that are included in the article reference list. The Scientific Board will check the article's scientific value and weight.
- Only one point will be given for the following categories of scientific product collectively with the condition that it reflects originality and scientific value:
 - Special Articles
 - Special Communications
 - Case Study

- Case Report
 - Brief Communication
 - Short Communication
 - Short Article
 - Research Note
 - Therapeutic Note
 - Technical Note
 - Point of Technique
 - Systematic Review
 - Meta-Analysis Review
 - Technical Report
 - Chemical Structure Report
- The Scientific Board will evaluate the presented work for its originality and scientific value.
12. The following works are not considered for the minimum required for promotion:
- Letter to the Editor
 - Comments
 - Editorial
 - Correspondence
 - Debate
 - Book Reviews
13. Only one point will be counted for work published or accepted for publication by specialized scientific conferences and symposia according to the following conditions:
- a. The work was presented in a specialized international scientific conference or symposium organized by a regional or an international university, research center or organization that is recognized by IAU.
 - b. Each accepted research must have been scientifically reviewed by at least two specialized referees and not a general scientific committee for the conference. Proof documenting the refereeing process must be attached.
 - c. The research must be an oral and not poster presentation.
 - d. The research presented must be fully published in the conference proceedings book and should not be abstract. A copy of the conference proceedings book should be provided to the Scientific Board.
 - e. If the presented research is accepted for publication:

- i. A clear unconditional letter-headed printed document of acceptance from the organizing institution and signed by the chair- man of the scientific committee of the conference or symposium must be provided.
- ii. The Scientific Board will not accept copies, authenticated copies, e-mails or fax copies as proof of acceptance.

Notes: In relation to what is stated in Clause 8.4, published Peer-reviewed textbooks, references or chapters will count for half a point if the applicant is a single author and a quarter of a point if a co-author. The Scientific Board will evaluate chapters for their scientific value and weight.

Notes: In relation to what is stated in Clause 8.8, inventions and innovations with pa- tents from the following offices are acceptable:

- United States Patent and Trading Office
- Japan Patent Office
- European Patent Office
- King Abdul-Aziz City for Science and Technology
 - The patent should have published research in an approved refereed scientific journal.
 - The invention or innovation should have scientific significance and a verifiable applied value and it should be in the field of specialization of the applicant.
 - The point score will be according to Clause 18.

Notes: In relation to what is stated in Clause 8.9, innovative works include those that have received refereed prizes from bodies outside the University provided that these conferring bodies are accepted by the Scientific Board.

14. The minimum required published or accepted work for publication in Peer-reviewed scientific journals must not be less than one point for promotion of a faculty member applying for the rank of Associate Professor and two points for Full Professor.
15. The published or accepted work for publication must be in multiple peer-reviewed scientific journals that do not belong to a single university or scientific institution.
 - a. All peer-reviewed scientific journals that are published by various branches of a single educational institution or multiple journals from a single institution will be treated as one journal.
 - b. In all cases the total number of published or accepted work for publication in a single refereed scientific journal must not be more than 50% of the minimum requirement for promotion.
16. The minimum requirement of published or accepted work for publication in peer-reviewed scientific journals for promotion of a faculty member applying for the rank of Associate Professor is four points with two points at least as single author. The University Board can waive this condition for certain disciplines according to the recommendation of the Scientific Board but the minimum required of actually published work must not be less than one

point.

Notes: In relation to what is stated in Clause 16, the minimum requirement as single author in the scientific product for the rank of Associate Professor may be met by coauthored published work if the applicant is the first author in the number of publications equivalent to the minimum required as a single author for the rank of Associate Professor.

17. The minimum requirement of published or accepted work for publication in peer-reviewed scientific journals for promotion of a faculty member applying for the rank of Full Professor is six points with three points at least as single author. The University Board can waive this condition for certain disciplines according to the recommendation of the Scientific Board but the minimum required of actually published work must not be less than three points.

Notes: In relation to what is stated in Policy 17, the minimum requirement as single author in the scientific product for the rank of Full Professor may be met by coauthored published work if the applicant is the first author in the number of publications equivalent to the minimum required as a single author for the rank of Full Professor.

18. A single author of a scientific work will get one point. If the work is coauthored by two participants, each will get half a point. If the work is coauthored by more than two, the first author will get half a point and the others will get a quarter of a point each.

Notes: In relation to what is stated in Clause 18, in some scientific disciplines identified by the Scientific Board, such as the Health Specialties Multicenter Studies, include a large number of participants. The published work in these cases will have a small number of authors at the top of the paper and a list of the remaining participants at the end of the paper. In this case these participants will be treated as co-authors and the work will be counted in the minimum requirement for promotion after approval by the Scientific Board.

19. The scientific product for promotion must not be extracted from MSc or PhD theses or past work. If it becomes evident for the Scientific Board that the presented work contained material extracted from theses, the applicant will be barred from applying for promotion for one year from the date of the Scientific Board decision.

Notes: In relation to what is stated in Clause 19, the minimum requirement as single author in the scientific product for the rank of Full Professor may be met by coauthored published work if the applicant is the first author in the number of publications equivalent to the minimum required as a single author for the rank of Full Professor.

20. The promotion referees must be Full Professors but if the application is for Associate Professor one of the referees may be a specialized Associate Professor with integrity and a distinguished scientific and research career. Nomination of referees for promotion must be diversified and not recurrent as much as possible.

Notes: In relation to what is stated in Clause 4.20, when selecting referees the following should be considered:

- The referees must be from the area of subspecialty of the applicant for promotion.
- They should be proficient in the language of publication of the majority of the scientific product of the applicant.

- The Scientific Board requires an abstract of all the work presented for promotion from the applicant.
21. The faculty member will be academically promoted from the date of approval of promotion by the Scientific Board, but the employment promotion will be from the date of the executive decision if there is a vacancy for promotion.

Notes: In relation to what is stated in Clause 21, priority for employment promotion of faculty members is based on the date of approval of the Scientific Board for the promotion, the older has the priority for promotion. If a number of faculty members have been promoted in the same meeting of the Scientific Board and there are no available employment slots for all of them, the priority will be based on the following:

- The referees' average score for each.
 - If necessary, the scientific product score, the teaching average score, and the average score in the university and community service will be taken to make the final decision.
- 22. General rules and procedures relevant to promotion:**
1. All the Bylaws (Articles 21-37) or (Clauses 1 - 21) regulating the promotion of Saudi faculty members will be applicable on non-Saudi faculty members.
 2. The following will be applicable in relation to implementation of promotion and change of employment grade for expatriate faculty members and similar employees by IAU. No implementation of promotion or change of employment grade shall be made in the following cases:
 - a. The expatriate faculty member obtained a doctorate degree from the mother university or any other university while employed IAU.
 - b. The expatriate faculty member was promoted by the mother university or any other university while employed by IAU.
 - c. The expatriate faculty member was employed by IAU at an academic rank less than the one that was held at the mother University or any other university.
 - d. The exception to the above three categories is a faculty member whose contract with IAU clearly states a change in the employment status according to the conditions given in the contract.

Procedures:

Promotion Procedure:

1. The faculty member submits the application for promotion to the department including the following:
 - a. Academic and professional qualifications and employment record.
 - b. Details of teaching activities.
 - c. Details of University and Community activities.
 - d. At least five copies of the scientific product.

- e. Any additional information to support promotion.
 - f. Any other information or documents required by the departmental and faculty boards and the Scientific Board
2. The departmental board will review the application for promotion to verify all the requirements and procedures and then approve the recommendation for promotion. The board will submit the completed application with a list of at least eight nominated specialized referees.
3. The faculty board will consider the application for promotion according to the recommendation of the departmental board and will nominate a minimum of eight specialized referees selected from among those offered by the department or others.
4. The Scientific Board will study the application according to the recommendations of the departmental and faculty boards and proceed with the following:
 - a. Select five referees for evaluation of presented research. The selection of referees will be from those nominated by the faculty board or others.
 - b. Three of these will be the main evaluators, the fourth will be a first reserve referee and the fifth will be a second referee.
 - c. The latter two will be consulted should need arise. At least two of the three main referees will be from outside the University.
5. All the research and promotion documents will be sent confidentially to the referees for evaluation according to the Scientific Form of Evaluation for the Referees.
6. Take a decision on promotion or rejection after reviewing the referees' reports and the reports provided on the applicant's contributions to teaching, university and community services.

In addition to what is stated in Procedure 1, the applicant must provide the following:

1. A completed CV.
2. Original printed and electronic copies of the scientific production presented according to the educational and professional record with clear marking of published work derived from the MSc and PhD theses.
3. The applicant must also complete the online Promotion Form on the Scientific Board web page.
4. The department must ensure the completion of all the necessary pre-requisites of the application for promotion according to the bylaws and including obtaining the appropriate reports on the applicant's participation in community services before submitting the application for the Faculty Board.

In addition to what is stated in Procedure 2, the following should be considered:

1. All departmental board members should have enough time to review the application for promotion, which should be not less than two weeks before the meeting to discuss the application and its approval or rejection.
2. The evaluation and voting on the application should be objective.
3. The voting on the recommendation for promotion should be by secret ballot.
4. The names and details of the nominated referees should be up-to-date.

In addition to what is stated in Procedure 3, the following should be considered:

1. All faculty board members should have enough time to review the application for promotion, which should be not less than two weeks before the meeting to discuss the application and its approval or rejection.
2. The evaluation and voting on the application should be objective.
3. The voting on the recommendation for promotion should be by secret ballot.
4. The names and details of the nominated referees should be up-to-date.

In addition to what is stated in Procedure 4.a, the following should be considered:

1. The Scientific Board will take a prima facie decision for promotion or not after review and discussion of the application and before selecting the referees with statement of reasons for refusal of promotion.

In addition to what is stated in Procedure 4.b, the following should be considered:

1. The Scientific Board will follow up on the referees' evaluation of the scientific product of the applicant by obtaining the printed and electronic completed referees evaluation forms.

In addition to what is stated in Procedure 4.c, the following should be considered:

1. The scientific work for promotion of the applicant should be annotated in the CV and in the dean's covering letter for promotion to the Scientific Board.
2. In case of refusal of promotion, a period of six months must lapse before reapplication.

Responsibilities:

- Faculty Board Members
- Departmental Board Members
- Scientific Board Members
- Vice-Presidency of Scientific Research
- Deanship of Faculty and Personnel Affairs

References:

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12. Ad hoc Committee for the Preparation of "Proposed Changes to the Rules
13. & Regulations of Promotion for the University Faculty Members", University of Dammam.

Policy and Procedure for Faculty Grievance

 <p style="margin: 0;">جامعة الإمام عبد الرحمن بن فيصل IMAM ABDULRAHMAN BIN FAISAL UNIVERSITY كلية الصيدلة College of Pharmacy</p>	
Policy Title:	Policy and procedure for faculty grievance
Policy Code:	COP-AD-005
Date of Initial Approval:	May 2016
Date of Last Review:	January 2025
Next Review Data:	January 2028
Approved by:	College Council
Responsible Office:	Vice Deanship of Development and Community Partnership

Purpose:

The aim of this policy is to provide a fair, internal process for resolving employment related disputes that arise between faculty or academic staff members and administrators. The formal procedures described in this policy are intended to be used only when matters cannot be resolved informally.

Scope:

This policy applies to all faculty or academic staff members and administrators.

Definitions:

1. *Grievance*: A written complaint filed by a faculty or academic staff member against a faculty member and or an administrator of the College/University alleging a violation of University/College policy or established practice e.g. improper, arbitrary, or discriminatory application of university rules, regulations, standards, practices, and/or procedures relating to the conditions of employment or to other circumstances giving proper grounds for complaint.
2. *Faculty member*: A person with a paid University appointment at the rank of professor, associate professor, assistant professor, lecturer or instructor.
3. *Administrator*: A person appointed as the head of an administrative unit, director, department chair, dean, or separately reporting director.
4. *Policy*: A written statement of principles and procedures that govern the actions of faculty, academic staff, and administrators, including written rules, bylaws, procedures, or standards.
5. *Practice*: Actions taken by the administrator within an administrative or academic unit based on customs or standards in that unit which are usually unwritten but of long-standing duration, and for whose existence the grievant can offer evidence.
6. *Violation*: A breach, misinterpretation, or misapplication of existing policy or established practice.

Policies:

- The faculty grievance policy is designed to provide due process for faculty members. This policy will apply anytime a grievance is filed by a COP faculty member against a faculty member or an academic administrator / administrator where no other COP policy is appropriately applied.
- Grievances may include work assignments, work schedules, working conditions, annual evaluations, or the interpretation or application of a rule, regulation, or policy.
- The formal procedures described herein are intended to be used only when matters cannot be resolved informally. A faculty or academic staff member who feels aggrieved should first seek an informal resolution at his/her department level before filing a formal grievance to the college Dean under this policy.
- If a member of the committee is involved with grievance or may have a conflict of interest with hearing the case, the member is expected to excuse him / herself from the committee for the duration of the case.
- On proper request for a complaint / hearing, the College Dean shall establish an ad hoc committee of five people with appropriate expertise and without bias or direct interest in the outcome and to adherence to hearing procedures assuring a full and impartial hearing strictly on the merits of the cases. The committees shall comprise of:
 1. Vice Dean (assigned by the Dean).
 2. Chair / head of one department (other than complainant's department).
 3. Representative from Vice Deanship for Quality and Development.
 4. Two COP faculty members (another department).

- The Dean shall designate one member of the committee to act as a chair. The grievant or accused shall have the right to challenge committee appointments supported by adequate grounds. The challenged member shall be excused if Dean finds adequate justifiable evidence. He shall then appoint replacements for the members excused.
- The committee shall review and evaluate grievances brought forth by a faculty member and shall submit a recommendation concerning the grievance to the Dean. The Committee intends to provide a fair, internal process for resolving employment related disputes that arise between faculty or academic staff members and administrators.

Procedure:

1. To initiate a formal grievance, the employee shall present the grievance in writing to his or her supervisor within seven calendar days from the date of the action that is the subject of the grievance. The employee's statement of complaint must include the employee's recommendation(s) for resolution of the grievance. Relevant documents or any other information pertinent to the matter should also be provided. Once grievance has been committed to writing, it cannot be changed.
2. Immediate supervisors and department heads must respond to the employee in writing within seven calendar days of receipt of the grievance.
3. If an employee's immediate supervisor is the subject of grievance, the employee may file the grievance in writing directly to the Chair of the committee.
4. Once received by the committee, the process is as follows:
 - Hearings shall be scheduled as expeditiously as possible with due regard for the schedule of both parties. On the rare occasion when a party fails to respond to repeated attempts (not more than one week) to schedule a hearing or unreasonably delays the scheduling of a hearing, the Grievance Committee will schedule the hearing for the first date available to the panel members and the other party.
 - The Grievance Committee shall convene the hearing panel and shall be present during all formal proceedings. The Grievance Committee shall provide written notice of the time and place of the hearing, the names of counsel, the names of any witnesses, and copies of any documents submitted by the parties and deemed relevant by the Grievance Committee, to each party at least seven days before the hearing.
 - The hearing shall be conducted in good faith and must be completed within 14 calendar days unless the Grievance Committee determines that extension of time is necessary.
 - All hearings shall be recorded. A party may request and obtain a copy of the recording from the Grievance Committee.
 - Hearings shall be closed unless the parties agree otherwise.
 - The privacy of confidential records used in the hearing shall be respected.
 - All parties may present their cases in person and may call witnesses on their behalf. The names of witnesses must be provided to the Grievance Committee at least seven (7) days prior to the hearing date.
 - A party may elect not to appear, in which event the hearing will be held in his or her absence.
 - All parties are entitled to counsel their choice. The name of counsel must be provided to the Grievance Committee at least seven (7) days prior to the hearing date.

- Any party or counsel shall be entitled to ask pertinent questions of any witness or the other party at appropriate points in hearings. The grievant bears the burden of proving that there has been a violation of policy or established practice. A hearing panel shall decide whether the evidence supports the allegations made by the grievant.
 - The Grievance Committee shall report their findings and recommendations in writing within 14 days of the completion of the hearing to the Grievance Committee, who shall forward them to the grievant, the respondent, their counsel, and the appropriate supervisor.
5. If the grievance is not satisfactorily resolved by the Committee or if the employee does not receive a response in accordance with the timelines outlined in this policy, the employee may submit a written response stating why the decision is unacceptable to the following people in the order listed:
 - i. Department head
 - ii. Concerned Vice Dean
 - iii. Dean
 6. Failure to respond to the employee within the time limit allows the grievant to automatically submit the grievance to the next higher appeal level.
 7. All records and information related to grievance proceedings shall be kept confidential to the degree permitted by law. The Grievance Committee, parties to the grievance and other relevant administrators and faculty (including witnesses, presiding officers, and panel members) shall respect the confidentiality of information and records and the privacy of all parties whose interests are affected by grievance.

Responsibility:

1. Dean, College of Pharmacy
2. Vice Deans
3. Department Chairs
4. Faculty
5. Administrative Staff

References:

1. Board of Higher Education articles 82-91

Attachment

**KINGDOM OF SAUDI ARABIA
COUNCIL OF HIGHER EDUCATION
GENERAL SECRETARIAT**

Discipline**Article 82**

A disciplinary committee for staff members, and their equivalent, is formed by a decision from the President of the University, as follows:

1. One Deputy President, as chairman.
2. A Dean other than the one that investigates, as a member.
3. A staff member with a rank not less than Professor, as a member.
4. One of the specialists in Shari'ah or regulations, as a member.

Article 83

Taking into account the regulations of staff discipline, one of the Deans, appointed by the President of the University, investigates a staff member directly, if he/she fails to perform his/her duties. The Dean reports to the President of the University the results of the investigation who transfers the investigated member to the disciplinary committee, if necessary.

Article 84

The President of the University may suspend the work of a staff member, and his/her equivalent, for investigation, if necessary. The suspension period must not be more than 3 months, unless with a decision from the disciplinary committee. Suspension period or periods might be extended once or more, based on the investigation circumstances. However, the suspension period should not be more than one year each time.

Article 85

The suspended staff receives 50% of his/her basic salary. If he/she is innocent or penalized by other than termination, he/she receives the rest of his/her salary. If he/she is penalized by termination, he/she will not need to pay back what he received, unless the disciplinary body decides otherwise.

Article 86

The President of the University notifies the staff member, and his/her equivalent, who is referred to the disciplinary committee, with the accusations and a copy of the investigation report by a registered letter at least 15 days before the trial session date.

Article 88

The disciplinary committee reviews the referred case as follows:

1. The secretarial tasks of the committee are carried out by an employee selected by its chairman.
2. The committee holds its meetings by invitation from the chairman. The investigated staff member is notified in writing by a registered letter to be present before the committee to listen to his/her statements and defense.

3. The committee holds meetings in the presence of the staff member investigated or his representative. If he/she or his/her representative did not attend the meeting the committee reviews the case and completes the investigation steps confidentially. The committee may listen to witnesses, when necessary.
4. The disciplinary committee decides by a majority of vote, and its meetings will not be valid unless all of the members attend the meeting. The committee presents its decisions to the President of the University, attached with the case file, within not more than two months from the referral date. If the President of the University does not approve the committee's decision, the decision will be returned to the committee. If the committee insists on its decision, the matter will be raised to the University Board which gives the final decision.
5. The President of the University notifies the investigated staff member, and his/her equivalent, with the committee's decision, once it is issued, in writing by a registered letter.
6. The staff member, and his/her equivalent, may contest the decision by a letter presented to the President of the University within 30 days from the date of being notified of the committee's decision, unless the decision is final. If the contest is received before the due date, the President of the University returns the case to the disciplinary committee for a new review. If the committee insists on its decision, the matter will be raised to the University Board, which gives the final decision.

Article 89

Taking into account the rules of Article 32 of staff discipline regulations, the disciplinary penalty to be inflicted on staff members, and their equivalent, are:

1. Warning.
2. Blaming.
3. Salary deduction of no more than the basic salary of three months and the monthly deduction should not exceed third of the basic salary.
4. Prevention from one periodical increment.
5. Postpone promotion for one year.
6. Exclusion from academic work, and, assigning to another work for a maximum period of five years. The exclusion period is not included in the duration counted for promotion.
7. Termination.

Article 90

No impact of the disciplinary proceeding on other legal proceedings arising from the same incident.

Article 91

The President of the University might warn the staff member, and his/ her equivalent, who breaches his/her duties orally, or, in writing. He might inflict both penalties of warning and blaming on the staff member after investigation and listening and writing his/her statements and defense. The decision of President of the University in this case is reasoned and final. Based on the information from the heads of departments, or, on their own observations, the Deans should notify the President of the University of Staff Members, and their equivalent, who are in breach of required duties or any other violations.

Policy and Procedure for Conflict of Interest



جامعة الإمام عبد الرحمن بن فيصل
IMAM ABDULRAHMAN BIN FAISAL UNIVERSITY
 كلية الصيدلة | College of Pharmacy

Policy Title:	Policy and procedure for conflict of interest
Policy Code:	COP-AD-006
Date of Initial Approval:	May 2016
Date of Last Review:	January 2025
Next Review Data:	January 2028
Approved by:	College Council
Responsible Office:	Vice Deanship of Development and Community Partnership

Purpose:

The purpose of this policy is to ensure that administrators, faculty, and staff of the college avoid “conflict of interest” with respect to the affairs of the college and the university. This policy provides guidance for all faculty and staff when considering potential conflicts of interest, as it is their responsibility to disclose these issues. The college is committed to operating in an ethical and legal manner, and in compliance with all government statutes, university policies, Compliance Program and Code of Conduct. Faculty and staff are urged to avoid or disclose interests and activities that may conflict with the proper discharge of their official duties.

Scope:

The policy applies to all College of Pharmacy faculty, staff, and students.

References:

Rules and Regulations of the Board of Higher Education

Responsibility:

- Dean, College of Pharmacy
- Vice Deans
- Department Chairs
- College of Pharmacy Faculty
- Administrative staff
- Interns and Students

Annual Disclosure:

All administrators, faculty, and staff of the College of Pharmacy will annually sign a Statement of Disclosure/Conflict of Interest and will excuse themselves from all activities that are related to conflicting issues.

RULES AND REGULATIONS OF BOARD OF HIGHER EDUCATION**Article 48**

The University Board may accept donations, grants, bequests and endowments. It may also accept conditional donations for special purposes that do not violate the University main objective.

These donations are deposited into an independent bank account to be spent on specified purposes according to the following rules:

1. These donations must be deposited into an independent bank account with the Saudi Arab Monetary Agency or any local bank and transferred over yearly.
2. Assets are valued as soon as they become possessions of the University.
3. All donations, grants, bequests and endowments inheritances are registered in a special registry.
4. Spending on donations, grants, bequests and endowments is subject to these rules:
 - a. If the donation, bequest or endowment is in cash or an asset and the donator specifies how to use it, it must be fulfilled according to his request.

- b. If the donation, bequest or endowments is in cash or an asset and the donator does not specify how to use it, the University Board has the right to specify other ways of spending.
- c. Spending from the independent bank account is subject to the possession of official documents and should be supervised by the auditor.
 - The University president can spend up to one million riyals. If any amount above one million is required, the approval of the University Board is necessary.
 - The auditor regularly monitors and reviews the donations, grants, bequests and endowments and the independent bank account, and reports on them.
 - The auditor must make sure that all the donated estates and materials are registered in the University records according to the accounting rules and report them.

Vendor-Sponsored Events:

Prior to planning or attending a vendor-sponsored program, faculty and staff will need to consider if it may constitute a violation of the applicable governments ethics statutes, including any “anti-kickback laws”. Faculty and staff are urged to contact their immediate supervisor for advice on this matter.

Personal Use of University/College Resources:

Faculty and staff are responsible for protecting University and College resources, including but not limited to property, personnel, time, equipment, vehicles, computer software, trademarks, and intellectual property. Limited personal use of University and College resources may be permitted under certain conditions. Faculty and staff are urged to contact their immediate supervisor with specific questions or concerns regarding use of University / College resources.

Lobbying:

Under no circumstances shall University or College resources be used for lobbying or promoting or opposing an initiative under consideration by the government / university administration. This prohibition includes the use of employee work time to engage in these activities.

Development and Community Partnership

Policy and Procedures for the Development and Periodic Review of Vision, Mission, Values, and Goals

 <p style="text-align: center;">جامعة الإمام عبد الرحمن بن فيصل IMAM ABDULRAHMAN BIN FAISAL UNIVERSITY كلية الصيدلة College of Pharmacy</p>	
Policy Title:	Policy and Procedures for the Development and Periodic Review of Vision, Mission, Values, and Goals
Policy Code:	COP-DC-001
Date of Initial Approval:	May 2018
Date of Last Review:	January 2025
Next Review Data:	January 2028
Approved by:	College Council
Responsible Office:	Vice Deanship of Development and Community Partnership

Purpose:

To define the process and responsibilities involved in the periodic review and approval of the College's Vision, Mission, Values, and Goals, ensuring alignment with institutional strategy, regional and national needs, and stakeholder expectations.

Policy Statement:

The College of Pharmacy (COP) is committed to maintaining a clear, relevant, and strategically aligned Vision, Mission, Values, and Goals (VMVG) to guide its academic and administrative priorities. These statements are developed and reviewed with input from stakeholders and in alignment with the strategic direction of the College and the Islamic University. This policy outlines the procedures and responsibilities for the periodic review, revision, and dissemination of these foundational elements.

Scope:

This policy applies to all academic programs and administrative units within the College of Pharmacy.

Definitions:

- a) **Vision:** The Vision articulates the future state that the College aspires to achieve. It sets a long-term direction and serves as a guiding reference for strategic planning at all levels.
 - b) **Mission:** The Mission defines the College's core purpose, identifying what it aims to accomplish, for whom, and by what means.
 - c) **Values:** The Values represent the fundamental principles and ethical standards shared across the College, guiding all actions and decisions.
 - d) **Goals:** The Goals are program-specific objectives that reflect measurable outcomes aligned with institutional and national strategic priorities, including those of the College and the Islamic University.
- The Vision, Mission, Values, and Goals are subject to periodic review to ensure continued relevance and alignment with institutional and stakeholder expectations.
 - This review is integrated into the curriculum and program specification review cycle, which occurs every five (5) years or following the graduation of a full cohort.
 - In cases of significant institutional change such as those resulting from updates to the strategic plans of the University or College, the College Council may initiate an earlier review as deemed necessary.
 - The review and development processes must involve appropriate internal and external stakeholders to ensure diverse perspectives and comprehensive input

Procedures:**1. Scheduled Review:**

- The Vision, Mission, Values, and Goals (VMVG) shall be reviewed at least every five years, or after the graduation of a full cohort, to ensure continued relevance and alignment.
- A task force appointed by the Dean will lead the review in the designated fifth year.

2. Ad-hoc Review:

- In the event of institutional or university-level changes that impact the College's strategic direction, the College Board will initiate a review of VMVG, even if it falls between scheduled five-year reviews.

- If a significant revision is required, the full five-year review process will be enacted.

3. Ongoing Assessment:

- The Quality Management and Academic Accreditation Unit (QAAU) will annually assess the achievement of the College's mission and goals through:
 - Program Assessment Reports (APR)
 - Course Reports
 - Key Performance Indicators (KPIs)
 - Other institutional metrics
- If assessment findings indicate that the mission or goals are misaligned with outcomes, the full review process may be initiated.

4. Review Process (Five-Year Cycle):

- **Formation of Task Force:** Appointed by the Dean, including faculty, administrators, students, and external stakeholders as needed.
- **Stakeholder Engagement:** The task force informs all stakeholders and collects feedback through surveys, meetings, and consultations.
- **Draft Preparation:** Analysis of feedback is compiled into a draft revision report.
- **Review & Feedback:** The draft is shared with:
 - Department Heads
 - Professional Experts
 - Student Council
 - External Advisory Board
 - Employers
 - Alumni
- **Finalization:** Based on feedback, the final version is prepared.
- **Approval:** The final draft is submitted to the College Board for formal approval.
- **Dissemination:** Approved VMVG statements are publicized through:
 - College homepage and LCD or wall panel displays
 - Handbooks and manuals
 - Official communication channels

5. Integration and Implementation:

- Program objectives and strategic initiatives are aligned with the approved VMVG.
- Performance indicators are used to evaluate progress and guide decision-making.
- Corrective actions are initiated based on assessment outcomes.

6. Annual Stakeholder Awareness Survey:

- A yearly survey is conducted to measure stakeholders' awareness and acceptance of the approved VMVG.
- Results are used for continuous improvement in communication and engagement strategies.

Responsibilities:**Quality management & Academic Accreditation Unit (QAAU) in collaboration with the Strategic Planning Committee:**

- Coordinate periodic review of the program mission, goals, and graduate attributes.
- Design and distribute feedback tools (e.g., surveys and questionnaires).
- Develop operational plans aligned with the approved mission and goals.
- Monitor and report progress on strategic initiatives.

All College Committees and Units:

- Align planning, decision-making, and activities with the approved VMVG.

Measurement & Evaluation Unit:

- Collect and analyze data related to performance indicators and strategic outcomes.
- Assess achievement of program goals and the mission.

College Board:

- Review and approve final VMVG statements.
- Evaluate results from operational indicators and oversee strategic improvements.

Policy and Procedures for Conducting and Monitoring Quality Assurance Activities



جامعة الإمام عبد الرحمن بن فيصل
IMAM ABDULRAHMAN BIN FAISAL UNIVERSITY
كلية الصيدلة | College of Pharmacy

Policy Title: Policy and procedures for conducting and monitoring quality assurance activities

Policy Code: COP-DC-002

Date of Initial Approval: May 2016

Date of Last Review: January 2025

Next Review Data: January 2028

Approved by: College Council

Responsible Office: Vice Deanship of Development and Community Partnership

Purpose

This policy aims to establish a comprehensive and structured approach to implementing, monitoring, and improving quality assurance (QA) activities across all functions of the College of Pharmacy, including its PharmD program, research, student support services, and administrative processes. The outcomes of QA activities will inform data-driven improvements aligned with national and international standards.

Scope

This policy applies to all academic, administrative, clinical, and research functions within the College of Pharmacy and covers:

- Program self-evaluation
- Surveys and stakeholder feedback
- Monitoring of Key Performance Indicators (KPIs)
- Strategic performance indicators
- Internal and external reviews

I. Quality Assurance Mechanisms

The following mechanisms are implemented to ensure high quality in the COP including its PharmD program, research, etc.

1. Self-evaluation Process.
2. Quality Evaluation Surveys.
3. Key Performance Indicators (KPIs).
4. Performance Indicators of the college strategic plan.
5. External Reviews.

1. Self-evaluation process

Self-evaluation is an important quality tool used to internally assess compliance with quality standards. The following tools are recommended by the National Center for Academic Accreditation and Evaluation (NCAAA) for this purpose.

- Self-evaluation of the program every three years.
- Course report, every semester done by the course coordinators.
- Annual program report.
- Annual committee report.
- Faculty and staff self-evaluation.

2. Quality evaluation surveys

Acquiring feedback about various practices and functions from the stakeholders is highly valued and recommended by the quality experts for monitoring of subsequent improvements. The COP uses various quality evaluation surveys for monitoring, reviewing and improving various aspects of the PharmD program and college facilities.

▪ Student Surveys

The surveys are designed to obtain feedback from students for teaching, learning, assessment, availability and adequacy of learning resources and facilities and student support services at different academic levels of study.

- **Faculty and Staff surveys**

Evaluation surveys are designed and implemented to measure the satisfaction level of teaching and support staff as related to their job-related functions and the adequacy of facilities.

- **Alumni Survey**

Considering the value of retrospective assessment and the impact of program quality on the careers of college alumni, a survey tool is customized to seek the feedback of college alumni as well.

- **Employers Survey**

The college administration values and seeks the opinion of employers COP graduates as practicing as pharmacists and postgraduate students to reflect and give an external endorsement about the quality of the program.

- **Internship survey**

College seeks the interns' feedback about their rotations, training sites and preceptors and consider this feedback to improve the quality of students training.

- **Other surveys**

This includes a program learning outcomes (PLOs) and graduate attributes (GAs) survey for the PharmD program graduates to help assess the PLOs and GAs. Moreover, there are other survey tools to help determine and identify the professional development needs of the faculty members and to collect their feedback about any new policy initiated at the college. The Quality Management and Academic Accreditation Unit will design more survey tools on a need basis.

Survey design and administration

- Participation of the students in the evaluation surveys is voluntary. However, students should be encouraged to participate and complete the survey forms.
- The survey design and administration process must guarantee the privacy of any personal and other information collected through survey.
- The survey instrument should not allow the identification of respondents. However, in cases where identification may be necessary (e.g., alumni surveys, employer surveys, etc.), participants must be clearly informed that the personal and other information collected is confidential but not anonymous.
- The attendance status will be registered; NCAAA recommends an acceptable response rate of 50%.

Ethical Framework

Surveys should:

- adhere to appropriate ethical standards
- not compromise population samples through the overlap of surveys
- not over-survey the college's core stakeholders
- be disseminated to stakeholders
- be fair and transparent

Survey instruments and schedule

This will be maintained by the office of the Vice Deanship for Development and Community Partnership (VDCP) and aligned with the academic calendar of the University. The majority of listed surveys are done

online through [Estibana](#) in collaboration with the Deanship for Quality and Academic Accreditation (DQAA) at IAU.

Respondents	Type	Survey	When
COP Faculty members	Online	Academic job satisfaction survey (AJS)	Once a year, at the end of the year
	Online	Library user satisfaction survey (LUS)	Once a year, at the end of the year
	Online	Vision, mission and values survey (VMV)	Once a year, at the end of the year
	Online (not through Estibana)	Professional development need analysis survey (PDS)	Once a year, at the end of the year
All students	Online	Course evaluation survey (CES)	Every semester
	Online	Students survey on lecturing skills (SSLS)	Every semester
	Online	Library user satisfaction survey (LUS)	Once a year, at the end of the year
	Online	Vision, mission and values survey (VMV)	Once a year, at the end of the year
	Online	Student Affairs Survey (SAS)	Once a year, at the end of the year
	Online	Student Survey on Academic Advising (SSAA)	Once a year, at the end of the year
1 st Year students	Online	Orientation Program Survey (OPS)	Once a year, Term 1 or Term 2
Students who reached half the program	Online	Students experience survey (SES)	Once a year, Term 1 or Term 2
Final year students	Online	Final year students survey (FYSS)	Once a year, before graduation
	Online	Program evaluation survey (PES)	Once a year, before graduation
Interns	Online (Through REDCap)	Internship satisfaction survey (ISS)	Once a year, at the end of the internship year
	Online (Through REDCap)	Endo of Rotation Survey (ERS)	Once a year, at the end of each rotation
Preceptors	Online (Through REDCap)	Preceptor Feedback Survey (PFS).	Once a year, at the end of the internship year

All Alumni	Online	Alumni Satisfaction Survey (ALS)	Specified intervals up to 2 years after graduation
Employers	Online	Employer satisfaction survey (ESS)	Specified intervals up to 2 years after graduation

Procedures for surveys

- All surveys conducted for the purposes of quality assurance are required to conform to the framework of this policy. New survey tools will require approval from the Quality Management and Academic Accreditation Unit (QAAU) and the College Board.
- The survey schedule is approved by the VDCP and endorsed by the Vice Dean for Academic Affairs and the Vice Dean for Clinical Affairs.
- The VDCP is responsible for conducting surveys within its terms of reference and monitoring compliance with the survey procedure.
- The VDCP coordinates with the students through the class leaders.
- The surveys are administered during the last month of the semester via Estibana website.
- The purpose of evaluation is explained and appropriate time is given for the responses.
- The VDCP coordinates the online surveys (Estibana) with the Deanship for Quality and Academic Accreditation (DQAA) at the university.
- Heads of departments have access to their respective department's CES and SSLS results. Additionally, each faculty member has access to their individual survey results.
- The course coordinator should develop appropriate action plans to address any items marked in red in the CES. Action plans related to curriculum matters should be reviewed by the Curriculum Committee, while all action plans require approval by the Department Board. These plans should be documented in both the Course Report and the CES Report, and submitted to the QAAU for review, approval, and further follow-up.
- Each faculty member is responsible for preparing a report to address any items marked in red in the SSLS results. The SSLS results are discussed confidentially on a one-on-one basis between the concerned faculty member and the Head of Department. The report should include the identified issues, proposed action plans, and follow-up measures, and should be submitted to the QAAU for review, approval, and further follow-up.
- The QAAU is responsible for extracting the results of all surveys (excluding CES and SSLS) and preparing a separate report for each survey. These reports include a detailed analysis of the results, identification of strengths and areas for improvement, as well as specific recommendations. Once completed, the reports are submitted to the VDCP for review and approval. The VDCP then shares the reports with the relevant Vice Dean, unit, or committee responsible for addressing the findings.
- These entities are tasked with developing action plans to address the recommendations identified. Each action plan must clearly outline the tasks to be undertaken, the implementation timeline, the responsible individual(s), and any required resources. Once the action plans are finalized, the comprehensive report is submitted to the QAAU for final approval. The approved report is then presented to the College Council for discussion and endorsement, and it is included as part of the Annual Program Report.

3. Key Performance Indicators (KPIs)

The NCAAA has established a set of Key Performance Indicators (KPIs) for higher education institutions and academic programs. At the College of Pharmacy (COP), the QAAU is responsible for monitoring the 11 mandatory KPIs set by the NCAAA for the program and maintaining annual reports on their results. In

In addition to these, twelve supplementary KPIs have been developed and formally approved by the College Board, expanding the program's performance monitoring framework.

4. Performance indicators of the college strategic plan

The progress of the College's Strategic Plan is monitored through specific performance indicators linked to its action plans. These indicators are used to evaluate the implementation and effectiveness of activities aimed at achieving strategic objectives and goals.

5. External Reviews

As part of its quality assurance and continuous improvement framework, the College is committed to conducting regular external reviews to ensure that its academic programs meet high standards of excellence in line with national and international accreditation requirements. To support this objective, the College has established an External Advisory Committee (EAC) composed of national and international experts in pharmacy education and practice. The EAC provides guidance, independent feedback, and expert recommendations related to program development, periodic review, and ongoing enhancement.

In addition, the College utilizes external evaluation mechanisms, including employer feedback surveys, to assess graduate performance and ensure alignment between program outcomes and labor market expectations. In alignment with NCAAA accreditation requirements, the College submitted a comprehensive Self-Study Report (SSR) to an independent external reviewer. Based on the external NCAAA review and site visit, the College was granted full accreditation by the NCAAA through April 2028. Furthermore, the College is in the process of preparing its self-study report for submission to the Accreditation Council for Pharmacy Education (ACPE) as part of its initiative to obtain international accreditation, further reinforcing its commitment to global standards of pharmacy education.

II. Monitoring of quality assurance activities

It is essential that monitoring and evaluation information be communicated to the individuals concerned and departments in the college. Such communication of information will begin with the senior management of the College and then disseminated to the teaching staff, students and EAC. Evidence of correspondence and minutes of meetings will be kept, and reports forwarded to the QAAU. Integrating quality improvement information contributes to the detection of trends, performance patterns, or potential problems that affect more than one department of the college. It also allows the information gathered to be used in performance evaluations and subsequent improvement planning.

Self-evaluation processes

Periodic Self-evaluation of the program will be conducted every three years with the establishment of a main steering committee and sub-steering committees by the college dean with defined responsibilities. The final report will be prepared by the QAAU and submitted to the NCAAA through college dean and DQAA at the University.

Course Report: All course coordinators are required to submit a course report at the end of each semester using the official NCAAA template. The report should include a summary of course delivery, analysis of student performance, feedback from course evaluation surveys, and any issues or challenges encountered. It should also include action plans to address identified issues and improve course quality.

Review and Approval Process:

- The completed course report is first reviewed by the Department Quality Coordinator to ensure quality and completeness.
- It is then submitted to the Head of Department (HOD) for formal approval.

- Once approved, the report is forwarded to the Vice Dean for Academic Affairs (VDAA) and the Quality Assurance and Accreditation Unit (QAAU). All course reports are uploaded to the online OneDrive link for each department (for the process details, refer to the College Quality Management System Manual)

Roles and Responsibilities

The QAAU, in collaboration with the Vice Dean for Academic Affairs and HODs, is responsible for ensuring the effective use of course reports in quality improvement. Responsibilities include:

QAAU:

- Reviews all submitted course reports for alignment with quality standards and program outcomes.
- Monitors the implementation of approved action plans.
- Coordinates with relevant administrative units to support the execution of action plans, including facilitating access to required resources.

Heads of Departments (HODs):

- Ensure the implementation of action plans within their departments.
- Prepare and submit progress reports on the status of action plans to the QAAU in a timely manner.

Annual Program Report (APR): The QAAU in collaboration with the VDCP, VDAA, Vice Dean for Research and Innovation and the Vice Dean for Clinical Affairs, all heads of departments will prepare an annual program report following NCAAA guidelines and template at the end of each academic year and submit it to the VDCP, who will present to the College Council for discussion and approval. The Dean assigns responsibility for monitoring program quality to the appropriate Vice Deans and their respective units and committees. These entities are tasked with implementing and tracking the action plans outlined in the APR and monitoring the associated KPIs. The QAAU oversees the overall implementation of the action plans and regularly requests progress reports to ensure timely and effective follow-up.

Annual Committee Report: All functional committees of the College are required to submit an annual report using the designated template. The report must include a section on identified areas for improvement, along with proposed action plans. Each committee submits its report to the VDCP, who forwards it to the QAAU for incorporation into the APR. The VDCP also prepares a consolidated summary of committee activities, highlighting recommended improvements and corresponding action plans, and submits it to the College Dean and Faculty Board for review and discussion.

Faculty and staff self-evaluation: All faculty and staff are required to self-assess their performance and to submit this to their departmental heads (via the university electronic system) for further evaluation and actions if needed.

Quality evaluation surveys

- All survey results which indicate the need for improvements should be monitored by the QAAU in coordination with the departmental head concerned.
- An action plan should be drawn up by the applicable departmental head to address the indicated areas for improvement.
- This action plan will be submitted to the QAAU to monitor the implementation and progress of the action plan.
- The results of the anticipated changes will be submitted to the QAAU for verification of the impact of the expected improvements.

- Reports on other surveys, i.e. alumni and employers, will be submitted to the college Dean and VDAA by VDCP and improvement actions will be developed and implemented based on the feedback.
- Progress reports on improvement action plans are prepared by the respective responsible units. For example, progress reports related to course evaluation surveys are prepared by HODs and submitted to the QAAU. Similarly, progress reports on academic affairs-related action plans are prepared by the VDAA, while those related to research or clinical training are prepared by the respective Vice Deans or unit heads. All such reports are submitted to the QAAU for monitoring and follow-up, and a consolidated annual report summarizing the progress of all improvement action plans is compiled by the VDCP and submitted to the Dean for information and approval.

Monitoring of Key Performance Indicators (KPIs) and Performance Indicators of the college strategic plan

The VDCP will monitor results of KPIs for program and performance indicators for the strategic plan in coordination with the concerned departments/committees on a regular basis and submit an annual progress report to the college Dean and the respective departmental heads for their review and feedback.

External Reviews

The reports and recommendations by the external reviewers are submitted to the Dean. The Dean forwards and carefully reviews the report with the VDCP. The recommendations for improvement are assigned to different committees for developing action plans to accomplish these recommendations. These action plans are implemented through Dean's office and VDCP is given responsibility to work closely with the committees, monitor and prepare annual report for accomplishments and submit it to Dean.

III. Record keeping

A record of all quality assurance activities (electronic and paper based as the case maybe) will be maintained by the QAAU. Any request for the release of confidential information will require approval by the College Dean.

For comprehensive information on quality assurance practices and procedures, please refer to the College of Pharmacy Quality Management System Manual.

Policy and Procedures for Periodic Program Review

 <p style="margin: 0;">جامعة الإمام عبد الرحمن بن فيصل IMAM ABDULRAHMAN BIN FAISAL UNIVERSITY كلية الصيدلة College of Pharmacy</p>	
Policy Title:	Policy and Procedures for Periodic Program Review
Policy Code:	COP-DC-003
Date of Initial Approval:	May 2016
Date of Last Review:	January 2025
Next Review Data:	January 2028
Approved by:	College Council
Responsible Office:	Vice Deanship of Development and Community Partnership

Purpose

The purpose of this policy is to establish a structured and systematic process for the Periodic Program Review (PPR) of the academic programs offered by the College of Pharmacy (COP). The PPR is intended to assess and enhance the quality, relevance, and effectiveness of academic programs, and to ensure alignment with the mission, goals, and strategic plan of Imam Abdulrahman Bin Faisal University (IAU), national and international accreditation standards.

Scope

This policy applies to all undergraduate and postgraduate academic programs delivered by the College of Pharmacy.

Policy Statement

1. All academic programs shall undergo a comprehensive program review on a five-year cycle to ensure continued academic excellence and compliance with national/international and institutional standards.
2. The PPR is an evidence-based, faculty-led process supported by internal and external academic peer reviewers.
3. A program review may be initiated earlier if required for professional accreditation or by the College Dean.
4. The PPR process will be aligned with the standards of the National Center for Academic Accreditation and Evaluation (NCAAA) and the National Qualifications Framework (NQF). Additionally, it will take into consideration relevant international accreditation standards, such as those of the Accreditation Council for Pharmacy Education (ACPE), where applicable.
5. Each PPR will include three main components:
 - Program Self-Study
 - Peer Review
 - Action and Enhancement Plan

Oversight and Responsibility**1. Dean of the College**

- Provides overall leadership and approves all stages of the PPR process.

2. Vice Dean for Development and Community Partnership (VDCP)

- Coordinates with the Deanship of Quality and Academic Accreditation (DQAA) to schedule and manage the PPR cycle.
- Monitors the progress and implementation of the action plans post-review.

3. PPR Steering Committee

- Composed of faculty with expertise in the program and quality assurance.
- Oversees the preparation of the self-study and coordinates with peer reviewers.

4. Department Heads and Faculty

- Support data collection and participate in self-study preparation and implementation of improvement plans.

Procedure

1. Initiation and Planning

- The Dean and VDCP initiate the PPR by appointing a PPR Steering Committee and a Principal Lead.
- A master review schedule is developed in alignment with accreditation timelines.

2. Program Self-Study

The Steering Committee compiles a comprehensive self-study report including:

- Program specification and Annual Program Reports.
- Course specifications and reports.
- Self-Evaluation Scales (SES) results.
- Previous accreditation reports and action plans.
- Assessment reports of Program Learning Outcomes (PLOs) and Course Learning Outcomes (CLOs).
- KPI reports and trend analysis.
- Stakeholder survey results (students, alumni, employers, faculty).
- Program handbooks, manuals, and governance structure.
- Faculty CVs.
- Samples of student work.
- Strategic alignment with IAU's mission and goals.

3. Peer Review Phase

- A team of qualified peer reviewers, including external academics, is appointed.
- Reviewers assess the submitted materials and may conduct site visits (in-person or virtual).
- The Preliminary Peer Review Report is submitted to the College Dean, identifying:
 - Strengths and good practices.
 - Areas for development.
 - Gaps in alignment with accreditation standards.
- The Dean and Department Heads may provide factual clarifications and supporting evidence.
- Reviewers revise the report as needed and submit a Final Peer Review Report.

4. Follow-Up and Improvement Planning

- The Steering Committee develops a formal response to each recommendation in the peer review report.
- A Program Enhancement Plan is created and approved by the VDCP and Dean. It includes:
 - Improvement strategies and specific actions.

- Timeline for implementation.
- Responsible persons or units.
- Required resources and estimated costs.
- Key performance indicators (KPIs) for tracking progress.
- The VDCP oversees the implementation and monitors progress through periodic reports.
- All final reports, action plans, and progress updates are submitted to the College Council for review and forwarded to the appropriate Vice President of the university.

Confidentiality

All internal and external reviewers are required to maintain the confidentiality of all materials and findings. Any sensitive content may be marked as confidential and shared only with designated university authorities.

Integration with Accreditation

The PPR process is designed to meet or exceed the requirements of national and international accreditation bodies, including:

- NCAA program standards.
- National Qualifications Framework (NQF).
- ACPE (for PharmD program if applicable).

When applicable, the PPR may be merged with preparations for reaccreditation.

The final goal of the PPR is not only to evaluate current program quality but also to produce a forward-looking improvement plan that:

- Strengthens academic quality.
- Enhances student learning outcomes.
- Aligns with institutional strategic objectives.
- Prepares the program for continued accreditation and growth.

Policy and Procedure for Creating New Policies and Reviewing Existing Policies

 <p style="text-align: center;">جامعة الإمام عبد الرحمن بن فيصل IMAM ABDULRAHMAN BIN FAISAL UNIVERSITY كلية الصيدلة College of Pharmacy</p>	
Policy Title:	Policy and Procedure for Creating New Policies and Reviewing Existing Policies
Policy Code:	COP-DC-004
Date of Initial Approval:	May 2020
Date of Last Review:	January 2025
Next Review Data:	January 2028
Approved by:	College Council
Responsible Office:	Vice Deanship of Development and Community Partnership

Purpose and Scope

This policy establishes a formal and standardized process for developing new policies and reviewing existing ones within the College of Pharmacy (COP) at Imam Abdulrahman Bin Faisal University (IAU). The aim is to ensure that all college-level policies:

- Comply with institutional, legal, and professional standards
- Are developed collaboratively with relevant stakeholders
- Support the College's mission and strategic priorities
- Promote clarity, consistency, and accountability in operations

This policy applies to all units, departments, faculty, staff, and students involved in policy development and implementation within the College.

Policy Development Process

A. Policy Proposals

- Any member of the College (i.e., faculty, staff, students, or administrative units) may propose a new policy or suggest changes to an existing policy.
- Proposals must be submitted in writing using the *Policy Proposal Form* (Refer to the Annex at the end of this policy) and must include:
 - A clear statement of the issue or need
 - Intended purpose and outcomes
 - Impact on stakeholders and existing policies
 - Any regulatory or ethical considerations

B. Initial Review

- The Vice Dean for Development and Community Partnership (VDCP) will evaluate submitted proposals.
- If provisionally accepted, the VDCP will appoint a Policy Drafting Task Force, including representatives from relevant departments and vice deanships, to develop the draft policy.

C. Drafting and Benchmarking

- The Task Force will:
 - Draft the policy in line with institutional regulations, national standards, and best practices
 - Benchmark against policies from similar colleges or universities
 - Ensure clarity, feasibility, and alignment with the College's strategic goals

D. Stakeholder Feedback

- The draft policy will be shared with relevant stakeholders for review and input over a period of at least two weeks.
- Feedback may be solicited through meetings, email correspondence, or surveys.
- The Task Force will consider and incorporate appropriate feedback into the final draft.

E. Final Approval and Dissemination

- The final draft will be submitted to the College Board for formal review and approval.
- Once approved:
 - The policy will be published on official College platforms
 - All affected stakeholders will be notified
 - The policy will be added to the College Policy and Procedure Manual

Policy Review Process**A. Regular Review**

- All college policies must undergo a comprehensive review every three years from the date of approval.
- The Dean will appoint a Policy Review Task Force for each policy under review.
- The review will ensure:
 - Continued relevance and effectiveness
 - Compliance with updated university and external regulations
 - Alignment with strategic developments and emerging needs

B. Ad-Hoc Review

- A policy may be reviewed outside of its regular cycle upon the recommendation of the VDCP due to:
 - Changes in institutional or accreditation standards
 - Emerging internal issues or external events
 - Legal, regulatory, or strategic updates
- The ad-hoc review follows the same process as the regular review.

Amendments and Updates

- Any revisions or amendments resulting from a review must be approved by the College Board.
- Once approved:
 - The updated policy version will replace the prior one
 - A new review date will be assigned
 - The revised policy will be disseminated and included in the College's official policy manual

Roles and Responsibilities

- **Dean:** Final approval of all new and revised policies
- **VDCP:** Oversight of the policy development and review process
- **Policy Drafting Task Force:** Develop and revise policy content; collect and incorporate stakeholder input
- **Policy Review Task Force:** Conduct periodic or ad-hoc reviews and recommend changes

Confidentiality

All individuals involved in policy development or review are expected to maintain confidentiality regarding draft content and stakeholder input until final approval is obtained.

Annex: New Policy Proposal Form

A. Personal Information

- **Name:**
- **Position/Status:** *(If student, specify year of study)*

B. Background and Rationale

1. Describe the issue or need for the proposed policy.
2. Is this a new policy or a revision of an existing one?
3. How does this proposal relate to existing policies?
4. Are there any legal, ethical, or regulatory implications?

C. Overview of the Proposed Policy

1. Summarize the policy's purpose and key principles.
2. Outline suggested procedures or implementation steps.

D. Stakeholder Analysis

1. List stakeholders with subject-matter expertise relevant to this policy.
2. Identify groups most affected by the policy (e.g., students, faculty, departments).

Community Service Policy and Procedure

 <p style="margin: 0;">جامعة الإمام عبد الرحمن بن فيصل IMAM ABDULRAHMAN BIN FAISAL UNIVERSITY كلية الصيدلة College of Pharmacy</p>	
Policy Title:	Community Service Policy and Procedure
Policy Code:	COP-DC-005
Date of Initial Approval:	May 2017
Date of Last Review:	January 2025
Next Review Data:	January 2028
Approved by:	College Council
Responsible Office:	Vice Deanship of Development and Community Partnership

Purpose

This policy outlines the framework for planning, organizing, executing, and documenting community service activities at the College of Pharmacy (COP). It aims to reinforce the College's mission of social responsibility by engaging faculty, students, and staff in meaningful community outreach initiatives.

Scope

This policy applies to all members of the COP community, including faculty members, teaching staff, interns, students, administrative staff, and support personnel.

Policy Statement

Community service is a core pillar of the College's mission, alongside teaching & learning and research. Through its community engagement, the COP at Imam Abdulrahman Bin Faisal University (IAU) seeks to improve public health, enhance social wellbeing, and contribute to the development of the Eastern Province and beyond. To support these efforts, the Community Service Unit (CSU) operates under the supervision of the Vice Dean for Development and Community Partnership (VDCP), coordinating all college-level community service initiatives.

Definitions

- **Community Service:** Non-remunerated activities performed for the benefit of the community, either voluntarily or as part of academic requirements.
- **Volunteerism:** The act of willingly offering time, skills, and efforts to serve the community without compensation.
- **Volunteer:** An individual who offers services willingly and without financial gain for mutual community and personal benefit.

Responsibilities

Vice Dean for Development and Community Partnership

- Implement and monitor this policy.
- Supervise all community service activities conducted by the College.

Director, CSU

- Develop the annual community service plan.
- Coordinate and facilitate activities in alignment with college goals.
- Maintain comprehensive records and prepare the annual report.
- Motivate college members to engage in volunteering.

Vice Dean for Academic Affairs

- Integrate approved community service activities within the academic load of faculty and teaching staff.

Vice Dean for Clinical Affairs

- Ensure logistical support and a safe working environment for volunteers.

Department Chairs

- Monitor and support departmental involvement in community service.
- Promote faculty participation and compliance with this policy.

Faculty and Teaching Staff

- Initiate or support community service activities aligned with their teaching or research.
- Act as role models and mentors to student volunteers.
- Comply with volunteerism regulations.

Students and Interns

- Participate in community service activities organized by CSU.
- Comply with CSU guidelines and instructions.

Policy Provisions

1. In accordance with the Higher Education Council's Rules and Regulations, community service is a formal mandate of universities and an integral component of academic life.
2. Faculty contributions to community service are recognized in annual evaluations and considered in promotions (Articles 25, 27 & 38 – Faculty Affairs, KSA).
3. The College fosters student engagement in community-based activities as a means of developing civic responsibility and practical exposure.
4. An Outstanding Community Service Award will be granted annually to distinguished faculty members and students to recognize their contributions.
5. The College encourages collaborative relationships with other university entities, healthcare providers, industries, and community institutions to enhance outreach efforts.

Volunteer Rights**Volunteers have the right to:**

- Receive full information about their role and activity details.
- Know the timing and duration of events in advance.
- Be assured of safety and suitability of the activity location.
- Receive an official certificate detailing their service hours.

Volunteer Regulations

All volunteers must:

1. Understand and uphold the values and goals of the University and College.
2. Represent the College positively in all community interactions.
3. Obtain CSU approval before initiating any activity or communication with external organizations.
4. Show mutual respect and professionalism at all times.
5. Attend all orientation and planning meetings related to assigned activities.
6. Notify the CSU in a timely manner in case of absence or withdrawal.
7. Comply with host site rules and safety, medical, and infection control guidelines.

Procedures for Organizing Community Service Activities

1. Planning:

- CSU develops an annual calendar in coordination with relevant departments.
- Activities may be curricular or extracurricular and should address local health and social needs.

2. Coordination:

- CSU works closely with Academic Affairs, Internship Program, and relevant departments.
- Activities include awareness campaigns, medication counselling, health education, chronic disease screening (e.g., hypertension, diabetes), rational drug use promotion, and pharmaceutical care services targeting special populations such as elderly patients, individuals with chronic conditions, and children with special needs.

3. Recruitment:

- Opportunities are announced via mass email with a registration link.
- Volunteers are selected on a first-come, first-served basis, with preference given to those with fewer previous participations.

4. Team Formation:

- Team leaders are chosen based on experience and prior service.
- Leaders and team members are informed via email with details and instructions.

5. Documentation:

- CSU maintains a digital database of all events, participants, and beneficiaries. In addition, all events are electronically recorded on the IAU Social Responsibility Bank and at the National Volunteerism Website.
- Community service hours are tracked and certificates issued annually upon request.

Monitoring and Evaluation

- The CSU submits an annual report detailing activities, participation levels, and outcomes to the Vice Dean for Development and Community Partnership.
- Regular feedback is collected from participants and host entities to improve future activities.

Academic Affairs

Policy and Procedure for Students' Admission



جامعة الإمام عبد الرحمن بن فيصل
IMAM ABDULRAHMAN BIN FAISAL UNIVERSITY
 كلية الصيدلة | College of Pharmacy

Policy Title: Policy and procedure for students' admission

Policy Code: COP-AA-001

Date of Initial Approval: August 2013

Date of Last Review: January 2025

Next Review Data: January 2028

Approved by: College Council

Responsible Office: Vice Deanship of Academic Affairs

Purpose

This Policy and Procedure aims to facilitate students with all administrative aspects of their application & study at the College of Pharmacy.

Scope

This procedure is applicable to new applicants/students for the PharmD program.

References:

Board of Higher Education

Responsibility

- University Board.
- Deanship of Admission & Registration.
- Dean, College of Pharmacy.
- Vice Dean for Academic Affairs.

Procedure

Based upon the recommendation received from the College Board, and, the other concerned bodies of the University, the University Board determines the number of new students to be admitted in the following academic year.

Eligibility criteria

All students must fulfil the following criteria to be considered for the selection process:

- Students pass all courses provided in the preparatory year program.
- Earn a GPA of at least 3.0 in the preparatory year.
- Score an average of at least C in General English Language in the preparatory year program.
- Score an average of at least C in Chemistry in the preparatory year program.
- Score an average of at least C in General Biology in the preparatory year program.
- Score an average of at least C in Physics in the preparatory year program
- Has a record of good conduct.
- Successfully pass any examination or personal interviews as determined by the University Board.
- Be physically fit.
- Satisfy any other conditions the University Board may deem necessary at the time of application.

Admission Requirements for the Health Cluster

- The student shall be Saudi, or of a Saudi mother.
- He/she should have obtained the Saudi high school certificate or its equivalent in the current year or the previous year.
- The student should have applied for the general abilities and grades exams organized by the National Center for Assessment in Education.
- The student should pass the professional fitness test of the university hospital in Khobar.

- The student should not have a current or former student record at the IAU.
- The student should not have been enrolled or admitted to another Saudi university.

Admission to the Preparatory Year

- Students get admission into the preparatory year based on the cumulative score (IAU score) comprising Grade Point Average (GPA) of high school, General Aptitude Test (GAT) and Scholastic Assessment Test (SAT) exam in which the weightage for each of these is 30, 30 and 40 percent, respectively.
- Students have an option at this stage to choose between scientific track and literature track. The number of students is basically a cumulative sum of what is proposed by each individual college within the health track.
- Relevant information related with this is made available to the students and their parents in the form of printed brochures, all the required details are also made available on the university portal, which the students can easily access at: <https://admit.iau.edu.sa>.
- After completion of the preparatory year in health track, the students can obtain admission into any of the following health related fields i.e. Medicine, Dentistry, Pharmacy, Nursing, Applied Medical Sciences and Public Health, depending upon their academic merit.
- After completing the preparatory year, students will have a chance to select a college. However, priority is given to students based on their GPA and academic credentials. With respect to transfer and visiting students, they may be allowed to study the PharmD Program at the discretion of the College and the Office of Admission and Registration.
- The admission into respective colleges is done by the Deanship of Admission and Registration (DAR) in coordination with the respective college along with the final approval of the university Board.

Filling the Electronic Form

1. For filling in the electronic admission form, the University requires that all male and female students sit for the general abilities and grade exams of all programs.
2. The admission form is to be filled in as per the instructions specified in the electronic admission portal of IAU and according to the following sequence:
 - 2.1 Enter ID number, which is the username, as follows:
 - Saudi applicants should enter numbers of their Civil Affairs documents.
 - Applicant from a Saudi mother only should enter the number of his/her valid residence permit.
 - Applicants who have Five-year card should enter the number of their valid residence permits or their computer numbers registered in the Ministry of Interior. If they are nominated for admission, then the nomination will be submitted for the Ministry of Education for final approval.
 - 2.2 The applicant should complete all required data, including determination of desires:
 - Admission for the health, engineering and science clusters will be in the programs of the preparatory year in accordance to the clusters specified for each of them.

- Admission for the two colleges of Nursing and Public Health will be under the name of “Health Cluster for the Colleges of Nursing and Public Health”.
- Admission for the remaining colleges of health (Medicine, Dentistry, Applied Medical Science, and Pharmacy) will be within a cluster named “Cluster of the Remaining Health Colleges”.

2.3 To apply candidate should access the web page: *submit new application*

Post Nomination Procedure

Upon nomination for admission, the applicant should access the system and follow the hereunder mentioned steps:

- Agree on the undertaking that he/she has not been admitted to another university.
- Agree on the undertaking that IAU has the right to cancel the admission application if it is proved that the applicant is already admitted to another university.
- Fill in the required personal and other data.
- Agree on the undertaking of completing all admission requirements of IAU. This means you have booked your seat in IAU and your case will be updated in the database of the Ministry of Education.
- Agree on the electronic undertaking.
- Print out the admission notice, which includes the professional fitness test of the health cluster.
- The age of students from Saudi mothers should be in the range of 17-25 years and they should submit through the admission review system a PDF copy of a valid residence permit + a copy of the birth certificate within maximum 24 hours from completing the application

Admission Cancellation

Admission will be cancelled in case of providing false information in the application form or noncompliance with the admission terms and conditions.

Withdrawal from Admission

The student admitted to College of Pharmacy at IAU may withdraw from admission within the specified period by accessing his/her account on the admission system and agree on the withdrawal undertaking. Then he/she could print out the signed and stamped discharge form. The student does need to come personally to the University campus for further procedures.

General Provision

- Applying for admission should be in the specified period.
- The admission application should be through the admission portal in the university website: www.iau.edu.sa
- It is not allowed to apply for admission to the University beyond the specified period, nor through any way other than the University's website.

- All the required data shall be entered, and the student can edit mistakes in the secondary grades or capacity or the final exam by accessing the admission review system in the portal of electronic admission.
- Students have six admission opportunities, so they should carefully prioritize their interests (first interest should be on top and the last interest should be on the bottom). students can enter less than six opportunities, according to their interest.
- Students should make sure that interests are listed according to priority because this order of arrangement would be «final» after the end of the submission period, according to the planned time.

Stage of Result Announcement

- Applicants for the university in the past years were five times the capacity of the university. Therefore, the student's nomination for admission is subject to a competition based on a differentiation of percentages that come out of the following equation:
 - 30% of the cumulative average for the secondary school certificate +30% of the capacity exam +40% of final exam.
- Communication between students and the university is through the university website. To know the latest news students must regularly access the University's website.
- If there are any queries, students can ask through the admission system or communicate with direct support.
- Upon nomination for admission of any batch, students should complete the electronic admission procedures and then print admission notice procedures to avoid cancellation of admission. No need to send documents via Express Mail.
- If nomination for admission is less than the first interest and you end electronic admission procedures during the specified period, the system will automatically enlist you in the upper interests in all coming batches. No need to activate application.
- All admission procedures are conducted electronically; therefore, the nomination of admission does not need to send a certificate via EMS.
- Communication between the university and the student is conducted electronically through the admission review system and direct support.

Policy and Procedure for New Students' Orientation

 <p style="margin: 0;">جامعة الإمام عبد الرحمن بن فيصل IMAM ABDULRAHMAN BIN FAISAL UNIVERSITY كلية الصيدلة College of Pharmacy</p>	
Policy Title:	Policy and procedure for new students' orientation
Policy Code:	COP-AA-002
Date of Initial Approval:	May 2016
Date of Last Review:	January 2025
Next Review Data:	January 2028
Approved by:	College Council
Responsible Office:	Vice Deanship of Academic Affairs

Purpose:

The purpose of the new students' orientation policy is to establish an orientation program for the new students that describes the College and University's policies and procedures, rules and regulations and expectations to enhance the student's experience.

Scope:

All new students admitted to the College of Pharmacy.

Responsibility:

- Vice Dean for Academic Affairs: responsible for effective execution of the orientation program at the College.
- Departmental Heads: responsible for providing information about courses of their department.
- Dean of Student Affairs-IAU: will have the responsibility of introducing new students to the university activities and student clubs.
- Dean of Admission and Registration Deanship-IAU: will have the responsibility of defining services offered by the deanship.
- Dean of Library Affairs-IAU: will have the responsibility of introducing new students to the library services.
- Director of Information Technology Center-IAU: will have the responsibility of introducing new students to the Information Technology Services for students or the IT system used in the college.
- Director of Center for Student Counseling and Guidance-IAU: will have the responsibility of explaining the students' need for counseling, counseling procedures and services rendered by the counseling center of the University.

Procedure:

1. Prior to the commencement of a course, students will attend an orientation program designed to assist them with their transition to study in the college.
2. The orientation program is conducted through a series of short seminars presented by key staff of the Institutions. These seminars will cover course-related matters, key policies and procedures, IT services, administrative matters, student services, library and learning services and a tour of campus facilities.
3. Students will be provided with a comprehensive student orientation package that includes all the required administrative and organizational information and documentation relating to the student's enrollment.
4. The orientation program also provides an opportunity for students to meet other students and the staff of the Institutions.
5. Orientation is compulsory and students who do not attend will be required to make contact with the Vice Dean for Academic Affairs to make arrangements for an alternative orientation session.

Policy and Procedure for Program Delivery



جامعة الإمام عبد الرحمن بن فيصل
IMAM ABDULRAHMAN BIN FAISAL UNIVERSITY
 كلية الصيدلة | College of Pharmacy

Policy Title: Policy and procedure for program delivery

Policy Code: COP-AA-003

Date of Initial Approval: May 2016

Date of Last Review: January 2025

Next Review Data: January 2028

Approved by: College Council

Responsible Office: Vice Deanship of Academic Affairs

Purpose:

The policy for program delivery is to ensure awareness of program and curricular specifications/ learning objectives to the department chairs, faculty, and students and to communicate any changes in a timely manner. The academic affairs and the departmental chairs will make sure that that course learning outcomes (CLOs) are consistent with the program learning outcomes (PLOs) and National Qualification Framework (NQF).

Scope:

The policy applies to the College of Pharmacy PharmD Program

Reference:

NCAAA standards, Program Specification

Responsibility:

- Vice Dean for Academic Affairs
- Vice Dean for quality and development
- Department Chairs

It is the responsibility of each Department Chair to ensure that the department's faculty is:

- Aware of program specifications and PLOs
- Familiar with the necessary requirements for a student to graduate
- Familiar with NQF and National Center for Academic Accreditation and Evaluation (NCAAA) formats for course portfolio, course specifications, and course reports.
- Course coordinators, who should be familiar with the following:
 - Teaching methodologies at the College.
 - Policies and procedures implemented in the College and particularly those related to Academic Affairs.

Procedure:**A. Scheduling of Courses**

The courses are scheduled in two semesters

1. Vice Dean for Academic Affairs (VDAA) with the Academic Scheduling Committee (ASC) will prepare the list of courses for each semester and incorporate them into the teaching schedule.
2. VDAA will forward the tentative teaching schedule to department chairs for review and suggestions and then finalization by the VDAA.
3. The agreed and approved teaching schedule will be signed by the VDAA and posted to all faculty, staff, and students.
4. A copy of the teaching schedule will be sent to the college registrar to upload it on the PeopleSoft.

B. Selection of Course Coordinators and Students' Academic Advisors

1. Course Coordinators are nominated by each department chair and are approved by the department board.
2. The Course Coordinator has the following duties:
 - Preparation of the course specification as outlined by NCAAA.
 - Align course specifications and learning outcomes with those of the program and NQF.

- Discuss course specifications with the faculty and staff that are involved in teaching the course and get approval by the departmental board well before the academic year begins.
 - Monitor the course throughout the semester to ensure that all of the learning outcomes are being achieved.
 - Provide the approved course specification and the final course report to the Vice Dean for Academic Affairs through departmental chair at the conclusion of course. The VDAA will forward it to the office of the Vice Deanship for Development and Community Partnership (VDCP).
 - Timely report cases of students' academic difficulty to the respective student advisors.
 - Preparation of the course report at the end of each semester.
 - Developing the necessary action plans based on students' feedback and recent update in the field after discussing them with all instructors involved in teaching the course. These action plans have to be approved by the department Board and documented in the course report.
 - Preparation of the course portfolio according to the checklist proved by the Quality Management and Academic Accreditation Unit (QAAU) at COP.
 - Uploading students marks on the Students Information System (SIS) throughout the semester and posting final results at the end of each academic semester after being approved by the department board, VDAA and the College Board.
3. Student Academic Advisors are nominated by the Academic Advising and Student Support Unit (ASU) and approved by the VDAA. Their responsibilities and duties are outlined in the college's policy on academic advising and counseling.

C. Course Specification

1. The course coordinator prepares the Course Specification at the beginning of the semester.
2. After the final examination, the completed course portfolio should be submitted to the department chair for review and approval.
3. The original course specification is to be maintained in the department, with a copy filed with the office of the VDCP.
4. The course coordinator updates the course specification with new teaching material and documents during each semester in which the course is offered.
5. While updating the course specification, all additions or deletions must be mentioned therein with proper justifications.

D. Registration

1. The Deanship for Registration and Admission at the IAU announces the dates for course registration.
2. After consulting with their academic advisors, students will make online registration for the desired courses.
3. Students may withdraw from any registered course before the specified date by the Deanship of Admissions and Registration for that particular semester, provided that their total number of remaining credit hours is not less than 12.
4. Students may drop the whole semester before the specified date by the Deanship of Admissions and Registration for that particular semester.

E. Scheduling of Examinations

1. The Scheduling will prepare a preliminary draft of the schedule of assessments, including continuous assessments and final examinations.

2. The VDAA will propose the examination schedule and will solicit feedback from the students' class leaders regarding the examination schedule draft.
3. Department Chairs will also provide feedback regarding the proposed schedule.
4. The scheduling committee will consider the feedback and the suggested changes and modify the schedule as appropriate.
5. The VDAA will publish the final version of the assessment schedule.

F. Announcement of Course Grades

1. Course coordinator:
 - Notifies students of grades earned in the continuous assessments within 7-10 days following the exam.
 - After the grades are released, students are provided with feedback regarding their performance.
 - Final exam grades and final course grades cannot be announced to students until they have been formally approved by the Department Board and the College Board.
 - He/she will upload the final students' grades on PeopleSoft.
2. Department Chairs:
 - He/she will approve the final students' grades on PeopleSoft after being approved by the department board.
3. Vice Dean for Academic Affairs:
 - She/he will approve the final students' grades on PeopleSoft after being approved in the College Board.
 - Then she/he will announce the final grades to students on PeopleSoft.
 - An identical process is followed for the finalization and announcement of grades for continuous assessments.

G. Monitoring and Evaluation

The delivery of courses and program is monitored through various mechanisms. These include but are not limited to the following:

1. Annual Program Report

The Vice Deanship for Development and Community Partnership in collaboration with the Vice Deanship for Academic Affairs prepares the annual program report (APR) using the NCAAA template and submits it to the College Board for review and approval. The VDCP monitors the suggested improvement action plans.

The APR has to be prepared at the end of each academic year but no later than six weeks after the start of the following academic year.

2. Course Report

All course coordinators will prepare a course report, for both male and female students, using the NCAAA template that includes an evaluation of the course and any suggestions for improvement. All course reports will be revised by the head of department and by the department quality members, finally course reports will be submitted to the VDAA and VDCP as described under the process of course report approval.

The course report has to be prepared at the end of each semester, but no later than 4 weeks of the beginning of the following semester. The course report is to be included in the course portfolio.

3. Quality Evaluation Surveys

The VDCP at the College, in collaboration and the Deanship of Quality and Academic Accreditation (DQAA) at the university, will conduct a series of student surveys to assess the quality of the program and collect their feedback. These surveys include:

- Course Evaluation Survey (CES)
- Program Evaluation Survey (PES)
- Student Experience Survey (SES)
- Student Survey of Lecturing Skills (SSLS)
- Library User Satisfaction Survey (LUS)
- Student Survey on Academic Advising (SSAA)
- Internship Satisfaction Survey (ISS)
- Alumni Survey (ALS)
- Employer satisfaction survey (ESS)
- Program learning outcomes survey

The results of these surveys are analyzed by the Quality Management and Academic Accreditation Unit (QAAU) and subsequently forwarded to the VDCP for review. Following this, the findings are submitted to the College Dean, Vice Deans, Department Heads, and relevant course coordinators to inform them, collect feedback, and facilitate the development of action plans aimed at enhancing the quality of courses and academic programs. All proposed action plans are documented in the respective course reports and the APR.

4. Self-Evaluation study

COP self-evaluates its performance against the NCAAA practices using the NCAAA self-evaluation scales template. The main steering committee and sub-committees are structured, and areas of strengths and weakness are determined. Accordingly, action plans are developed. This process is to be repeated every three years.

5. Developing key performance indicators and benchmarking

The COP developed key performance indicators (KPIs) extracted from the NCAAA and university KPIs. In addition, the college developed its own KPIs to monitor all aspects of the program such as achieving program goals and objectives, mission and learning outcomes. A report about the KPIs is prepared annually by the VDCP and attached to the annual program report. Moreover, the COP compares its performance against internal and external benchmarking.

Policy and Procedures for Major and Minor Changes in Course Specifications



جامعة الإمام عبد الرحمن بن فيصل
IMAM ABDULRAHMAN BIN FAISAL UNIVERSITY
 كلية الصيدلة | College of Pharmacy

Policy Title:	Policy and Procedures for Major and Minor Changes in Course Specifications
Policy Code:	COP-AA-004
Date of Initial Approval:	May 2016
Date of Last Review:	September 2024
Next Review Data:	September 2027
Approved by:	College Council
Responsible Office:	Vice Deanship of Academic Affairs

1. Purpose

This document provides clear guidelines for all faculty members on how to classify and conduct changes to course specifications within the PharmD program study plan. These guidelines are in accordance with Imam Abdulrahman Bin Faisal University's Regulation Manual on Developing and Reviewing Academic Programs. The goal is to ensure consistency, proper documentation, and compliance with both internal academic policies and external accreditation standards.

2. Scope

This policy applies to all courses within the PharmD program. It is intended for use by course coordinators, department heads, curriculum committee members, and quality assurance teams involved in curriculum development and review.

3. Definitions

- **Major Change:** Any modification that affects the core structure, credit load, or official status of the course within the study plan.
- **Minor Change:** Any adjustment made to improve clarity, update information, or fine-tune teaching and assessment methods without altering the core framework of the course.

4. Classification of Changes

A. Major Changes

Major changes require prior approval from the Department Council and the College Curriculum Committee, in consultation with the Quality Management and Academic Accreditation Unit. They must also be documented and reported to the College Council and subsequently submitted to the University Standing Committee for Study Plans and Programs. These changes include:

1. Change in course title or course code.
2. Change in credit hours (increase or decrease).
3. Addition or removal of a pre-requisite.
4. Addition of a new course or removal of an existing course from the study plan.
5. Change in course level/year in the program.
6. Change in course status (e.g., from elective to compulsory or vice versa).
7. Modifying intended learning outcomes in a way that changes their domain or cognitive level (e.g., shifting an outcome from the knowledge domain to skills, or changing the Bloom's taxonomy level).
8. Significant changes in course content or structure: This includes major updates that change the course's overall direction or purpose. Examples include merging two courses into one, splitting

one course into several parts, adding new topics or modules that shift the course's focus, or removing key content and replacing it with entirely different material

9. Change in teaching modality (e.g., from face-to-face to online or blended learning).
10. Change in the nature of assessments (e.g., replacing final exams with project-based evaluation).
11. Transfer of a course to or from another department.

B. Minor Changes

Minor changes should be approved by the Department Council, followed by the Curriculum Committee, in consultation with the Quality Management and Academic Accreditation Unit. These changes include:

1. Editing or re-wording course descriptions or learning outcomes for clarity.
2. Updating course references or textbooks.
3. Adjusting weekly lecture schedules or teaching hours without changing total contact hours.
4. Refining or rearranging intended learning outcomes (without altering the domain or level).
5. Rebalancing assessment weights (e.g., from 10% quiz to 5% quiz and 5% participation) or introducing a new assessment tool.
6. Updating the course coordinator or faculty members delivering the course.
7. Enhancing teaching or learning methods (e.g., incorporating case studies or flipped learning techniques).
8. Enhancing student support mechanisms (e.g., additional office hours, supplementary resources).
9. Adopting new textbooks, multimedia resources, or digital tools.
10. Adopting an updated NCAAA course specification template, provided that the learning outcome domains remain unchanged.

5. Implementation Process

A. Major Changes

- The course coordinator is responsible for completing the [Course Change Tracking Form](#), ensuring all required details are provided, including a clear description of the proposed change, its rationale, and the anticipated impact on the course and its students, in accordance with the instructions outlined in the form.
- The completed form is submitted to the Department Council for initial review and approval.
- The proposal is forwarded to the Quality Management and Academic Accreditation Unit (QMAAU) to ensure compliance with quality standards and accreditation requirements. Feedback or recommendations are incorporated into the proposal.
- The revised proposal is presented to the College Curriculum Committee for further evaluation and approval.
- After approval from the College Curriculum Committee, the proposal is submitted to the College Council for final approval at the college level.

- The proposal is forwarded to the University Standing Committee for Study Plans and Programs for university-level review and approval.
- All approvals, feedback, and decisions are documented. The course specification form and syllabus are updated to reflect the approved changes.
- The course coordinator communicates the changes to course instructors, students, and other relevant stakeholders.
- The approved changes are formally updated in the course specifications document, ensuring all modifications are accurately reflected. These updates are then implemented according to the agreed timeline, with necessary training or support provided to faculty and students to facilitate a smooth transition and effective integration of the changes.
- Submit the updated course specifications document and related records to the QMAAU for archiving and future reference.
- The Course Change Tracking Form should be retained as part of the official course portfolio documentation.
- The course coordinator monitors the implementation process and evaluates the effectiveness of the changes, documenting outcomes for continuous improvement and future reference.

B. Minor Changes

- The course coordinator is responsible for completing the [Course Change Tracking Form](#), ensuring all required details are provided, including a clear description of the proposed change, its rationale, and the anticipated impact on the course and its students, in accordance with the instructions outlined in the form.
- The completed form is submitted to the Department Council for initial review and approval.
- The proposal is forwarded to the Quality Management and Academic Accreditation Unit to ensure compliance with quality standards and accreditation requirements. Feedback or recommendations are incorporated into the proposal.
- The revised proposal is presented to the College Curriculum Committee for further evaluation and approval.
- Once approved by the Curriculum Committee, the course specifications document is formally updated to reflect the minor changes.
- The course coordinator communicates the approved changes to all relevant stakeholders, including course instructors and students.
- The approved changes are formally updated in the course specifications document, ensuring all modifications are accurately reflected. These updates are then implemented according to the agreed timeline, with necessary training or support provided to faculty and students to facilitate a smooth transition and effective integration of the changes.
- Submit the updated course specifications document and related records to the QMAAU for archiving and future reference.
- The Course Change Tracking Form should be retained as part of the official course portfolio documentation.

- The course coordinator monitors the implementation process and evaluates the effectiveness of the changes, documenting outcomes for continuous improvement and future reference.

6. Compliance and Documentation

All changes, whether major or minor, must be reflected in the updated course specification and submitted to the QMAAU for inclusion in the course archive and accreditation records.

Policy and Procedure for Teaching Methodologies

 جامعة الإمام عبد الرحمن بن فيصل IMAM ABDULRAHMAN BIN FAISAL UNIVERSITY كلية الصيدلة College of Pharmacy	
Policy Title:	Policy and procedure for teaching methodologies
Policy Code:	COP-AA-005
Date of Initial Approval:	May 2016
Date of Last Review:	January 2025
Next Review Data:	January 2028
Approved by:	College Council
Responsible Office:	Vice Deanship of Academic Affairs

Policy Statement:

The College of Pharmacy at Imam Abdulrahman Bin Faisal University is committed to implementing contemporary, student-centered, and evidence-based teaching methodologies in its PharmD program. These methodologies are aligned with the course learning outcomes (CLOs), program learning outcomes (PLOs), and national and international accreditation standards. Faculty members are expected to regularly update their instructional strategies to reflect current best practices in pharmaceutical education, support competency development, and meet the diverse learning needs of students.

Purpose:

This policy aims to:

- Ensure the effective and consistent delivery of the PharmD curriculum.
- Promote instructional excellence and innovation.
- Support horizontal and vertical integration across courses.
- Encourage active learning, critical thinking, and student engagement.
- Align teaching practices with national (NQF, NCAAA) and international (e.g., ACPE) standards.

Scope:

This policy applies to all faculty members involved in delivering the PharmD curriculum at the College of Pharmacy.

Responsibility:

Role	Responsibilities
Vice Dean for Academic Affairs	Oversees the implementation and evaluation of teaching methodologies; ensures alignment with curriculum design and accreditation requirements.
Department Chairs	Monitor the appropriateness and effectiveness of teaching methods used within their departments; support faculty in adopting innovative practices.
Faculty Members	Select and apply suitable teaching methodologies for their courses; update instructional strategies based on feedback, student needs, and advances in education.

Policy Guidelines:**1. Adoption of Contemporary Methods**

Faculty members are responsible for employing modern, evidence-based teaching methods appropriate for an integrated, outcomes-based PharmD curriculum. These may include but are not limited to:

- Lectures (traditional and flipped)
- Problem-Based Learning (PBL)
- Team-Based Learning (TBL)
- Case-Based Learning (CBL)

- Simulation-based learning
- Experiential and service learning
- Peer instruction and discussions

2. Integration Across the Curriculum

Teaching methodologies must support horizontal integration (linking content across disciplines in the same level) and vertical integration (linking foundational and advanced knowledge across years). This ensures logical progression, conceptual reinforcement, and reduced redundancy.

3. Student-Centered Approach

Faculty should account for the diverse learning styles, backgrounds, and needs of students, adopting active learning approaches that enhance engagement, critical thinking, and self-directed learning.

4. Alignment with Learning Outcomes

All teaching methods must be clearly aligned with the CLOs, PLOs, and the national qualification framework (NQF).

5. Course Information Dissemination

Faculty are required to distribute the course description, teaching and assessment methods, and learning resources to students at the beginning of each semester.

6. Continuous Improvement

Faculty are encouraged to evaluate the effectiveness of their teaching strategies regularly and incorporate student feedback, course evaluations, peer reviews, and quality assurance recommendations.

7. Learning Environment

The College ensures that suitable resources (e.g., smart classrooms, learning management systems, simulation labs) are available to support the selected teaching methodologies.

Procedures

1. Planning and Documentation

- Teaching strategies must be outlined in the course specification and approved by the department.
- Any substantial changes to teaching methodology require departmental and academic affairs approval.

2. Implementation

- Faculty members implement the approved teaching strategies and adjust dynamically as needed.
- Interactive and integrative teaching strategies are encouraged to promote real-world application.

3. **Monitoring and Evaluation**

- Department Chairs and the Vice Dean for Academic Affairs in collaboration with the Quality Management and Academic Accreditation Unit (QAAU) will conduct periodic evaluations through classroom observations, student surveys, and course report reviews.
- Recommendations for improvement are shared with faculty through departmental meetings and annual performance reviews.

4. **Professional Development**

- The College will provide ongoing training workshops and resources through the Faculty Development Unit to support innovation and effectiveness in teaching.

Policy and Procedure for Monitoring Students' Performance and Progress



جامعة الإمام عبد الرحمن بن فيصل
IMAM ABDULRAHMAN BIN FAISAL UNIVERSITY
 كلية الصيدلة | College of Pharmacy

Policy Title:	Policy and Procedure for monitoring students' performance and progress
Policy Code:	COP-AA-006
Date of Initial Approval:	May 2016
Date of Last Review:	January 2025
Next Review Data:	January 2028
Approved by:	College Council
Responsible Office:	Vice Deanship of Academic Affairs

Purpose:

This policy aims at providing reasonable and effective guidance to monitor student progress and provide timely interventions when corrective action is needed to ensure the achievement of expected learning outcomes.

Scope:

College of Pharmacy students

Responsibility:

- Vice Dean for Academic Affairs
- Department Chairs
- Faculty members
- Students

Policies

1. Student progress and achievement are evaluated through a variety of measures, including written practical examinations, evaluation of clinical competencies, and course assignments.
2. Students must attain a minimum GPA of 2.0 in order to be considered for graduation, and they also must complete the required experiential education in a variety of disciplines.
3. The Academic Affairs Committee (AAC) reviews and monitors challenged students.
4. Recommendations regarding student academic status and promotion are made by the student's academic advisor.
5. GPA of 2.0 is required for promotion to the following academic year, and all required prerequisite coursework and specified competencies must be successfully completed.
6. Students are expected to demonstrate professional behavior in addition to succeeding academically. The student code of conduct contains specific guidelines for these expected behaviors. Students can be dismissed from the college for professional, ethical, disciplinary, and/or academic reasons.
7. Students must complete their experiential education with discretion and must display concern for the dignity and importance of each patient.

Procedures for reviewing students' performance and progress

1. Course coordinators will contact the student's academic advisor if evidence exists that the student is experiencing difficulty with a course.
2. The advisor and course coordinator will coordinate a schedule of remedial activities: personal tutoring, extra sessions, assignments, etc.
3. If the problem continues, the student advisor will notify the Office of the Vice Dean for Academic Affairs.
4. The AAC reviews and monitors challenged students.
5. The AAC is composed of all department chairs in addition to at least two full-time faculty members. The AAC is headed by the Vice Dean for Academic Affairs.

6. The AAC is responsible for making the following recommendations: promotion to the next academic year; remediation of failed courses; academic probation; suspension, and if appropriate, dismissal from the College of Pharmacy.

Policies and Procedures for Verifying the Integrity and Effectiveness of Student Assessment Processes and Achievement Standards



جامعة الإمام عبد الرحمن بن فيصل

IMAM ABDULRAHMAN BIN FAISAL UNIVERSITY

كلية الصيدلة | College of Pharmacy

Policy Title:	Policies and Procedures for Verifying the Integrity and Effectiveness of Student Assessment Processes and Achievement Standards
Policy Code:	COP-AA-007
Date of Initial Approval:	May 2016
Date of Last Review:	January 2025
Next Review Data:	January 2028
Approved by:	College Council
Responsible Office:	Vice Deanship of Academic Affairs

1. Purpose

This policy outlines the principles, mechanisms, and quality assurance procedures used to verify the integrity, accuracy, and fairness of student assessments at the College of Pharmacy. It aims to ensure that assessment tools and processes are aligned with intended learning outcomes, applied consistently, and yield valid, reliable, and equitable results.

2. Scope

This policy applies to all assessments (formative and summative) conducted within the academic programs of the College of Pharmacy, and includes:

- Written exams
- Assignments and projects
- Practical and clinical assessments
- Research reports and portfolios
- All levels of undergraduate study (including internship)

3. Policy Statement

The College of Pharmacy is committed to maintaining high standards in assessment processes by:

- Ensuring alignment between assessment methods and course learning outcomes
- Implementing internal and external verification procedures
- Promoting transparency, fairness, and accountability in marking and grading
- Establishing robust procedures for quality assurance in the assessment lifecycle
- Engaging qualified internal reviewers and external evaluators to confirm the integrity of the process

4. Definitions

- **Internal Verification:** The review of assessment tools, grading, and results by independent faculty within the college.
- **External Evaluation:** The independent review of student work and assessment processes by qualified external academics.
- **Random Sample Marking:** The re-evaluation of a representative sample of student work to verify grading accuracy and consistency.
- **Assessment Rubric:** A descriptive scoring guide used to evaluate student performance based on pre-defined criteria.
- **Blueprint:** A mapping document that aligns assessment questions with course learning outcomes.

5. General Principles and Policies

5.1. Assessment Alignment and Transparency

- Every assessment tool must be mapped to specific course learning outcomes.
- Each tool must include a grading scheme, answer key, and descriptive performance rubric, made available to internal and external reviewers.

5.2. Internal Review of Marking Accuracy

- Clear procedures must be implemented for re-checking student scripts. These include:
 - Criteria for selecting reviewers
 - Defined reviewer responsibilities
 - Documentation and reporting standards
 - Accountability of course instructors and reviewers for accuracy and fairness

5.3. Verification of Student Achievement Standards

Effectiveness of assessment and the standards of student achievement are verified through:

- **Internal and external verification** to ensure consistent application of marking criteria and a shared understanding of expected learning outcomes.
- **Benchmarking** against peer institutions to compare evaluation strategies and student output quality.
- **Comparative analysis** of results with internal and external performance standards.

6. Procedures for Verification

6.1. Internal Verification

6.1.1. Re-marking by Another Instructor

- A faculty member (not the course instructor) from the same discipline reviews a sample of assignments or exams to confirm that:
 - All components were marked
 - Rubrics or marking schemes were applied
 - Marks were totalled accurately

6.1.2 Peer Review of Student Work

- A sample of student work is reviewed by another qualified faculty member within the program for consistency in evaluation.

6.1.3 Random Sample Marking

- The Program Examinations and Assessment Quality Unit (EAQU) selects a random sample ($\geq 10\%$) of exam scripts, including:
 - Highest and lowest marks
 - Failing students
- A peer review panel independently re-marks the anonymized sample using official rubrics.
- Reviewers cannot alter student marks directly. Their recommendations may include:
 - Full approval of existing marks
 - Partial approval and suggested adjustment
 - Complete rejection of marking due to error
- The results are reviewed by EAQU and approved by the department and college councils.

- If discrepancies are found between original and peer-assessed scores, full re-marking may be required.

6.2 External Verification

6.2.1 Purpose and Scope

- Ensures neutral, credible standards using external benchmarks.
- Applies to both final exams and continuous assessments.

6.2.2 Selection Criteria for External Evaluators

External evaluators are nominated by the department and approved by the University's Assessment and Examination Quality Center, based on the following:

- Affiliation with an academic institution in a relevant field.
- Academic rank equivalent to course instructors or higher.
- Experience in teaching and assessment.
- Familiarity with the Saudi higher education system.
- Proven expertise in curriculum evaluation and assessment design.
- Knowledge of expected learning outcomes and evaluation standards.

6.2.3 Roles and Responsibilities

- External reviewers typically evaluate from Level 5 onwards.
- May conduct onsite visits.
- Responsibilities include:
 - Reviewing assessment design and coverage.
 - Commenting on test blueprints, rubrics, and model answers.
 - Assessing grading accuracy through samples of:
 - High achievers.
 - Failing students.
 - Average performers.
 - Cases with significant discrepancies between markers.
 - Student portfolios.
 - Comparing achievement with benchmarks from similar programs.
 - Recommending actions when course grades fall outside expected patterns.

6.2.4 External Evaluation Procedure

- The Program EAQU compiles a sample of student work (10%–30%) with corresponding exam questions, model answers, grading schemes, and course specifications.
- The sample is submitted to the University's Assessment and Examination Quality Center.
- The center sends the samples to the external evaluator (electronically or physically).

- The external evaluator is given one month to complete the evaluation and submit:
 - External Evaluator Report.
 - External Evaluator Review Checklist.
 - All annotated materials used for review.
- If the evaluator fails to submit the report within 30 days, a 15-day extension is granted. The report must be submitted before the extension expires.
- All feedback from external evaluators is discussed by the Program EAQU. Summary reports with recommended actions are shared with course instructors through the department head.
- Reports and recommendations are presented to the department and college councils, including proposed implementation plans. Justifications must be provided if recommendations are not implemented.
- A copy of the action plan and timeline is sent to the University's Assessment and Examination Quality Center, which monitors implementation and reports progress to the Vice President for Academic Affairs.

Policy and Procedure for Examinations and Assessment



جامعة الإمام عبد الرحمن بن فيصل
IMAM ABDULRAHMAN BIN FAISAL UNIVERSITY
كلية الصيدلة | College of Pharmacy

Policy Title:	Policy and procedure for examinations and assessment
Policy Code:	COP-AA-008
Date of Initial Approval:	May 2016
Date of Last Review:	January 2025
Next Review Data:	January 2028
Approved by:	College Council
Responsible Office:	Vice Deanship of Academic Affairs

Purpose

The examination and assessment policies of the College of Pharmacy ensure that examinations are conducted ethically to provide valid assessments of academic performance and the achievement of learning outcomes without adding undue stress on students. These policies outline the rights and responsibilities of students in the assessment process so that this process can add to their learning experiences. These policies apply to the assessment of students in the different courses offered by the College of Pharmacy, IAU. They encompass all types of assessment including continuous assessment (assignments, presentations, etc.) and exams (written, OSCE, OSPE, practical, and others). These policies govern the actions of teaching staff, administrators, and students in assessment activities.

Scope

This policy and procedure applies to students of the College of Pharmacy.

Responsibilities

- Dean, College of Pharmacy
- Vice Dean for Academic Affairs
- Examination and Assessment Quality Unit
- Examination facilitation committee
- College Board
- Students

Policies

Ethics of assessment

1. The assessment of a student's performance in a course shall be just and fair.
2. All rules and arrangements related to examinations and assessments are transparently published and made available to students.
3. There should be more than one assessment for each course. This includes different types and different times during the course.
4. Students shall be provided with a description of the means of assessment to be used in each course including:
 - a. the number and types of assessment
 - b. the date, time, and location of assessment (dates of examinations, deadlines/ due dates for submission of assignments or course projects)
 - c. the weight of each assessment
5. Pre-defined criteria are announced to students to indicate the method of grading and marking for different types of assessment in each course.
6. Students who are faced with circumstances beyond their control such as illness or family tragedy that prevents them from attending an assessment can be granted (after following the indicated procedure) another opportunity for the same assessment or a replacement of it.
7. Every student has the right to review and discuss an assessment with the Instructor/ Examiner provided the indicated procedure for this is followed. Students also have the right to appeal to the Chair of the Examinations and Assessment Quality Unit regarding a decision related to procedures of assessments and examinations but not an examiner judgment (For more details, please refer to IAU policy for students appeals – IAU Examinations Policies and Procedures Manual).

8. Students are required to adhere strictly to ethical and responsible conduct through all types of assessments. Academic misconduct including cheating, plagiarism and others are subject to penalties according to college and/or University rules.
9. No student is to be given more than two examinations in one day. The University Board, however, may allow for exceptions to this rule.

Confidentiality of Assessment

- All examination related materials, including questions sheets and answer sheets are confidential and are kept confidentially at the Examinations and Assessment Quality Unit.
- Assessment outcomes are confidential. No person involved in the process should divulge any unauthorized person any information related to an individual students' assessment or grades.

Validity of Assessment

- Assessment shall reflect the content of the course and its intended learning outcomes (CLOs).
- Assessment activities and examinations are monitored by the Examinations and Assessment Quality Unit for the validity of the questions, and the reliability of the questions including their difficulty, and discrimination indices.

Assessment as Part of the Learning Experience

- The learning process is guided by formative assessment where students can answer ungraded questions to train for exams and monitor their academic performance.
- Feedback shall be provided about performance in assessments and examinations through discussion of correct/model answers and announcement of grades to complete the learning cycle.

Assessment Guidelines

- **Theory based courses;** final exam should constitute 30 – 40% of the total mark.
- **Practical based courses:** final exam (final written and final practical exams) should constitute 40-50% of the total mark.
- Continuous assessment will comprise 50-60% of the total course grade from which at least 20% should use alternative assessment, and it will include.
 - a. Quizzes (1-2) per course.
 - b. One midterm exam, comprising 25 - 30% of the total course grade (approximately half of the CA).
 - c. Practical sessions based on the course nature.
 - d. alternative assessment methods such as presentation, case report, OSPE, OSCE, etc.
 - e. Students' portfolio and evaluation forms are required in field experience-based courses.
- Continuous assessment should rely on a variety of assessment methods, especially alternative assessment to test the students' higher order thinking and ensure their achievement of the required skills and learning outcomes. Written tests in continuous assessment should include a variety of questions in addition to multiple choice questions (MCQs), such as extended matching questions (EMQ), and short answer questions (SAQ), all of which should have the majority testing higher order thinking.
- Post exams review and item analysis are performed for all exams to deal with low performing items and invest the test results for future exams.
- Pre-exam review is conducted for all exams to ensure the adequacy of the exam questions and adherence to the exam blueprint and to the policy and procedures of examinations and assessment at IAU.

- All faculty members are encouraged to invest in the results of exam review to improve and modify their items regularly and develop new questions continuously to be added to their question bank to ensure that at least 70 % of every exam comprises new items. exam:

General rules

- Continuous assessment should comprise a good percentage of alternative assessment in addition to written tests (quizzes, midterms) which should have both MCQ and short answer questions (SAQ), and which essentially test higher order thinking.
- The percentage of MCQ questions in any test or exam should not exceed 60% of the total exam weight.
- Available options for continuous assessments are, but not limited to Presentations/ SOAP notes/ group discussions/ brainstorming sessions/ problem-solving, calculations-based assignments/ journal clubs/ Drug information request
- Research-based assignments are not allowed.
- No grades will be given for attendance.
- Final written exams should include questions from the material included in the midterm exams with a percentage of approximately 10-20% of the questions included in the final exam.
- In order to pass the course, the student must achieve a cumulative minimum of 60%.
- The percentage allocated for department discretion can be utilized in the form of pop quizzes, written assignments, and presentations (not for attendance).
- Assessment procedures must be clearly identified in course specifications.

Assessment and examination procedure

Authority in charge	Procedure
7. Assessment Scheduling and Notification	
Scheduling Committee Examinations and Assessment Quality Unit	1. Prepare a preliminary draft of the assessment schedule including all assessments, both continuous assessment and finals with the following criteria: <ul style="list-style-type: none"> ▪ The maximum number of assessments (worth $\geq 10\%$ of course grade) to be scheduled per day is 2. ▪ The same day and time of lecture or lab session is used to the greatest extent possible for scheduling of continuous assessment and final exam/assessment. ▪ Duration of exam/assessment matches the number of questions and number of marks. ▪ Assessments (worth $\geq 10\%$ of course grade) are scheduled according to the assessment plan in the course specification and final exam (at the end of the semester) ▪ Include details of types, weights and locations of assessments with the schedule.
Vice Dean for Academic Affairs	8. Consult the student leaders as regards the schedule of assessment drafted.
Student leaders	9. Provide feedback for exam schedule.
Department Chairs	10. Provide feedback for exam schedule.

Scheduling Committee	11. Consider and modify schedule and details according to students' feedback
Vice Deanship for Academic Affairs	12. Publish a final version of assessments schedule by the beginning of the academic year.
2. Assessment design	
Course coordinator and course team	1. Prepare a blueprint showing how the course learning outcomes (CLOs) will be assessed (type of assessment and weight). Indicate the topics, lectures and lab sessions that are included in every type of assessment before the beginning of the semester.
Course coordinator	2. Review and approve the alignment of CLOs and topics to assess types and weight.
Course coordinator and course team	3. Develop grading criteria for practical examinations, presentations and assignments. 4. Develop a question pool with model answers for different types of questions in written examinations covering all course units. 5. Include different types of questions in written examinations (short notes, Complete, MCQs, True/False, matching, extended matching) assessing different levels of knowledge and understanding with different degrees of difficulty.
Course coordinator Course team member (for the indicated task only)	6. Select from questions collected from the course team following the course assessment blueprint. 7. Prepare at least two different versions of the MCQs exam by shuffling questions and answer options. 8. Add suitable instructions and identifiers to the exam sheet following the University and College rules. 9. Have at least one other member of the course team review the prepared exam to ensure clarity and avoid repetitions. 10. Submit to the Department Chair examination and model answers.
Department Chair	11. Submit the exam with model answers and blueprint to the Examinations and Assessment Quality Unit for review.
3. Conducting assessment activities	
Examination Facilitation Committee	1. Prepare examination/assessment setting: a) Prepare a list of staff members responsible for invigilation with equal and fair distribution of tasks with a ratio of one invigilator to ten students. Indicate a Chief Invigilator to supervise the invigilation of each examination. b) Notify invigilators in writing of the date, time and location of exam. Indicate in the same document the responsibilities of the invigilator and his/her authorities. c) Prepare a plan of students' seating and/or flow during exam. Change this plan from one assessment activity to the next. d) Schedule exams in lecture room where class is held during lecture time.

	<p>Schedule OSCEs/OSPEs in appropriate designated locations. Change of location is allowed provided adequate justification exists and adequate notice is provided to all concerned.</p> <p>e) Prepare a list of instructions indicating when students should arrive and where they should leave, how they should behave during their stay in the exam premises.</p>
Head of Examination Facilitation Committee	2. Publish a list of exams setting instructions to students by the beginning of the semester and all the time in the area of exams.

The Examination and Assessment Quality Unit (EAQU) coordinates with the departments organizing all activities related to the final examinations. This committee's tasks include reviewing all exam questions and exam paper format according to the schedule shown below.

Final exam preparation and processing schedule

Action	Time Schedule	Person Responsible
The course coordinator prepares the exam blueprint and map according to the template provided by the Examination and Assessment Quality Unit (EAQU)	By the end of Week 12-13 (two weeks before exam date)	Course coordinator
A Peer review of the exam blueprint, exam material is performed in Exam review meeting	One-two weeks before exam date	Course coordinator Peer reviewer EAQU member
Head of department approves the exams or reviews the modifications required and approve them	One week before exam date	Head of Department
The course coordinator performs exam marking and item analysis with the help of EAQU and prepare post-exam item analysis Report	Within 1-2 days of the exam	Course coordinator EAQU member
The exam and course assessment results are uploaded to PeopleSoft by the course coordinator, and another member in the department, pending department approval	Within 1-2 days of the exam	Course coordinator another member in the department EAQU member

Attachment 1

Proposal Oral Presentation Grading Rubric

Criteria	Excellent = 4 points	Satisfactory = 3 points	Marginal = 2 points	Unacceptable = 0	Score
Introduction	Introduction clearly stated and discussed.	Introduction stated with some discussion.	Introduction stated with minimal discussion.	Introduction not included.	
Problem statement	Problem clearly stated and discussed.	Problem stated with some discussion.	Problem stated with minimal discussion.	Problem statement not included.	
Purpose/aims/objectives	Purpose/ aims/ objectives clearly stated.	Purpose/ aims/ objectives can be inferred but are not explicit.	Purpose/ aims/ objectives unclear.	Purpose/ aims/ objectives not included.	
Background	Background and context of problem clearly stated and discussed	Background and context of problem stated with some discussion.	Background and context of problem with minimal discussion.	Background not included.	
Significance Significance to health care, pharmacy, advanced practice	Significance clearly stated and discussed.	Significance stated with some discussion.	Significance implied but minimal discussion.	Significance not included.	
Synthesis Synthesis of Evidence Appraisal Strengths/weaknesses Gaps/limitations	<ul style="list-style-type: none"> • Comprehensive appraisal of evidence. • Evidence is synthesized. • Comprehensive discussion of strengths, weaknesses, gaps and limitations. 	<ul style="list-style-type: none"> • Adequate appraisal of evidence. • Evidence is analyzed but not synthesized. • Adequate discussion of strengths, weaknesses, gaps and limitations. 	<ul style="list-style-type: none"> • Evidence is identified but not analyzed. • Discussion of strengths, weaknesses, gaps and limitations is limited. 	<ul style="list-style-type: none"> • Evidence not included 	
Concepts Concepts/definitions	Concepts clearly identified and comprehensively defined.	Concepts identified, adequately defined.	Concepts identified but poorly defined.	Concepts not identified.	

Criteria	Excellent = 4 points	Satisfactory = 3 points	Marginal = 2 points	Unacceptable = 0	Score
Project Design	<ul style="list-style-type: none"> Project design supports identified problem. Project design is comprehensive. Project design has logical flow. 	<ul style="list-style-type: none"> Project design marginally supports identified problem. Project design is sufficient but not comprehensive. Logical flow is inconsistent. 	<ul style="list-style-type: none"> Project design does not support identified problem. Project design has limited or no logical flow. 	<ul style="list-style-type: none"> Project design not identified. 	
Data Collection Tools	<ul style="list-style-type: none"> Data collection tools comprehensively described. Tools selected appropriate to project design. 	<ul style="list-style-type: none"> Data collection tools adequately described. Tools selected relate to project design. 	<ul style="list-style-type: none"> Data collection tools described. Tools selected poorly relate to project design. 	<ul style="list-style-type: none"> Data collection tools not described. 	
Data Analysis	<ul style="list-style-type: none"> Plan for data analysis appropriate to methodology. Plan for data analysis comprehensively described. 	<ul style="list-style-type: none"> Plan for data analysis appropriate to methodology. Plan for data analysis described. 	<ul style="list-style-type: none"> Plan for data analysis inappropriate to methodology Plan for data analysis poorly described. 	<ul style="list-style-type: none"> Plan for data analysis not included. 	
Resources Needed/Budget Justification	Comprehensive identification of resources needed for project and budget is included.	Identification of resources needed for project and budget is included.	Resources needed for project and proposed budget incomplete.	Resources and budget not included.	

Criteria	Excellent = 4 points	Satisfactory = 3 points	Marginal = 2 points	Unacceptable = 0	Score
Presentation Design	Presentation is well-organized.	Presentation is somewhat organized.	Presentation poorly organized.	Presentation disorganized.	
Slides	Slides are clear, succinct and demonstrate professional quality.	Slides are generally clear, succinct and demonstrate adequate quality.	Slides are inconsistent in clarity and quality.	Slides are unclear and poorly designed.	
Oral Presentation	Presenter has professional appearance and demeanor, is well-prepared and answers questions skillfully.	Presenter has professional appearance and demeanor, is somewhat prepared; answers to questions are incomplete.	Presenter has professional appearance and demeanor; is poorly prepared and has difficulty answering questions.	Presenter is unprepared.	
Total score (max score = 56)					

Note: The total score will be transformed to a scale ranging from 0 to 5 for final grading.

Attachment 2

Academic/Scientific Poster Assessment Rubric

Students Name & ID:	Total Score:			
	/ 90 (max score)			
Grade: 0 = Missing /No /Inappropriate 1 = Acceptable 3 = Good 5 = Excellent /Yes	0	1	3	5
1. Clarity				
The poster is clearly laid out and seems attractive to look at				
Title is clear & concise				
The poster is 'shows' rather than 'tells', and heading & text are legible from an appropriate distance				
Content is logically organized & flows well				
The poster highlights important information & increases understanding				
Area 1 score:				/ 25
2. Content				
There is a clear purpose or hypothesis related to the topic				
The methodology is clearly explained				
Results are well shown				
Discussion relates the results to the original aim & shows significance				
Conclusions are meaningful				
Text uses appropriate language & grammar				
No evident spelling errors				
Relevant sources are used to support the work				
Area 2 score:				/ 40
3. Presentation				
Questions are answered clearly & succinctly				
The presenter shows a good knowledge of their field				
The presenter is enthusiastic and communicates well				
Additional information is made available orally or by other means				
Area 3 score:				/ 20
4. Overall poster viewing experience	0	1	3	5
	Poor	Fair	Good	Excellent

Please add up the totals from areas 1-4 and write it as a total score at the top of this form

Name/Signature:

Date:

Note: The total score will be transformed to a scale ranging from 0 to 30 for final grading.

Source: N. Rowe, Academic & Scientific Poster Presentation, Springer International Publishing AG 2017 (DOI 10.1007/978-3-319-61280-5)

Attachment 3

Supervisor's Evaluation of Student's Performance

Students Name _____

Date _____

Student ID _____

Scoring / 80 (max score)

N.I = Needs improvement

GENERAL	Excellent	Good	Acceptable	N.I.
1. Accountability - Accepts responsibility for actions, answerable to consequences	5	3	2	1
2. Punctuality & Attendance - Is rarely absent, arrives punctually, works required hours	5	3	2	1
3. Cooperation - with fellow workers	5	3	2	1
4. Cooperation - with supervisors and/or employers	5	3	2	1
5. Attitude and respectfulness - Shows initiative, optimism, and politeness	5	3	2	1
6. Accepts criticism - Has ability to learn from suggestions and change behavior	5	3	2	1
7. Flexibility - Has capacity to respond to changing situations and expectations	5	3	2	1
8. Completion of Assignments - Successfully completes tasks and meets all deadlines	5	3	2	1
9. Review and critically evaluate the literature	5	3	2	1
10. Quality of Work - Is thorough, accurate, and neat in work	5	3	2	1
11. Willingness to Develop Skills - Desires to take on challenges and learn new techniques	5	3	2	1
12. Communication Skills - Conveys information effectively and efficiently	5	3	2	1
13. Organizational Skills - Has capacity to stay on track and use time effectively	5	3	2	1
14. Appearance of work area - Keeps work area neat and orderly	5	3	2	1
15. Conflict Resolution - Seeks constructive approaches to resolving workplace issues	5	3	2	1
16. Safety - Contributes to a safe and secure environment by following established procedures	5	3	2	1

Supervisor's Signature _____

Date _____

Note: The total score will be transformed to a scale ranging from 0 to 15 for final grading

Attachment 4

Exam Paper Review Checklist

Course Title & Code: _____ Academic year and Semester _____

Notes	Response		Descriptors/ Items	Sub-criteria	Criteria
	No	Yes			
			All Exam information is accurate (e.g., time, course title and code).	Correctness	A) Cover Page
			Number of questions on the cover page is completed and consistent with the actual no. of questions on both the exam paper and the answer sheet.	Number of Questions	
			Font of all exam pages is readable and consistent, while special parts as formulas and case study were written with a distinct font.	Font	B) Layout
			All questions were numbered correctly, sequentially, and consistently and in full.	Question Numbering	
			All Line spacing is sufficiently left between questions, paragraphs, etc. to allow for clear readability.	Line Spacing	

			Overall, exam paper is clear and easy to read.	Readability	
			Page numbering is correctly provided, and the total number of pages is referred to in the exam instructions.	Page Numbering	
			Exam blueprint is attached to the exam paper.	Exam Blueprint	C) Content and Item Writing
			Instructions were clear and consistent to students. It is clearly expressed, in the special instructions, whether all questions should be answered or only some of them.	Instructions	
			There are no misspellings or typos.	Typographical errors	
			All questions were clear and linguistically correct with no grammatical errors.	Wording and grammar	
			No occurrence for duplicate questions.	Question Duplication	
			Figures and their content (e.g., numbers, text) are legible and appropriately numbered.	Figures	
			Check that the same number of alternatives/ distractors s given for all the questions, and they are all numbered consistently.	Alternatives / Distractors	D) Multiple Choice Questions

			The stem of the question is clearly articulated so that it could be answered without even looking at the alternatives.	Wording	
			No vague or incomplete phrases are included in the question.	Clarity	
			The question was not written in a negative form (e.g., All except etc.).	Wrong wording	
			Questions contain no clues for the answer or inefficient alternatives (e.g., all of the above, none of the above, both A and B...etc.).	Guessing	
			Answers to the questions were specific. Students' responses were scored against certain criteria for the question sub points. (Attach model answers and scoring rubrics).	Model Answer-Scoring Rubrics	E) Essay Questions
			Questions are appropriate with the time allotted.	Question Time	
			Items were written clearly and no misspellings or typos were present.	Wordiness	
			Marks are determined in terms of the proportional weights as in the exam blueprint.	Marks Allocation	
			Questions measure high- order thinking skills (e.g., analysis - evaluation - creation).	Measured skills	

Course Coordinator	Examination and Assessment Quality Unit	Head of Department

Attachment 5

Exam Review Meeting Minutes Template



College of Clinical Pharmacy

Academic year 2018-2019 (1439-1440 H) - Spring Semester

Vice Deanship for Academic Affairs

Examination and Assessment Quality Unit

Exam Review Meeting

Day _____ Time _____ Venue _____

Subject/ Course code _____

Course coordinator/ other faculty attended _____

Members attended from EAQU _____

Exam	Number of Qs and faculty	Approved Qs	Rejected Qs	Qs sent back for modification

Course Coordinator Name and Signature	

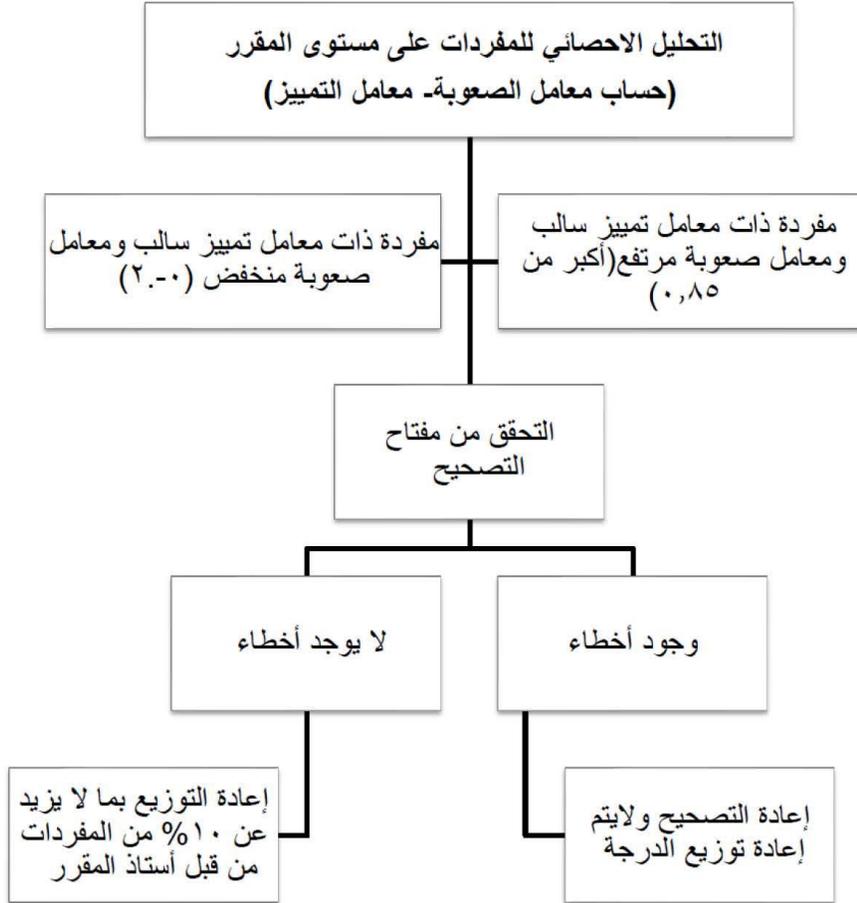
Dr Manal Alem VDAA	Dr M. Sayed M. Mansour Head-EAQU	Dr Faheem Hyder Pottoo Member -EAQU	Dr Dania Hussein Member -EAQU	Dr Hajer Al Ghamdi Member-EAQU



Quality of Assessment
and Examinations Unit

Written Exam Report

جامعة الإمام عبد الرحمن بن فيصل
IMAM ABDULRAHMAN BIN FAISAL UNIVERSITY
كلية لصيدلة الإكلينيكية
COLLEGE OF CLINICAL PHARMACY



Exam Paper Preparation and Specifications



جامعة الإمام عبد الرحمن بن فيصل
IMAM ABDULRAHMAN BIN FAISAL UNIVERSITY
 كلية الصيدلة | College of Pharmacy

Policy Title: Exam paper preparation and specifications

Policy Code: COP-AA-009

Date of Initial Approval: May 2018

Date of Last Review: January 2025

Next Review Data: January 2028

Approved by: College Council

Responsible Office: Vice Deanship of Academic Affairs

Exam design

The design of the exam should be characterized by validity, reliability, transparency and objectivity.

Validity

The test measures what is intended to measure in term of objectives. To enhance the validity of the test, ensure the consistency of the relative weights of objectives and units with the number of test questions according to the importance of the objectives.

The exam blueprint is the guarantor of the test validity and works on:

- Provide the process of evaluation of the components of the course clearly.
- Increase the competency between two tests that measure the same outcomes or content.

Reliability

Reliability means getting the same results if the test is repeated on the same sample and in the same circumstances, provided that there is no learning or training between the two test periods.

There are certain characteristics that increase test reliability, including:

- Questions objectivity.
- Questions phrasing and design.
- Marking objectivity and accuracy.
- Variation and gradation in questions difficulty.
- Number of test items.

Transparency

Transparency means that the students know what is expected from them during the test, and how they are evaluated. It also means the clarity of the test instructions and that it does not contain any surprises for students who have been well prepared for the exam and have a good understanding of the content of the course.

Objectivity

Objectivity refers to the agreement of two or more evaluators to assess the students' answer. In order to achieve the objectivity of the test, the examiner must send the test to a peer reviewer in the same specialization and that is not a co-instructor of the same course to give his opinion.

Preparing the exam

- Determine the overall objective of the exam.
- Identify learning outcomes to be measured.
- Build **the exam blueprint** based on learning outcomes
- Construct the exam questions that correspond to each learning outcome in a clear, specific and objective way.
- Specify the answer time for each question.
- Prepare scoring rubrics for essay questions (if applicable)
- Ensure compliance with the rules of building objective questions.
- Ensure compliance with the rules of writing essay questions.
- Write the exam instructions in a clear and consistent way to students.
- Perform a peer review using the exam paper review checklist.

Exam specifications

I. Cover page

The cover page should contain all exam information including, the name and logo of the university - the name of the college and the department – exam time, name and course code - date of exam – number of questions – number of pages – general and special instructions to write the exam - - name and number of students.

II. Number of questions

The number of questions written in the test instructions, as well as the number of questions in the exam booklet including the number of multiple-choice questions is complete, sequential, and consistent with the actual number of questions.

III. Exam style

- The font should be readable and consistent throughout the whole exam (e.g. times new roman 12, Calibri 11) while special parts such as formulas and case study should be written with a different and distinct font.
- All questions should be numbered correctly, sequentially, and consistently and full.
- Page numbering should be correctly provided, and the total number of pages should be referred to in the exam instructions.
- All Line spacing should be sufficiently left between questions, paragraphs, etc. to allow for clear readability.
- Overall, exam paper should be clear and easy to read.
- The exam blueprint should be available with the exam content for the review process.
- General and special instructions for answering the questions should be provided and they are clear and consistent to all students.
- The exam should not contain two questions, one of which helps to solve or guess the answer to the other question.
- Figures and graphs must be clear and appropriately and consistently resized and the numbers and words inside are readable and must be numbered and symbolized appropriately.

IV. Questions format

Multiple choice questions

- The same number of alternatives/ distractors are given for all the questions, which are 4-5, and they are all numbered consistently.
- The stem of the question is clearly articulated so that it could be answered without even looking at the alternatives.
- The question is testing a concrete idea/concept that is well known to be either valid or incorrect.
- No vague or incomplete phrases are included in the question.
- Preferably, the stem of the question should not contain negative phrases (e.g., All exceptwill not cause.....not related to.... etc.). This should be kept to a minimum.
- Questions contain no clues for the answer or inefficient alternatives (e.g., all of the above, none of the above, both A and B.... etc.).
- Questions should vary and test knowledge as well as they measure high- order thinking skills (e.g., analysis - evaluation - creation).
- The information in the questions should be rephrased rather than copied from the lecture notes.
- All alternatives are similar in length so that no one can guess the answer.

- All alternatives are otherwise devoid of any indication that helps the student to identify or guess the correct answer.
- Avoid alternatives that could be easily excluded.
- All alternatives are logical and reasonable and are relevant to the question.
- Avoid using words such as never - always.
- The question should have only one correct answer.

Types of MCQ

1. Single best answer (A-type)

In A-type MCQ, there should be ONE single best answer, while others will act as distractors.

2. Multiple T/F (K-type)

K-type requires analysis and evaluation in order to select an answer. K-type questions require integration of knowledge and decision making. Currently, K-type questions are not used frequently.

Example:

1. A student suffers an injured ankle while running to first base in a softball game. The teacher examines the indicated area. The symptoms are typical of a sprained ankle, although the injury may in fact be more severe. Which of the following steps should be included in the first aid administered to the student?
 - I. Elevate the injured leg
 - II. Apply ice to the injured area
 - III. Apply direct pressure to the site of the injury
 - a. I only
 - b. II only
 - c. I and II only
 - d. I and III only

3. Extended matching (R-type)

Extended Matching (R-type) items are multiple choice items organized into sets that use one list of options for all items in the set.

A well-constructed Extended-Matching set includes four components:

- A theme
- An option list (possible answers)
- A lead-in statement
- A series of stems/scenarios (Questions)

It is used whenever you want students to select from a relatively long list of options.

Steps to develop Extended-Matching (R-Type) items

1. Identify the theme for the set which can be:

- A chief complaint (e.g., chest pain, fatigue),
- A disposition situation (e.g., admission/discharge from the emergency department),
- A drug class (e.g., antihypertensive agents, antibiotics).

2. Write the lead-in for the set:

For instance: “For each patient described below, select the most likely diagnosis”. The lead-in indicates the relationship between the stems and options, clarifying the question posed for examinees. It is an essential component of an Extended-Matching set.

3. Prepare the list of options:

The list of options should be homogenous. They may be single words or very short phrases. List the options in alphabetical order, unless there is a logical order.

4. Write the items:

The items within a set should be similar in structure. Most often, patient scenarios and case studies are appropriate.

5. Review the items.

As in A-type MCQ, there should be ONE single best answer, while others will act as distractors.

Good Example:

Theme: Congenital heart defects

Option list:

- A. Aortic stenosis.
- B. Atrial septal defect.
- C. Atrioventricular septal defect.
- D. Coarctation of the aorta.
- E. Patent ductus arteriosus.
- F. Pulmonary stenosis.
- G. Tetralogy of Fallot.
- H. Transposition of the great arteries.

Lead-in statement:

For each infant with a congenital heart lesion, select the most likely diagnosis.

Stems:Question 1

A 2-week-old baby was born at 26 weeks gestation. It has not been possible to take the baby off the ventilator. It has a loud, continuous heart murmur best heard under the left clavicle.

(Answer: E)

Question 2

A 6-day-old baby is brought by ambulance to hospital. He is breathless, pale and responding only to painful stimuli. He has weak radial pulses and absent femoral pulses. No murmur is heard. He has hepatomegaly.

(Answer: D)

Essay/short answer questions

- Questions should have specific answers and students' responses are scored against certain criteria for the question sub points
- Questions are appropriate with the time allotted.
- Questions are written in clear language free from spelling and typographical errors.
- The weight assigned to each question shall be commensurate with its importance as stated in the exam blueprint.
- Questions measure high- order thinking skills (e.g., analysis - evaluation - creation).

Review of the exam content and blueprint

- The exam questions are prepared by the course coordinator and in case there is more than one instructor for the course, the course coordinator should coordinate them for the development of the exam questions, in accordance with the exam blueprint.
- There should be only one standardized exam for each course - including midterm exams – even if there is more than one instructor for the course.
- At least two different versions of the exam in a different order format or standardized equivalent versions are prepared.
- The course coordinator prepares the exam document together with the exam blueprint for exam review meeting for peer review according to the review timetable.
- The peer reviewer reviews the exam items according to the exam blueprint and verifies that all specifications are met, and all learning outcomes are properly assessed.
- The peer reviewer reviews the exam items according to the exam review checklist and according to the review timetable.
- The head of the department approves the exam after reviewing and then allows the course coordinator to print out the exam copies and submit them to the examination committee.
- Exam feedback forms will be given for midterm exams as well as quizzes to students.



Blueprint of Written Examination by Course Learning Outcomes



College/Course info	College of _____	Program _____	Course _____	Code _____
Exam Info.	Type Quiz <input type="checkbox"/> <small>Check</small> 1st Midterm <input type="checkbox"/> <small>Check</small> 2nd Midterm <input type="checkbox"/> <small>Check</small> Final <input type="checkbox"/> <small>Check</small>	Exam duration _____		
Academic year	Term First <input type="checkbox"/> <small>Check</small> Second <input type="checkbox"/> <small>Check</small>	Date _____		
Exam format	Paper <input type="checkbox"/> <small>Check</small> Online <input type="checkbox"/> <small>Check</small>	Total exam mark 40	*Selected Response (Objective) marks 24	*Includes all types of objective questions as: MCQs, R-Types...etc.
Developed by	Reviewed by	Head of Dept.		
Signatures _____	_____	_____		

table 1: Blueprint

Domain	CLOs	Topics	Not included		included in formula			**Weight	Marks	Mark s Roun ded	**Items in the exam paper (Question types & number)
			Durati on	Impact	Content	Frequenc y	Past Exams* vs = indicator should be included/excluded				
Knowledge	11				3	2	3	18	12.41		
	12				1	1	1	1	0.65		
	13				2	2	3	12	8.28		
	14				3	3	3	27	18.62		
	15							0	0.00		
	16							0	0.00		
	17							0	0.00		
	18							0	0.00		
	19							0	0.00		
Cognitive Skills	2.1							0	0.00		
	2.2							0	0.00		
	2.3							0	0.00		
	2.4							0	0.00		
	2.5							0	0.00		
	2.6							0	0.00		
	2.7							0	0.00		
	2.8							0	0.00		
								58	40	0.00	
							Total Weight	Total Marks			

1- The **weightage** (measure for the importance) for "Course Learning Outcomes (CLOs) **NOT** for the TOPICS, is calculated is based on 5 suggested indicators. However, Examiners need to select the ONLY THREE most relevant indicators (out of the five) as per the nature of their courses. Importantly is to use them consistently across all courses and CLOs. If there is ONLY ONE written exam (e.g., one final exam), History as an indicator will not be relevant. For each indicator, examiners need to value either 3, 2, or 1 for each CLOs, as follows:

- Duration of instruction (lectures/sessions): If lengthy =3, short =1 & in-between = 2.
- Content: If the CLO requires heavy content =3, light = 1 & in-between = 2.
- Impact: If the CLO is serious for the future career & learning progress of students = 3, not much = 1 & in-between = 2.
- Frequency: If the CLOs is expected to be encountered very frequently later in future career = 3, if rarely = 1 & in-between = 2.
- Past Exams: If the CLO has been assessed before in previous exams = 1 & if not = 2.

2-In the last column, please indicate which items (e.g. item #12, 18 & 21) assess each CLO. "

*The first digit is for Program Learning Outcome (PLO) at the three domains following the National Qualification Framework(2020), while the second digit indicates the CLO number.

**This column is used to validate the blueprint with the exam questions, which should be edited with each exam.

Important Note: in the SKILLS Domain include ONLY the CLOs at the cognitive levels as application, analysis, evaluation and creation.

Table 2: Percentage & estimated time for each type of questions

* Question Type	*no. of questions	*Estimated time/question	Total Estimated time/type	Assigned marks	% of marks
A-type MCQs			0		#DIV/0!
			0		#DIV/0!
			0		#DIV/0!
			0		#DIV/0!
			0		#DIV/0!
			0		#DIV/0!
Total	0	Total Exam Time	0	0	#DIV/0!
* Fill question types above	** Fill these 2 columns manually				

Policy and Procedure for Remediation Exams



جامعة الإمام عبد الرحمن بن فيصل
IMAM ABDULRAHMAN BIN FAISAL UNIVERSITY
كلية الصيدلة | College of Pharmacy

Policy Title:	Policy and procedure for remediation exams
Policy Code:	COP-AA-010
Date of Initial Approval:	August 2024
Date of Last Review:	January 2025
Next Review Data:	January 2028
Approved by:	College Council
Responsible Office:	Vice Deanship of Academic Affairs

Policy Statement

Remediation exams are designed to support underperforming students to achieve the expected level of performance in learning outcomes and competencies throughout their educational journey.

Definition

Remediation exams provide underachieving students with the opportunity to improve their grades on particular course work assessments and in accordance with college board regulations by retaking an equivalent exam. The purpose of remediation exams is to support underperforming students in achieving their learning outcomes and educational goals.

Scope:

Remediation exams apply to all PharmD program courses and are included in their assessment plans when the following condition is met:

- If 15% of students in the midterm exam score 60% or below.

Responsibilities:

- Examination and Assessment Quality Unit
- Vice Dean, for Academic Affairs
- Course coordinators

Procedures

1. Course coordinators, in coordination with their respective departments, are responsible for reporting the percentage of low-performing students according to the aforementioned policy and listing exams eligible for remediation (if any) within one week from the last midterm exam date.
2. Remediation applies only to midterm exams.
3. The course specification should be updated to include the remediation exam as part of the student assessment plan and must be formally approved by the respective departments.
4. Courses for which remediation exams are offered should be approved by the head of the department.
5. The Vice Dean of Academic Affairs (VDAA) provides final approval for accepted exams for remediation and announces the dates for all remediation exams.
6. Remediation exams should be equivalent to the original exam.
7. The course coordinator is required to provide feedback to all students eligible for remediation and before the remediation exams to ensure students' improvements are achieved.
8. The student will receive an average mark of both exams (original and remediation).
9. In exceptional cases, when the aforementioned policy does not apply, course coordinators may conduct a remediation exam after approval of the department and the VDAA.

All remediation exams should be approved and held within two weeks from the last midterm exam date.

Policy and Procedure for Grading System



جامعة الإمام عبد الرحمن بن فيصل
IMAM ABDULRAHMAN BIN FAISAL UNIVERSITY
كلية الصيدلة | College of Pharmacy

Policy Title: Policy and procedure for grading system

Policy Code: COP-AA-011

Date of Initial Approval: May 2016

Date of Last Review: January 2025

Next Review Data: January 2028

Approved by: College Council

Responsible Office: Vice Deanship of Academic Affairs

Purpose:

This Policy and Procedure aims to provide guidelines and requirements for the grading system for students at College of Pharmacy.

Scope:

This procedure applies to students at the College of Pharmacy.

References:

Board of Higher Education

Responsibilities:

- Dean, College of Pharmacy
- Vice Dean, for Academic Affairs
- Faculty members

Procedure:

On the basis of the recommendation of the Departmental Board offering the course, the College Board determines the course work score as being not less than 25% of the course final grade.

The course work score is evaluated by a combination of any of the following: Written quizzes and any type of alternative assessments, including practical tests, research assignments, oral exams, project-based assessments and others. class activities. On the basis of the recommendation of the Departmental Board concerned, the College Board may approve the inclusion of practical or oral tests in the final examination of any course. The scores to be assigned to such tests will be considered as part of the final examination scores.

Upon the instructor's recommendation, the Departmental Board which teaches the course may allow the student to complete the requirements of any course during the next term. In such an event, the grade incomplete (IC) will be recorded for the student in his/her academic record. IC grades are not included in the calculation of the semester and cumulative GPA until the student obtains his/her final grade in the course by completing all the requirements. If the student did not fulfill the requirements or, for any reason, no change has been made in the IC grade after the lapse of one semester, the IC status will be changed to F grade which will be included in the calculation of semester and cumulative GPA.

Courses involving research, fieldwork, or of a practical nature, may be excluded from some or all the above rules following a decision by the College Board and the recommendation of the Departmental Board teaching the course, Curriculum committee and Examinations and Assessment Quality Unit. The Curriculum committee and Examinations and Assessment Quality Unit identify alternate ways to evaluate the student's achievement in such courses.

If any course is designed to take more than one semester (e.g., Graduation Project), the student will be assigned an in-progress (IP) grade. After the completion of the course, the student will be given the grade he/she has earned. However, if he/she fails to complete the course on time, the Departmental Board teaching the course may approve the assignation of an IC grade for this course on his/her record.

The grades a student earns in each course are calculated as follows:

Percentage	Grade	Grade Code	GPA (Out of 5.00)
95 – 100	Exceptional	A+	5.00
90 – less than 95	Excellent	A	4.75
85 – less than 90	Superior	B+	4.50
80 – less than 85	Very Good	B	4.00
75 – less than 80	Above Average	C+	3.50
70 – less than 75	Good	C	3.00
65 – less than 70	High Pass	D+	2.50
60 – less than 65	Pass	D	2.00
Less than 60	Fail	F	<1.00

Based on the cumulative Grade Point Average (GPA) achieved by a graduating student, his/her graduation rank is assigned as one of the following levels:

Grade	Range of Cumulative GPA
	out of 5.00
Excellent	4.50 to 5.00
Very Good	3.75 to less than 4.50
Good	2.75 to less than 3.75
Pass	2.00 to less than 2.75

- First Class Honors will be granted to graduating students who achieve a cumulative GPA of 4.75 to 5.00 (out of 5.00), or, 3.75 to 4.00 (out of 4.00).
- Second class honors will be granted to graduating students who achieve a cumulative GPA of 4.25 to less than 4.75 (out of 5.00) or 3.25 to less than 3.75 (out of 4.00).

In order to be eligible for the First or Second-Class Honors, the student:

- Must not have failed any course at the University he/she is currently attending, or any other University.
- Must have completed all graduation requirements within a period of not exceeding the average between the maximum and the minimum limits for completing the program of study in a college.
- Must have completed not less than 60% of the graduation requirements at the University from which he/she graduates.

Student Attendance, Withdrawal and Deferment of Studies Policy and Procedures



جامعة الإمام عبد الرحمن بن فيصل
IMAM ABDULRAHMAN BIN FAISAL UNIVERSITY
كلية الصيدلة | College of Pharmacy

Policy Title: Student Attendance and Withdrawal Policy and Procedures

Policy Code: COP-AA-012

Date of Initial Approval: May 2016

Date of Last Review: January 2025

Next Review Data: January 2028

Approved by: College Council

Responsible Office: Vice Deanship of Academic Affairs

Purpose:

This policy establishes a comprehensive framework for regulating student attendance, eligibility for final examinations, and the procedures related to course withdrawal, semester withdrawal, and deferment of studies at the College of Pharmacy, Imam Abdulrahman Bin Faisal University (IAU). It aims to uphold academic integrity, ensure procedural fairness, and maintain compliance with university regulations and timelines governing academic progression.

Scope:

This policy applies to all students enrolled in the College of Pharmacy.

References:

- Board of Higher Education and NCAAA standards.
- IAU Study and Examinations Regulations.

Attendance Requirements and Final Exam Eligibility**Policy Statement**

- Students must attend lectures, laboratory sessions, or training hours (in-person or virtual) as required in the approved study plan.
- A student whose attendance falls below the minimum threshold set by the University Council will be barred from the final exam and assigned a grade of “DN” (Denied).
- The College Council or its designee may lift the denial status, allowing the student to take the final exam, provided the student presents a valid excuse accepted by the council.
- Attendance will be monitored weekly, and instructors are responsible for updating attendance records through the official Student information System (SIS).

Procedures

- Course instructors shall record attendance within one week of each session using SIS.
- Students who exceed 15% absence of total contact hours in a semester or academic year are automatically barred from the final exam and receive a grade of DN.
- If absences are between 15% and 25%, the College Council or designee may consider an exception upon submission of a valid excuse within one week of the absence.
- Once absences exceed 25%, the instructor must submit a deprivation report to the Vice Dean for Academic Affairs, and the student is removed from the course roster.
- These attendance rules apply equally to synchronous virtual classes.
- The College Council shall define attendance thresholds for courses with significant practical or clinical components.

Official Leave of Absence (Semester/Year Withdrawal)**Policy Statement**

- Students may submit a request to withdraw from a full semester or academic year due to exceptional circumstances. Approved withdrawals do not result in academic failure but extend the student’s expected time to graduation.

Procedures

- Foundation Year students may withdraw only in exceptional cases with the approval of the Permanent Academic Monitoring Committee.

- Students may withdraw without academic penalty up to the end of Week 14, provided they obtain approval from the Dean or their designee, based on a recommendation from the academic advisor.
- In exceptional cases, withdrawal may be approved after Week 14 and before the start of final exams, with joint approval from the Dean and the Permanent Academic Monitoring Committee.
- Maximum permitted withdrawals:
 - Two semesters for Bachelor’s programs (semester system)
 - One semester for Diploma/Bridge programs
 - One academic year for Bachelor’s programs (annual system)
- Withdrawal periods count toward the maximum duration allowed to complete the degree, except for summer session withdrawals, which are excluded if justified by extreme necessity.
- One-time exceptional withdrawal beyond the limits may be granted by the Permanent Academic Monitoring Committee.
- The student’s record will reflect a “W” (Withdrawn with Excuse) for all registered courses during the withdrawal period.
- Requests must be submitted through SIS. Students are required to continue attending classes until official approval is granted.
- The Dean or designee will issue a decision within two weeks of receiving the request.
- Students deprived in all registered courses are not eligible to request semester withdrawal.
- Students receiving stipends will forfeit their entitlement during the semester in which they are officially withdrawn.

Course Withdrawal

Policy Statement

- Students may withdraw from individual courses while remaining enrolled in other courses, subject to specific criteria and institutional deadlines.

Procedures

- Students may request withdrawal from one or more courses upon the recommendation of their academic advisor, provided the following conditions are met:
 - The course must not be part of the First Preparatory Year.
 - Withdrawal must occur no later than Week 11 (semester system) or Week 20 (annual system). A “W” (Withdrawn with Excuse) grade will be recorded. The Permanent Academic Monitoring Committee may grant exceptions for late withdrawals.
 - The student’s remaining academic load must meet the minimum study load as outlined in the implementing guidelines of Article (13).
 - If withdrawal causes the load to fall below the minimum, the Dean (or designee) may approve the request based on a justified recommendation from the advisor.
 - Withdrawal is not permitted from a course the student has already withdrawn from or been deprived in, unless an exception is approved by the Academic Monitoring Committee.
 - Withdrawal is not allowed from courses that will no longer be offered and have no equivalent in the current academic plan.
 - Withdrawal is not allowed from courses scheduled at two or more academic levels below the student’s current standing.
 - If a student is registered for only one course, withdrawal is not permitted. The student must instead apply for semester/year withdrawal under Article (16).

- Course withdrawal is not allowed during the summer session, except in cases of extreme necessity approved by the Dean or designee.
- Students must continue attending the course until formal approval of the withdrawal is granted by the Dean or designee.
- A decision will be issued within two weeks from the request submission date in SIS.
- Students with a DN (Denial) grade in a course are not eligible to request withdrawal from that course.

Deferment of Studies

Policy Statement

A student may submit a request to defer studies for an academic level, semester, or full academic year, provided a valid excuse is submitted and accepted by the authority designated by the University Council.

Procedures

- Students enrolled in the College’s Preparatory Year may request to defer their studies in exceptional circumstances, subject to the approval of the Permanent Academic Monitoring Committee, based on the conditions and criteria established by the Committee.
- In the semester-based system, students may submit a deferment request no later than the end of the second week of the semester.
- The deferment period is not counted toward the maximum duration allowed to complete graduation requirements.

Maximum Numbers of Deferments Allowed

Degree Program	Academic System	Maximum Deferment Allowed
Bachelor’s	Semester-based	3 non-consecutive semesters or 2 consecutive semesters
Diploma/Bridging	Semester-based	One academic year
Bachelor’s	Annual system	One academic year

5. Decisions on deferment requests shall be made by the Dean of the College or their designee, based on the academic advisor’s recommendation, within two weeks from the date of submission via SIS.
6. Female students accompanying their husbands on official international scholarships, and male students accompanying their wives under similar circumstances, may be granted, by exception and with the approval of the College Council, an additional deferment period of up to two academic years, beyond the standard deferment limit. This is contingent upon submission of official documentation proving the accompaniment. Consideration must be given to any changes in the academic program or its closure; thus, the student’s re-enrollment is subject to the continued availability of the academic program and curriculum.

References

- IAU Study and Examinations Guidelines.

Probation, Suspension and Dismissal Policy and Procedures

 <p style="margin: 0;">جامعة الإمام عبد الرحمن بن فيصل IMAM ABDULRAHMAN BIN FAISAL UNIVERSITY كلية الصيدلة College of Pharmacy</p>	
Policy Title:	Probation, Suspension and Dismissal Policy and Procedures
Policy Code:	COP-AA-013
Date of Initial Approval:	May 2016
Date of Last Review:	January 2025
Next Review Data:	January 2028
Approved by:	College Council
Responsible Office:	Vice Deanship of Academic Affairs

Probation

Students are expected to maintain satisfactory academic progress toward graduation. Any student not making satisfactory academic progress may be placed on academic probation upon recommendation of the Academic Affairs Committee (AAC). AAC seeks to uphold the essence and the spirit of the college's rules and regulations and is therefore empowered to make exceptions in cases where regulations may be working to a student's educational disadvantage.

1. A minimum cumulative GPA of 2.0 which must be maintained throughout the program to be considered for graduation from the program. If a GPA below 2.0 minimum is achieved, the student is placed on probation with specific requirements that must be fulfilled.
2. In certain cases, if the student earns an "F" grade in a course, the student might be placed on probation with specific requirements that must be fulfilled. The student remains on probation until the course with the "F" grade is successfully remediated.
3. A student will be placed on probation if either the semester GPA falls below 2.0 or the cumulative GPA falls below 1.8. A student will remain on probation until both the semester and the cumulative GPA are 1.8 or above. A student will remain on probation if the semester GPA falls below 2.0, regardless of whether the cumulative GPA is above 1.8. A student may be suspended or dismissed, as determined by the AAC if, while on probation, (1) the cumulative GPA falls below 1.8
4. A student on probation must successfully complete all requirements for academic performance developed by the AAC. If the student meets the requirements for academic performance and mentioned above, the student may be removed from probation. If the requirements are met but the cumulative GPA is still less than 1.8, the student will remain on probation. If goals are not met, the student may be suspended or dismissed as determined by the AAC.
5. A student on probation for any reason, or whose GPA is less than 3.0 may not serve in a leadership position (i.e. class leader or be a member of the students' Board).

Probationary Procedures

1. It is the student's responsibility to be aware of his/her academic status, including the status of probation. The AAC chair will contact the student regarding the probationary status and requirements for the student to be removed from probation.
2. The student can be given up to 3 probationary periods by AAC if he/she does not fulfill the requirements. The student can be dismissed or suspended in case of having three consecutive probationary periods.

Suspension

- A suspended student is considered withdrawn from the program and is not permitted to register for any University courses for the duration of one full academic year. To request re-entry into the program, the student must submit a formal written petition to the College at least six (6) months prior to the start of the semester in which they intend to return.
- If the petition is approved, the student will be re-enrolled under a formal performance contract that outlines specific academic and professional expectations to be fulfilled upon their return.

Dismissal from the University

Policy Statement

- A student will be permanently dismissed from the university in the following cases:
 - If the student receives three consecutive academic warnings due to a cumulative GPA below the minimum graduation requirement, as stated in Articles (41) and (42). The University Council may grant an additional opportunity to raise the GPA.

- If the student fails to complete graduation requirements within a period exceeding 1.5 times the program's standard duration. The University Council may grant an exceptional one-year extension in special cases.
- A student may also be dismissed from the university for engaging in scholastic and/or professional misconduct, regardless of their grade point average.

Procedures

- The summer semester is excluded from the count of semesters for which academic warnings are issued.
- Graduation requirements include a minimum cumulative GPA of 2.0 out of 5.
- A student in the Preparatory Year will be dismissed if they have a GPA below 3.0 or fail to pass all first-year courses by the end of that year.
- A student under the semester system will be dismissed after receiving three consecutive warnings for low GPA, based on the thresholds mentioned above.
- The Permanent Academic Monitoring Committee may grant a student a fourth chance after the third warning under the following conditions:
 - The required semester GPA to improve the cumulative GPA to the minimum must exceed 4.0/5 while registering the maximum study load (12 credit hours).
 - The student may be granted the additional chance in the semester immediately following the third warning if their semester GPA is at least 2.0 and cumulative GPA is at least 1.8. If either condition is not met, the student must be suspended for one semester and attend a mandatory academic counseling program (except in programs being phased out).
 - The University Council may grant a fifth opportunity upon the recommendation of the Academic Monitoring Committee in the semester following the fourth chance.
- The Committee may grant an exceptional one-semester extension beyond the maximum duration for graduation upon the college's recommendation.
- The University Council may grant an additional semester, beyond the exceptional extension above, based on a recommendation from the Academic Monitoring Committee.

Policy and Procedure for Re-enrollment



جامعة الإمام عبد الرحمن بن فيصل
IMAM ABDULRAHMAN BIN FAISAL UNIVERSITY
كلية الصيدلة | College of Pharmacy

Policy Title: Policy and procedure for re-enrollment

Policy Code: COP-AA-014

Date of Initial Approval: May 2016

Date of Last Review: January 2025

Next Review Data: January 2028

Approved by: College Council

Responsible Office: Vice Deanship of Academic Affairs

Purpose

This policy outlines the conditions and procedures under which students at the College of Pharmacy may apply for re-enrollment following academic interruption, disciplinary dismissal, or voluntary withdrawal. It aims to ensure fairness, academic integrity, and compliance with university regulations.

Scope

This policy applies to all students enrolled in the College of Pharmacy at Imam Abdulrahman Bin Faisal university who:

- Have had their enrollment terminated due to non-registration (interruption).
- Have been dismissed for disciplinary reasons.
- Have voluntarily withdrawn from the university and seek to resume their studies.

Definitions

- **Re-enrollment:** The process of restoring a student's academic status using their original student ID and record.
- **Interruption:** A break in studies resulting from failure to register for any course in a given semester or academic year.
- **DN (Denile):** A grade assigned when a student is barred from a course or academic term.
- **Permanent Academic Monitoring Committee:** A university committee responsible for reviewing exceptional academic re-enrollment requests.

Re-enrollment Following Academic Interruption

Policy Statements

A student's enrollment shall be terminated by the University if they fail to register for studies for a period specified by the University Council without submitting a formal request for deferment or withdrawal. The student whose enrollment has been terminated may apply for re-enrollment using the same student ID and academic record from before the interruption, subject to the conditions and procedures outlined in the implementing regulations of this policy.

Procedures

1. A student who fails to register for any course during a semester or academic year is considered to have interrupted their studies, and their enrollment will be terminated.
2. A first-time interrupted student may request re-enrollment using the same student ID and academic record prior to the interruption. The request must be submitted before the final exams of the semester preceding the intended re-enrollment and is subject to the following conditions:
 - a) The interruption period must not exceed four semesters (for semester-based programs) or two academic years (for annual programs), calculated from the semester/year of interruption to the date of the re-enrollment request.
 - b) The student must submit the request through the Student Information System (SIS) according to the academic calendar announced by the Deanship of Admissions and Registration.
 - c) Approval is conditional upon the student's ability to complete graduation requirements within the permitted maximum duration.

- d) Approval also requires that the academic plan for the student's program is still in effect from the semester in which the student left off.
 - e) A student dismissed for academic reasons is not eligible for re-enrollment.
3. The Permanent Academic Monitoring Committee, upon recommendation from the College Council, may approve re-enrollment if the interruption exceeds four semesters (semester system) or two academic years (annual system), provided the following conditions are met:
 - a) The interruption does not exceed six semesters (semester system) or three years (annual system).
 - b) The interruption was due to a valid reason as judged by the College Council.
 - c) The student has successfully completed at least 50% of the total credit hours required for graduation.
 - d) The cumulative GPA is not less than 2.5 out of 5 for programs that require a minimum GPA of 2.0 for graduation, or not less than 3.25 out of 5 for programs that require 2.75 for graduation.
 - e) The student must be capable of completing graduation requirements within the allowable duration.
 - f) The academic plan of the program is still available and active from the last enrolled semester.
 4. The Committee may approve a second re-enrollment upon recommendation of the College Council, in accordance with the same conditions listed above.
 5. The University Council may grant a third re-enrollment in exceptional cases, based on a recommendation from the Permanent Academic Monitoring Committee.
 6. The period of interruption without course registration is not counted toward the maximum duration allowed to complete graduation requirements.
 7. If a student fails to attend all registered courses for four consecutive weeks (semester system) or seven weeks (annual system) from the beginning of the academic term, the student is considered to have interrupted studies, and their enrollment is terminated. Their record will be marked as "Compulsory Withdrawal," with a "DN" (Denile) grade recorded. The semester/year will count toward the total time allowed for graduation. Any academic stipend will be suspended, and re-enrollment is only possible with approval from the Permanent Academic Monitoring Committee upon recommendation of the College Council.
 8. A visiting student will be considered as having interrupted studies if they fail to submit their academic transcript for the visiting term by the end of Week 2 of the following semester.
 9. A newly admitted student in the Preparatory Year who fails to register for any course will be permanently dismissed from the university and may not request re-enrollment.

Re-enrollment after Disciplinary Dismissal

Policy Statement

A student dismissed from the university for disciplinary reasons may only be re-enrolled after a period of three years from the date of the dismissal decision.

Procedures

1. Re-enrollment requires the approval of the University Council, based on the recommendation of the College Council and the Permanent Disciplinary Committee.
2. The student must have successfully completed at least 75% of the total required credit hours for graduation.
3. The student's cumulative GPA must be:
 - Not less than 3.0 out of 5 for programs requiring a 2.0 GPA to graduate.
 - Not less than 3.75 out of 5 for programs requiring a 2.75 GPA to graduate.
4. The academic plan under which the student was previously enrolled must still be available and active.
5. The student must submit the request through SIS according to the academic calendar announced by the Deanship of Admissions and Registration.

Re-enrollment After Voluntary Withdrawal

Policy Statement

A student who voluntarily withdrew from the university may request re-enrollment using their previous student ID and academic record, provided a valid excuse is submitted and accepted by the authority designated by the University Council.

Procedures

1. Re-enrollment of a withdrawn student is subject to the following conditions:
 - a) The student must not have been under academic probation at the time of withdrawal.
 - b) The period of withdrawal must not exceed four semesters (semester system) or two academic years (annual system).
 - c) The student must have completed all first-year courses and met any requirements for progression to the second year, if applicable.
 - d) The College Council must approve the re-enrollment.
2. The semester during which the student withdrew is counted within the official duration of the academic program.
3. The Permanent Academic Monitoring Committee may approve exceptions to these conditions based on its established criteria.

Policy and Procedure for Graduation



جامعة الإمام عبد الرحمن بن فيصل
IMAM ABDULRAHMAN BIN FAISAL UNIVERSITY
كلية الصيدلة | College of Pharmacy

Policy Title: Policy and procedure for graduation

Policy Code: COP-AA-015

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Next Review Data: January 2028

Approved by: College Council

Responsible Office: Vice Deanship of Academic Affairs

Purpose:

This policy and procedure aim to provide a system for students graduating from the College of Pharmacy.

Scope:

Applies to students graduating from the College of Pharmacy.

References:

Board of Higher Education

Responsibilities:

- Dean, College of Pharmacy
- Deanship of Admission & Registration
- Vice Dean for Academic Affairs
- Vice Dean for research and Innovation
- College Board member

Policy:

A student graduates after he/she successfully satisfies all graduation requirements set up by the study plan.

- The student's CGPA should not be less than 2 out of 5, the grade determined by the University Board concerned for each specialty, and under no circumstances, not below the grade "acceptable."
- The College Board, upon a recommendation from the department Board concerned, may specify appropriate study courses for a student to increase his/her CGPA provided that, he/she has passed courses and failed in CGPA.
- Each graduate is granted a certificate which shows his/her quadruple name, number of civil records, residence and date of birth, college, degree and specialization obtained, and grade upon graduation. The certificate must be authorized by the Dean of Student Admissions and Registration.
- A graduation certificate, if lost, may be issued (Instead of Missing) in accordance with the following:
 - The student applies to the Deanship of Student Admission and Registration requesting a graduation certificate "Instead of Missing" after filling in a special form.
 - Each document issued a result of a loss, is stamped with (Instead of Missing) by the Deanship of Student Admission and Registration.

Procedure:

1. At the beginning of each semester (week 2-4), Vice Dean for Academic Affairs retrieves the list of expected graduates from SIS.
2. Lists are sent to academic advisors for manual crosschecking and correction of any missing/inaccurate information.

3. The final list is approved and uploaded on the SIS and any modification is sent to the Deanship of Student Admission & Registration.
4. At the end of each semester (post examination and grades announcement), Vice Dean for Academic Affairs approves the list of graduates on SIS.
5. Once approved, lists are transferred to the Vice Deanship for Clinical Affairs to coordinate the internship program.

Policy and Procedures for Student Transfer and Course Equivalency



جامعة الإمام عبد الرحمن بن فيصل
IMAM ABDULRAHMAN BIN FAISAL UNIVERSITY
كلية الصيدلة | College of Pharmacy

Policy Title:	Policy and Procedures for Student Transfer and Course Equivalency
Policy Code:	COP-AA-016
Date of Initial Approval:	May 2016
Date of Last Review:	January 2025
Next Review Data:	January 2028
Approved by:	College Council
Responsible Office:	Vice Deanship of Academic Affairs

Purpose:

This policy outlines the conditions, regulations, and procedures governing the transfer of students to the College of Pharmacy at IAU from other institutions and internal university colleges. It also specifies the guidelines for recognizing and equating previously completed courses to ensure academic consistency and fairness.

Policy on Transfer from Outside the University Policy**Policy Statement**

Students may be accepted for transfer from external institutions to IAU's College of Pharmacy subject to the following conditions:

1. The student must have studied at a local university or college, or at a foreign university, college, or educational institution licensed by the competent authority in the country of study.
2. The student must not have been dismissed from the previous university for disciplinary reasons.
3. Any additional conditions stipulated by the University Council.

Procedures

1. The applicant must be a Saudi national or a non-Saudi with a Saudi mother (child of a Saudi citizen).
2. The student must be enrolled in a public university within the Kingdom.
3. Transfer applications from private universities in the Kingdom are not accepted.
4. Transfers from foreign public or private universities are not permitted.
5. The student must be enrolled in a full-time, regular program. Transfers from blended learning or distance education programs are not accepted.
6. The student must not be dismissed, suspended, or withdrawn from their current university.
7. The student must be pursuing the same academic degree or may apply to a lower academic degree.
8. The student must have completed at least one academic year and earned no fewer than 24 credit hours recorded in their transcript.
9. The student must have completed the minimum required courses of the first common or foundation year at IAU, as determined by the Standing Committee for Study Plans and Curricula based on college council recommendations.
10. Transfer to the university's Preparatory Year is not permitted.
11. The student must be enrolled in an equivalent program or college, and the college shall determine the appropriate specialization based on available seats.
12. The student must have completed one academic year after the Preparatory Year and earned at least 24 credit hours in specialized courses.
13. The student's GPA must not be less than 3.5/5.0 or 2.5/4.0.

14. The College Council or its designee may exempt the GPA condition (3.5/5.0 or 2.5/4.0) under the following criteria:
 - The student provides compelling documented reasons (e.g., death of guardian, divorce, marriage, or relocation).
 - The GPA is not less than 3.0/5.0 or 2.0/4.0.
 - The College Council or its designee approves the transfer.
15. The student must pass the minimum required standardized English exam the Standing Committee for Study Plans and Curricula.
16. The student must meet any additional requirements as specified by the Permanent Committee based on college council recommendations.
17. The student must pass a professional fitness assessment.
18. Transfer applications are reviewed by a committee chaired by the Dean or Vice Dean for Academic Affairs, with at least two experienced faculty members.
19. Applications must be submitted via the Student Information System (SIS) according to the timeline set by the Deanship of Admissions and Registration. Late applications are not accepted. A stamped official transcript (dated) from the student's current university must be attached.
20. The applicant must not have any previous academic record at IAU.
21. Transfer applications are accepted once per academic year, prior to the start of the academic year.
22. If it is discovered post-transfer that the student had been previously dismissed for disciplinary reasons, the transfer will be nullified retroactively.
23. The Permanent Committee for Academic Follow-Up may review exceptional cases.

Policy on Course Equivalency

Policy Statement

The College Council may approve the equivalency of one or more courses previously studied by the student outside the university, based on the recommendation of the relevant academic department. Course content must be equivalent or comparable. Equivalencies are recorded in the student's academic transcript, and the University Council shall set the governing rules, including whether such courses count towards the cumulative GPA.

Procedures

- Equivalency is granted based on the following:
 - The department committee evaluates previously completed courses after transfer approval.
 - Courses passed at the previous university are recorded with the grade "Equivalent" provided the grade is not below "Good (C)", based on approved comparison and equivalency procedures, and provided that the total number of transferred credits does

not exceed 40% of the total program credit hours. This applies to external transfers, visiting students, and exemption requests.

- At least 75% of the course content must match the IAU course (based on average learning outcomes).
 - Every 15 equivalent credit hours from another institution counts as one academic level count towards graduation progress, financial support eligibility, attempt limits, and honors classification.
 - Only courses recorded in the official transcript of the student's transferring institution will be considered.
- The College Council determines the conditions for course equivalency.
 - Transferred students must apply for course equivalency within one semester of transfer.
 - The College must complete the equivalency process within two weeks of receiving the application.

Policy on Internal Transfer within IAU Policy

Policy Statement

- A student may transfer from only the College of Medicine, the College of Dentistry or the College of Applied Medical Sciences to the College of Pharmacy in accordance with conditions established by the University Council or its designee. Courses previously completed and approved for equivalency will be recorded in the student's transcript according to university regulations.

Procedures

- Students must have completed at least 24 credit hours when applying to transfer to the College of Pharmacy.
- The student must not be suspended or withdrawn from their current college.
- The cumulative GPA must be at least 3.5/5.0.
- Inter-college transfer is permitted only once during the student's academic career.
- Applications must be submitted through the Student Information System (SIS) within the defined timeline.
- The target program must grant the same academic degree as the student's current program.
- Students may apply for transfer as per college council provisions and Standing Committee for Study Plans and Curricula Committee approvals, with exceptions allowed in special cases.
- A transfer committee chaired by the Dean or Vice Dean for Academic Affairs, with at least two experienced members, shall review and respond to applications.
- The student must meet any additional conditions set by the Study Plans and Curricula Committee.
- The student must not have completed more than half of the program's duration.
- The student must be able to complete graduation requirements within the maximum allowable period for the new program.
- Transfer applications are accepted annually after the second semester, in accordance with the official academic calendar.

- All courses (equivalent and non-equivalent) are recorded in the transcript. Only equivalent courses are counted in the GPA.
- The College must complete the equivalency process within two weeks of transfer.

References

- IAU Study and Examination Regulations.

Policy and Procedure for Student Discipline and Code of Conduct



جامعة الإمام عبد الرحمن بن فيصل
IMAM ABDULRAHMAN BIN FAISAL UNIVERSITY
كلية الصيدلة | College of Pharmacy

Policy Title:	Policy and procedure for student discipline and code of conduct
Policy Code:	COP-AA-017
Date of Initial Approval:	May 2016
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Approved by:	College Council
Responsible Office:	Vice Deanship of Academic Affairs

Purpose

This policy aims to establish a structured and fair process to uphold academic integrity, responsible behavior, and ethical conduct among students at the College of Pharmacy (COP). It outlines the behavioral expectations, prohibited conduct, disciplinary procedures, and potential sanctions in cases of violations

Scope

This policy applies to all students enrolled in academic programs at the College of Pharmacy. It governs student conduct that occurs on university premises, during university-sponsored activities, and also off-campus conduct when determined by the University President or their delegate to adversely affect the university's interests, reputation, or community. This includes conduct that:

- Constitutes a criminal offense as defined by law, regardless of whether legal proceedings have taken place or resulted in a conviction.
- Demonstrates that the student may pose a danger or threat to their own health or safety or to that of others.

Responsibilities

- Dean, College of Pharmacy
- Vice Dean for Academic Affairs
- College Board
- College-Level Disciplinary Committee
- University Permanent Disciplinary Committee
- Deanship of Admission & Registration

General Guidelines

The College promotes a learning environment that:

- Encourages academic achievement, intellectual honesty, and free inquiry.
- Maintains safety, dignity, and respect for all members of the university community.
- Protects university property and resources from misuse or destruction.
- Supports adherence to legal, ethical, and professional standards.

Disciplinary Offenses

Any student or student organization found to have committed or to have attempted to commit the following actions is subject to appropriate disciplinary action under this policy:

Scholastic Dishonesty

Scholastic dishonesty includes plagiarizing; cheating on assignments or examinations; engaging in unauthorized collaboration on any academic activity; accepting, acquiring, or using test materials without faculty permission; submitting false or incomplete records of academic achievement; acting alone or in cooperation with another to falsify records or to obtain grades, honors, awards, or professional endorsement in a dishonest manner; altering, forging, or misusing a College academic record; or fabricating or falsifying data, research procedures, or data analysis.

Disruptive Classroom Conduct

Disruptive classroom conduct includes engaging in behavior that substantially or repeatedly interrupts either the instructor's ability to teach or a student's ability to learn.

Falsification

Falsification means willfully providing University/College offices or officials with false, misleading, or incomplete information; forging or altering without proper authorization official University / College records or documents, or conspiring with or inducing others to forge or alter University/College records or documents without proper authorization; misusing, altering, forging, falsifying, or transferring to another person University-issued identification; or intentionally making a false report of a disaster or other emergency to a University/College official or an emergency service agency.

Refusal to Identify and Comply

Refusal to identify and comply includes the willful refusal to properly identify oneself or willfully failing to comply with a proper order or summons when requested by an authorized University official.

Attempts to Injure or Defraud

Attempts to injure or defraud include accepting, creating, forging, printing, reproducing, copying, or altering any record, document, writing, or identification used or maintained by the University/College when done with intent to injure, threaten, defraud, or misinform.

Threatening, Harassing, or Assaultive Conduct

Threatening, harassing, or assaultive conduct includes engaging in conduct that endangers or threatens to endanger the health, safety, or welfare of another person.

Disorderly Conduct

Disorderly conduct includes engaging in conduct that incites or threatens to incite an assault or breach of the peace; obstructing or disrupting teaching, research, administrative, or public service functions; or obstructing or disrupting disciplinary procedures or authorized University/College activities.

Illegal or Unauthorized Possession or Use of Drugs or Alcohol

Illegal or unauthorized possession or use of drugs or alcohol includes possessing or using drugs or alcohol illegally.

Unauthorized Use of College Facilities and Services

Unauthorized use of college facilities and services includes the wrong use of college properties or facilities; misusing, altering, or damaging fire-fighting equipment, safety devices, or other emergency equipment, or interfering with the performance of those specifically charged to carry out emergency services.

Theft, Property Damage, and Vandalism

This includes theft or misuse of, damage to, destruction of, unauthorized possession of, or wrongful sale or gift of property.

Unauthorized Access

It includes accessing without authorization College property, facilities, services, or information systems, or obtaining or providing to another person the means of such unauthorized access, including, but not limited to, using or providing without authorization keys and /or access codes.

Disruptive Behavior

Disruptive behavior includes willfully disrupting University/College events; participating in a campus demonstration that disrupts the normal operations of the University/ College and infringes on the rights of other individuals; leading or inciting others to disrupt scheduled or normal activities of the

University/College; engaging in intentional obstruction that interferes with freedom of movement on campus, either pedestrian or vehicular; using sound amplification equipment on campus without authorization; or making or causing noise, regardless of the means, that disturbs authorized University/College activities or functions.

Rioting

Rioting includes engaging in, or inciting others to engage in, harmful or destructive behavior in the context of an assembly of persons disturbing the peace on campus, in areas approximating the campus, or in any location when the riot occurs in connection with, or in response to, a University/College sponsored event.

Violation of University/College Rules

It includes engaging in conduct that violates University, collegiate, or departmental regulations that have been posted or publicized, including provisions contained in university contracts with students.

Violation of Laws

It includes engaging in conduct that violates a law, including, but not limited to, laws governing alcoholic beverages, drugs, gambling, sex offenses, indecent conduct, and/ or arson.

Persistent Violations

Persistent violations include engaging in repeated conduct or actions that are in violation of this Code

Sanctions

Sanctions for academic dishonesty and cheating during examinations:

In accordance with the academic integrity policies and disciplinary regulations of Imam Abdulrahman Bin Faisal University, the following procedures and sanctions shall apply in cases of academic dishonesty, including cheating or disruptive behavior during examinations:

- If a student engages in behavior that disrupts or compromises the integrity of the examination process, the Dean may delegate authority to senior faculty members supervising the examination (invigilator) to determine whether the student may continue or should be removed from the examination room.
- The examination supervisor (invigilator) has the right to take immediate action and may instruct the student to leave the examination room if the behavior is deemed inappropriate or in violation of examination protocols.
- The Dean may report the incident to the Vice President for Academic Affairs, who will refer the case to the University Disciplinary Committee for formal review and adjudication.
- The University Disciplinary Committee is responsible for investigating the case and determining the appropriate disciplinary action in accordance with university bylaws and regulations.
- **Possible Sanctions:** Based on the findings of the committee, the student may be subject to one or more of the following sanctions:
 - Cancellation of the examination results in one or more courses.
 - Assignment of a failing grade (F or DN) in the affected course(s).
 - Suspension or other disciplinary actions as deemed appropriate.
- The release of the student's academic results will be withheld until the final decision of the University Disciplinary Committee is issued and communicated to the parties concerned.

For violations other than examination misconduct, the following sanctions may be imposed upon student(s) or student organizations found to be in violation of the Code:

1. **Alert Note:** The issuance of an oral or written notice of misconduct.
2. **Warning:** A written document that is to be maintained in the student's file.
3. Injunction of University's privileges for students
4. Cancellation/Voiding of one or more course examinations
5. Prohibited participation in one or more final examination(s)
6. **Probation:** Probation confers special status with conditions imposed for a defined period of time and includes the probability of more severe disciplinary sanctions if the student is found to violate any institutional regulation(s) during the probationary period.
7. **Required Compliance:** Required compliance necessitates the mandatory completion of university requirements, work assignments, community service, or other discretionary assignments.
8. **Confiscation:** Confiscation means confiscation of goods used or possessed in violation of university regulations, or confiscation of falsified identification or identification wrongly used.
9. **Restitution:** Restitution means making compensation for any loss, injury, or damage.
10. **Restriction of Privileges:** Restriction of privileges includes the denial or restriction of specified privileges, including, but not limited to, access to an official transcript for a defined period of time.
11. **Suspension:** Suspension means separation of the student from the University for a defined period of time, after which the student is eligible to return to the University. Suspension may include conditions for readmission.
12. **Expulsion:** Expulsion means the permanent separation of the student from the University.
13. **Withholding of Degree:** Withholding of a degree means not releasing a degree otherwise earned for a defined period of time or until the completion of assigned sanctions.

Hearing and Appeal of Student Disciplinary Decisions:

In alignment with the University's commitment to fairness and due process, any student charged with academic or non-academic misconduct shall be granted the right to a fair and timely hearing.

1. College-Level Disciplinary Committee

The College-Level Disciplinary Committee is the body responsible for conducting initial hearings related to violations of the Student Code of Conduct. The committee is constituted as follows:

- **Chair:** Dean of the College of Pharmacy
- **Members:**
 - Vice Dean for Academic Affairs
 - Two faculty members appointed by the Dean

2. Committee Responsibilities

- The committee shall investigate all relevant facts surrounding the alleged violation, including reviewing evidence, statements, and any mitigating or aggravating circumstances.
- A formal hearing shall be scheduled no later than one week from the date the incident is officially reported to the Dean.
- The student will be given the opportunity to present their case, respond to the charges, and provide supporting evidence or witnesses during the hearing.
- Upon conclusion of the hearing, the committee will deliberate and prepare a formal report outlining its findings and recommendations.

3. Escalation and Final Decision

The Dean shall submit the committee's report and recommendations to the University Permanent Disciplinary Committee for review and final determination of the appropriate disciplinary action, as per university regulations.

IAU STUDENTS DISCIPLINE BYLAWS

According to article number thirty-eight and fifty-two from bylaws of undergraduate study and examination issued rendering item six of article of higher education system that implies that higher education Board are responsible for issuing joint regulations for universities with resolution No.13/27/1423 date 2/11/1432. As instructed in the article fifty-two of bylaws referred to that university Board is to develop implementing rules not in contradiction with the provisions of this bylaw, also included in article thirty-eight of the same bylaws that punishing a university student on violation actions are in accordance with the disciplinary bylaws issued by the university Board. Based on public interest, it determines to issue a student's discipline bylaws at the IAU and implementing rules as following:

Student Discipline bylaws

Definitions

Article 1

Provisions of these by-laws shall apply to:

1. Discipline of student's behavior within the university, or in any of its facilities, or under the umbrella of participation or activities outside the university.
2. Refine and reform the behavior of student violators, and address their behavior by educational methods available at the university
3. Adoption of disciplinary sanctions on violator students with the bylaws and regulations within the university

Article 2

The following terms have the meanings assigned to them as stated in this bylaw:

University: Imam Abdulrahman Bin Faisal university

Students: All who are enrolled under the IAU, regardless of their nationality or educational levels except graduate, male and female.

College: College or deanship to which to student (his/her) issued violation belongs to

Main Committee: Standing Committee to adjust the behavior of students at the IAU

Sub-Committee: Behavior control committees within the college or supporting deanships structured with deans decisions

Chairman of the Committee: Vice dean of academic affairs, or his authorized representative

Violation: Any prohibit action that disqualify rules and bylaws of the university **Punishment:** Disciplinary sanctions stated in this bylaw

Exam: Every exam students take confined in various types, whether verbally or in writing and whether the exam is semester or yearly activity mark or final.

Article 3

Undergoes all students enrolled in the university (regular and by affiliation) except for graduate students as well as students attending training programs and courses

Article 4

The authority responsible to apply these bylaws is Deanship of Student Affairs, in association with related areas in the university; it also informs the punishment decision to the student, parents and college concerned within a week from the date of issuance of the decision

Article 5

Do not apply the punishment in this bylaw on violator students outside the university or where it does not affect the university regulations, framework of its activities and various participations. Where it's the responsibility of other areas, unless resolved to the university from other parties or the origin of the violation was a link to the university in any way.

Article 6

Standing Committee constitute to adjust the behavior of students by a decision of the university Board for two years subject to renewal under the chairmanship of Vice Dean of Academic Affairs with the following members:

1. Dean of Admission and Registration
2. Dean of Student Affairs
3. Dean of the College to which the student belongs
4. Deputy Dean of Female Student Affairs (in respect of breaches attributed to female students)
5. Director of Guidance and Counseling Center
6. One of advisors members of the legal department at the university
7. Administrator- secretary of the Committee

Article 7

Terms of reference of this committee are the following:

14. Deciding on students disciplinary issues
15. Apply Student disciplinary bylaws
16. Follow-up on investigations and discipline with students
17. Conduct investigations in matters referred to the committee and identify responsibility within it.
18. Address the relevant authorities within or outside the university, follow-up, receive and view results.
19. Follow-up on student discipline by-laws sub-committee procedures (if any) and approve it
20. Supervising the implementation of decisions issued in investigations
21. Analysis of provisions and punishments of the committee and extract results
22. Follow-up and develop work of committee or sub-committees related to it
23. Communication with relevant departments in colleges to educate students

24. Inventory of cases, then follow integrity taken against it in a special register

Article 8

The Committee considers violator students referred by the rector of the university, or one of the college deans, or their representatives, as well as deans of supporting deanships, and heads of the centers, it also follows up on cases seen by committee within the university, or outside – not in contradict with Article five and views the recommendations of the disciplinary actions towards students from colleges subcommittees under the provisions of this bylaws

Article 9

Main Committee meetings are being held by the invitation of its Chairman, committee is not valid unless the presence of two-thirds of its members. A decision issued is by majority and when the votes are equal view of the Chairman is taken. In any case it's not permissible to delay consideration of the violation for four weeks from the date received by chairman of the committee.

Article 10

In each college, deanship of preparatory year and support studies has disciplinary subcommittee bylaws chaired by dean of college or one of the agents and two members of the faculty selected by the dean. Decision is issued by the rector of university. This committee is concerned in the investigation of violations issued from students, college or others .If violation occurs within boundaries of the college it has the power of recommendation of punishment prescribed in these bylaws and then hand over to disciplinary by-laws main committee for consideration and adoption

Article 11

Various behavioral disciplinary committees have validity under this bylaw to make sure the investigation with the violating student in what is attributed to him of the violation.

The committee can re-hear his statement in it. Also has a warrant to hear whom to be heard from the parties of the case

Article 12

The punishment signed by the main committee on the violator (him/her) according to what stated in this bylaws and has the power to reduce the sentence if needed in the interest or the suspension of the sentence on the condition of lute and repetition. Taking into account when signing the punishment, to be scalable, appropriate with the degree of the violation, considering precedents and mitigating circumstances and aggravating circumstances of each case.

Article 13

Any misbehavior to others, Islamic values, regulations, bylaws, university instructions, government regulations, causing damage to others and facilities is considered violation particularly the following:

1. Every action affects the honor and dignity or prejudice the good conduct and behavior inside and outside the university
2. Prejudice to the test system, instructions and procedures or calm required
3. Any cheating in the exam or initiation of it or attempt to cheat or take any material relevant to subject even though not benefited from it, also cheating in school reports and projects
4. Taking an exam for another student or instead having another student taking an exam for other student. Whether inside or outside the university
5. Establishing activities or associations contrary to the regulations existing at the university

6. Any damage or attempt to damage universities facilities, devices, materials or books and all collectibles of the university library.
7. Abuse of university facilities and contents
8. Issuing and distributing brochures, collecting signatures or money without obtaining approval in advance by the University.
9. Fraud in all its forms
10. Smoking at the university
11. Violation to maintain the cleanliness of the halls and university facilities
12. Bad behavior with colleagues, staff or faculty members or companies based workers working in the university or infringement of them by word and action.
13. Non-compliance with the instructions regarding university campus dress code, dressing prohibited inside classrooms and campus provoking tribal or regional statements between students and formation of student groups to pick a quarrel and problems inside or outside the university
14. Violation of entry and exit instructions of colleges and classrooms or going out of the campus contrary to the public morals and Islamic values
15. Possession and use of prohibited electronic devices inside the halls or on campus, including imaging devices, recording or electronic storage pieces if used contrary to its own instructions
16. Possession of hazardous substances, prohibited weapons and drugs of all kinds inside the university buildings and facilities
17. Drop-housing without prior notice to housing administration for more than two weeks, or enter and hosting visitors without prior permission from the competent authority
18. Violation of traffic rules and regulations inside university campus or facilities of the University which needs to be presented to the main committee.

Article 14

Committing violation of behavior and appearance within the university and its facilities or outside – not in contradict with Article Five-a notification to dean of the college to take necessary measures as investigation and view necessary papers and documents to take the necessary action towards the punishment or submission to the controlling behavior committee to determine punishment

Article 15

Disciplinary sanctions that may be imposed to student

Taking into consideration it's banned to impose more than a penalty on the offending act. Disciplinary sanctions are limited to what follows:

First: Fundamental disciplinary sanctions:

1. Oral alert (warning)
2. Written alert (warning) and took the pledge of non-repetition
3. Warning, original document to the student and notify parents
4. Exclusion of registration in one course or more for one semester
5. Exclusion of final exam or cancellation of grades for one course or more –not to exceed three courses, and consider it falling. Taking to account that the course is related to violation if found.
6. Dismiss from university for one main semester
7. Prohibit the student from final exam or cancelation of grades or consider falling all registered courses for the semester
8. Dismiss from university for one semester or more

9. Permanent dismissal with documents stamped “disciplinary dismissal”
10. In all cases, the student takes responsibility to what is destroyed plus the cost of repair or installation and the consequences upcoming including special rights

Second: Alternative Disciplinary Sanctions

(A) Exclusion from one or more privileges or services for one semester or more as following:

1. Exclusion from borrowing books from university library
2. Exclusion from university campus accommodation
3. Exclusion from participation in visits, trips and representing university student in delegations
4. Exclusion from using university internet
5. Exclusion from benefiting from the subsidy or loan from students fund, a period not exceeding two semesters
6. Exclusion from Registration of student employment not exceeding two semesters
7. Exclusion from reduce travel card not exceeding two semesters
8. Exclusion from restaurant reduction card for one semester
9. Enter negative index in student record system
10. Exclusion from the use of sporting or entertainment facilities of university

(B) Have some sanctions assigned to violate student to voluntary tasks needed in deanships and colleges for a specific amount of time. In order to improve student path with suitable tasks in period of time, not in contrast with student university schedule. Main committee should take advantage from available options and activities in the university to enable them to choose the best punishment that enhances student behavior and requiring students to attend awareness or educational courses determined by the Main Committee

Article 16

Who commits the offense stipulated in item (3-4-5) from article 13 the observer directs the student from the testing room willingly, and writes detailed description in minutes then presents it with proof documents to the college that transmits the full papers to the College dean to present it to disciplinary bylaws subcommittee that determines appropriate punishment after conducting investigation with the violator, hearing his words and editing statement. Taking into account the gradual sanctions contained in article 15.

Article 17

When necessary assistance is requested from university legal department for necessary investigations. Then results are presented to HE rector of the university, especially in cases that require confidentiality and privacy

Article 18

None of the punishments provided in these by-laws may be imposed unless hearing is convened and student defends him\herself. If student declined to attend, main committee has the right to take action according to the minutes stated

Article 19

Student must be notified with the violation against him and informed in advanced about the date for him with the committee. Punishment is not held until written investigation and hearing the testimonies against him. Student forfeits his right to be heard in the event of failure to attend on the date in which he

was informed of the interview and investigation. Unless his excuse is acceptable, if not punishment is stated without his\her presence.

Article 20

No student is exempted from punishment due to lack of knowledge of university system rules and bylaws. Deanship of Student Affairs has the accountability to publish these by-laws and distributing them by all means available.

Article 21

University rector has all the power of the main committee to deal with some violations that require student privacy or confidentiality or exceptional and special circumstances without reference to the committee.

Article 22

In criminal violation it is permitted to transmit the case to competent authorities to decide on action related to the case. University applies bylaws on the violator

Article 23

Decisions from minutes of main committee are not considered approved until ratification by HE rector of university.

Article 24

Student has the right to approach the university director with grievance issued against him within one month from the date of decision notification. To retain jurisdiction over the decisions of the committee or revoke or cancel or suspend implementation or hold on the lute and repetition in session from the University Board on the recommendation of director of the university

Article 25

Decision of disciplinary sanctions are kept in students file at the Admission and Registration Deanship (paper and electronically). Competent authorities issuing punishment are entitled to announce punishment with student first name initials without explicit reference to the name in university newspapers, colleges and facilities

Article 26

This bylaw is effective from date of approval and terminates all contradiction from previous disciplinary bylaws. The University Board has the right to interpret and adjust this bylaw when needed.

Policy and Procedure for Plagiarism and Scientific Integrity



جامعة الإمام عبد الرحمن بن فيصل

IMAM ABDULRAHMAN BIN FAISAL UNIVERSITY

كلية الصيدلة | College of Pharmacy

Policy Title: Policy and procedure for plagiarism and academic integrity

Policy Code: COP-AA-018

Date of Initial Approval: May 2016

Date of Last Review: January 2025

Next Review Data: January 2028

Approved by: College Council

Responsible Office: Vice Deanship of Academic Affairs

Policy Statement

The College of Pharmacy at Imam Abdulrahman Bin Faisal University (IAU) upholds the highest standards of academic integrity and scientific ethics. This policy defines academic integrity, outlines unacceptable practices including plagiarism and academic dishonesty, and provides procedures for managing violations. This policy aligns with the following related institutional policies:

- Policy for Monitoring Student Performance and Progress
- Policy for Student Grievances and Grade Appeals
- Student Code of Conduct Policy

All students are expected to be familiar with this policy. Lack of awareness will not be accepted as an excuse for violations.

Definitions

- **Academic Integrity:** A commitment to values of honesty, trust, fairness, respect, and responsibility in academic work.
- **Academic Dishonesty:** Any action that undermines academic integrity, including but not limited to:
 - **Plagiarism:** Presenting another person's work, ideas, or expressions as one's own without proper acknowledgment. It includes:
 - Use of another's exact words without use of quotation marks and acknowledgement of that use in a footnote or endnote.
 - Use of another's organizational scheme without acknowledgement of that use in a footnote or endnote.
 - Either close paraphrasing of the work of another without attribution or submission of a work which is largely a paraphrasing of another's work without attribution.
 - **Cheating:** Using or attempting to use unauthorized materials in any academic activity.
 - **Fabrication:** Falsifying or inventing information or data.
 - **Bribery:** Offering something of value in exchange for grades or academic favors.
 - **Duplication:** Re-submitting previously submitted work without instructor permission.
 - **Surrogacy:** Taking an examination for someone else or having someone take it for you.

Scope

This policy applies to all students enrolled in the College of Pharmacy, including coursework, assignments, research projects, and examinations.

Responsibilities

- Vice Dean for Academic Affairs (VDAA)
- Faculty members
- Students

Policy Guidelines

A. Scientific Writing and Academic Training

- Instructors must provide students with clear guidance and training on academic writing and scientific integrity.
- Students must ensure that all submitted academic work is original and properly referenced.

B. Similarity Thresholds and Plagiarism Detection

- The similarity index in student work must not exceed 20% (excluding references).
- Faculty members are required to use university-approved plagiarism detection software to verify originality.
- Instructors are responsible for interpreting similarity reports and assessing the legitimacy of overlaps.

C. Faculty Responsibilities

- Educate students on types of plagiarism and academic dishonesty.
- Review written submissions using plagiarism detection tools.
- Evaluate academic integrity violations and report confirmed incidents to the department head and Dean.

Procedures

1. Training and Orientation

- Faculty members must train students on academic writing, citation methods, and plagiarism types before assigning written work.

2. Evaluation of Submissions

- Instructors must review all student submissions using plagiarism detection software and evaluate the similarity reports.
- If plagiarism is suspected or confirmed, the instructor assigns a preliminary grade, prepares a detailed report, and notifies the student in writing. A copy of the report must be submitted to the Head of Department.

3. Reporting and Disciplinary Review

- The instructor submits a formal report of the incident to the Head of Department, who forwards it to the Dean.
- The Dean refers the case to the College-Level Disciplinary Committee for investigation and recommendation of sanctions.

4. College Disciplinary Committee Hearing

- The Disciplinary Committee is chaired by the Dean and includes the VDAA and two faculty members.
- The student is notified of the hearing and may present evidence or be represented.
- At least three of four committee members must agree that plagiarism occurred beyond reasonable doubt.

5. Decision and Sanctions

- The committee's recommendations are submitted by the Dean to the University-level Permanent Disciplinary Committee to take the final decision.
- Possible sanctions include, but are not limited to:
 - A failing grade on the assignment or course
 - Suspension for one semester or more
 - Expulsion in severe or repeat cases
 - Probation or mandated remedial training
- The final decision shall be issued within 14 days, which may differ in severity from the committee's recommendation.
- Students may appeal the decision to the University president.

6. Recordkeeping and Reporting

- The Dean maintains all reports and outcomes.

- The College may disclose plagiarism-related sanctions to appropriate institutional or professional bodies upon request.

7. Exoneration and Resolution

If the Dean finds insufficient grounds to proceed or the committee does not confirm plagiarism, the Dean assigns another faculty member to evaluate the student's work and determine the final grade.

8. References

- IAU Policy and Guidelines for Student Code of Conduct.
- IAU Study and Examination Regulations.
- IAU Assessment and Examinations Guidelines.
- IAU Student Disciplinary Bylaws.

Policy and Procedure on Academic Appeals and Grievances



جامعة الإمام عبد الرحمن بن فيصل
IMAM ABDULRAHMAN BIN FAISAL UNIVERSITY
كلية الصيدلة | College of Pharmacy

Policy Title:	Policy and procedure on academic appeals and grievances
Policy Code:	COP-AA-019
Date of Initial Approval:	May 2016
Date of Last Review:	January 2025
Next Review Data:	January 2028
Approved by:	College Council
Responsible Office:	Vice Deanship of Academic Affairs

Policy Statement

The College of Pharmacy at Imam Abdulrahman Bin Faisal University is committed to promoting a fair, transparent, and student-centered academic environment. This policy outlines the process for addressing academic and non-academic complaints and grievances and provides a structured mechanism for students to appeal academic decisions or report unfair treatment. The Vice Dean for Academic Affairs (VDAA) is responsible for managing the procedures outlined in this document.

Purpose

This policy aims to provide students with clear, accessible procedures for filing complaints or appeals concerning academic performance, grading, conduct, examination-related issues, or unfair treatment by any member of the college community.

Scope

This policy applies to all undergraduate and postgraduate students enrolled at the College of Pharmacy and addresses both academic and non-academic complaints.

Definitions

- **Complaint:** Any academic or non-academic incident involving a student and a member of the college community (faculty, staff, administrator, or student).
- **Academic Grievance:** A complaint arising from within the course context, such as issues related to instruction, grading, or academic evaluation.
- **Non-Academic Grievance:** A complaint relating to conduct or treatment outside the course context, such as discrimination, harassment, or administrative issues.

Responsibility

- Vice Dean for Academic Affairs (VDAA)
- Department Chairs
- Course Coordinators
- Students

1. Academic and Non-Academic Complaint Procedure

1.1. Filing a Complaint

- Complaints must be submitted in writing and must include the date, time, location, individuals involved, and a clear description of the incident.
- Anonymous complaints will not be considered.
- Academic complaints must be submitted to the VDAA.
- Non-academic complaints should be submitted to the relevant department head or higher authority if the complaint concerns the department head.

1.2. Preliminary Review

- The VDAA (for academic complaints) or the department head (for non-academic complaints) will review the complaint and communicate with involved parties to resolve the issue informally.

1.3. Escalation to Dean

- If unresolved, the matter will be referred to the Dean, who will form an ad hoc committee to investigate.
- The ad hoc committee will complete its review within 14 days of receiving the complaint.

1.4. Investigation and Resolution

- The committee collects evidence and invites all relevant parties to present their perspectives.
- The committee may seek to resolve the issue informally, if mutually agreed upon.
- A formal report including findings and recommendations is submitted to the Dean.
- The Dean issues a written decision, and the case is closed.

1.5. Appeal to the College Council

- If the student remains dissatisfied, they may submit a final appeal to the College Council.
- The Council's decision is final.

2. Academic Appeals**2.1. Types of Appeals**

- Grade disputes
- Incomplete grades
- Make-up exam approvals
- Suspension, dismissal, or repeat year decisions

2.2.1 Grade Appeals and Exam Sheet Review**Policy**

- Students have the right to submit a request for review of final examination grades and re-evaluation of the grading process, in accordance with the University's Study and Examination Regulations, Article 36 and its Executive Rules.
- If the appeal is found valid, the grade shall be updated in the student record system following verification by the course instructor, the department chair, and the VDAA.
- A student may submit a request for review and re-evaluation of a midterm exam grade within one week of the announcement of the course result. The request shall follow the same procedures and mechanisms applied to final exam grade re-evaluation requests. The student shall be informed of the outcome no later than the thirteenth week of the semester.
- A student is not permitted to submit a grievance for re-evaluation of an exam if they have previously submitted three requests for re-evaluation of midterm or final exams in courses they have taken, and those requests were found to be unsubstantiated and subsequently dismissed. This restriction remains in effect for a period of two academic semesters.

Procedures

- The student must submit an appeal for exam re-evaluation using the official form designated for this purpose (Appendix) and certify the accuracy of the information provided.

- The student shall submit the request to the Dean of the College or his designee within one week from the announcement date of the midterm exam result, and within two weeks of the announcement date of the final exam result. The College Council or its designee shall review the request and decide whether to accept or reject it based on the approved re-evaluation regulations.
- If the request is accepted, the Vice Dean shall authorize, based on the College Council's approval, the formation of a departmental committee according to the relevant specialization. The committee shall consist of:
 - The Head of the Department.
 - The Course Instructor.
 - Another faculty member from the same specialization.
- The committee is responsible for verifying the accuracy of the grading and score recording. It shall request the student's answer sheet, present it to the student, and compare it with the official answer key retained in the course file. If the student is satisfied with the accuracy of the grading and score recording, they must sign the form to acknowledge this, and the request will be filed. This request will count as one of the student's formal re-evaluation submissions.
- The process of verifying the accuracy of grading by the committee shall include:
 - Ensuring that all parts of the answer booklet have been graded and assigned marks.
 - Verifying the correctness of the total score calculation.
- If the student is not convinced of the accuracy of the grading, the Vice Dean shall coordinate with the Department Head to appoint a committee of three experienced faculty members in the subject area, excluding the original course instructor. The committee must complete its work within five working days from the date of formation. The grade and score determined by the committee shall be recorded after approval by the College Council or its designee. The re-evaluation process shall include:
 - Making a copy of the student's answer sheet and concealing the student's name and original score.
 - Marking the student's answer sheet using the official answer key previously prepared by the course instructor.
- After the re-evaluation, the Department Head shall submit the form to the Vice Dean to be presented to the College Council or its designee for final approval and issuance of the official decision.
- If any changes to the student's grade occur as a result of the re-evaluation, the grade shall be updated electronically through the Student Information System (SIS). For final exams, this must be done before the start of the following semester's exams. For midterm exams, the update must be completed no later than the thirteenth week of the current semester.
- The student shall be informed of the final outcome of the re-evaluation in writing or via email and must acknowledge receipt by signing the result.
- Copies of all submitted forms, supporting documents, and the final decision must be retained in the student appeal file.

2.2.2 Incomplete Grades and Make-Up Exams

Policy

- If a student is absent from the final exam, they will receive a grade of zero (0). In this case, the course grade will be calculated based solely on the coursework marks the student has earned, in accordance with Article (11) of the University Study and Examination Regulations.
- If the student is unable to attend the final exam due to a compelling excuse, the College Council or its designee may accept the excuse in cases of extreme necessity, submitted through the Student Information System (SIS), in accordance with Article (12) of the University Study and Examination Regulations. In such cases, the student is permitted to sit for a substitute exam (make-up exam) within a period not exceeding the end of the following academic semester. The student will receive the grade earned in the substitute exam.
- If a student is unable to attend a midterm or coursework exam, the Vice Dean or their designee may accept the excuse through SIS, provided the case falls under one of the officially accepted conditions for absence. The student will then be allowed to sit for an equivalent substitute exam within a period not exceeding the end of Week 13 of the semester and will receive the actual score obtained in that exam.
- Accepted reasons for missing an exam include the following:
 - Death of a first-degree relative: The student will be granted a five-day leave, and in the case of second- or third-degree relatives, a three-day leave, provided a copy of the death certificate is submitted to the Vice Dean.
 - Childbirth (for female students): A birth report from a government or private hospital must be submitted. The student is granted a two-week leave.
 - Loss of consciousness (e.g., fainting) during exams, as documented by a university physician or, if transferred, a hospital report. Leave is granted according to the medical report's specifications.
 - Accompanying a spouse, parent, or child to the hospital during the exam period. Leave is granted based on the hospital's report, provided the case involves an emergency and not a routine appointment.
 - One-day excuses or those related to routine medical checkups that can be scheduled outside exam times will not be accepted.
 - Medical certificates issued by government or private hospitals are accepted in cases involving surgery, hospitalization, or chronic illnesses, provided the reports meet all regulatory requirements. Leave is granted as stated in the hospital report.
 - Excuses for emergency medical conditions such as renal colic, high blood sugar, bleeding, fractures, burns, or high fever are accepted, provided a detailed medical report is submitted, including a diagnosis. The report will be reviewed by the Vice Dean, who may contact the issuing institution to verify authenticity.
 - Excuses due to involvement in traffic or other accidents are accepted, provided the student was directly involved and the excuse specifies the time of the incident and the time the student visited the official authority.
 - Excuses for attending security-related appointments are accepted when the presence of the student is mandatory, cannot be rescheduled, and conflicts with the exam time.

Procedures

- The student must submit the excuse and reason for missing the exam through SIS no later than one week from the exam date.
- VDAA or designee shall respond to the submitted excuses through SIS. If the excuse is accepted, the course instructor will receive an automated email listing the students whose excuses have been approved and instructing them to schedule a make-up exam.
- The relevant academic department will be informed of the names of students with approved excuses and will notify them of the scheduled make-up exam.
- Students will be informed of the exam instructions through official communication channels at least one week before the make-up exam.
- Students who missed a midterm or final exam with an accepted excuse shall be tested, and their scores from the make-up exam will be recorded.
- Make-up exams for coursework assessments must be conducted and results announced no later than Week 13 of the semester.
- Make-up exams for final assessments must be conducted and grades recorded by the end of the following semester, in accordance with Article (25) of the University Study and Examination Regulations.
- A student absent from the final exam with an accepted excuse from the Dean or designee shall be assigned the grade Incomplete (IC) until the make-up exam is conducted and the final grade is recorded.

2.2.3 Appeals of Academic Suspension or Dismissal

- The student submits a letter of appeal to the VDAA within 10 working days of receiving the academic decision.
- The VDAA schedules a hearing within 30 days.
- The student may attend and be accompanied by a support person.
- The committee’s recommendation is submitted to the Dean, who issues a final decision.
- The final appeal is possible only through the official university academic grievance process.

2.2.4 Hearing and Appeal of Disciplinary Decisions

- A committee chaired by the Dean (with the VDAA and two faculty members) investigates academic misconduct.
- A hearing is conducted within one week of the incident.
- The committee submits a report to the University’s Permanent Disciplinary Committee for final action.

Note: Please also refer to the “[Policy and procedure for student discipline and code of conduct](#)” and annexure therein “IAU Student Disciplinary Bylaws”.

3. Documentation and Recordkeeping

- All complaints, appeals, and decisions are documented and archived by the Office of the VDAA.

For the comprehensive policies and procedures for examinations and assessment, please refer to (IAU Assessment and Examinations Guidelines Manual).

References

- IAU Policy and Guidelines for Student Code of Conduct.
- IAU Study and Examination Regulations.
- IAU Assessment and Examinations Guidelines.
- IAU Student Disciplinary Bylaws.

Appendix: Exam Re-Evaluation Request Form

طلب إعادة تصحيح الاختبار (التظلم)

بيانات تمياً بواسطة الطالب	
الاسم الرباعي	الرقم الجامعي
البريد الإلكتروني	رقم الهاتف
العام الجامعي	الفصل الدراسي
اسم ورمز المقرر	رقم الشعبة
درجة الاختبار	المعدل التراكمي
يرجى كتابة شرح مختصر يوضح أسباب التظلم	
توقيع الطالب: تاريخ تقديم الطلب:	
قرار مجلس الكلية أو من يفوضه	
<input type="checkbox"/> حفظ الطلب <input type="checkbox"/> الإحالة إلى سعادة وكيل الكلية للشؤون الأكاديمية لاتخاذ اللازم، وفقاً للضوابط للنظمة لإجراءات إعادة التصحيح عميد الكلية أو من يفوضه: التاريخ: / / 14 هـ	
قرار لجنة النظر في التظلم	
الإفادة:	
تصويب الدرجة حفظ الطلب أو إعادة التصحيح	
تم اطلاع الطالب على أوراق إجابته ومراجعتها مع مدرس المقرر وأستاذ بنفس التخصص وبحضور رئيس القسم وتقرر:	
<input type="checkbox"/> تصويب الدرجة: الدرجة قبل الدرجة بعد <input type="checkbox"/> حفظ الطلب بسبب: <input type="checkbox"/> الموافقة على إعادة تصحيح الاختبار	
أعضاء اللجنة (الاسم)	التوقيع
1-.....
2-.....
3-.....
التاريخ: / / 14 هـ	
قرار اللجنة المشكلة لإعادة التصحيح:	
الدرجة قبل	الدرجة بعد
توقيع أعضاء اللجنة	
1-.....	2-.....
2-.....	3-.....

توقيع الطالب:

يعتمد، رئيس القسم،

Policy and Procedure for Academic Advising and Counselling



جامعة الإمام عبد الرحمن بن فيصل
IMAM ABDULRAHMAN BIN FAISAL UNIVERSITY

كلية الصيدلة | College of Pharmacy

Policy Title: Policy and procedure for academic advising and counselling

Policy Code: COP-AA-020

Date of Initial Approval: May 2016

Date of Last Review: January 2025

Next Review Data: January 2028

Approved by: College Council

Responsible Office: Vice Deanship of Academic Affairs

Purpose

1. Guide the students to have substantial college experience and help them to understand the university policies and procedures.
2. Assist the students to plan and achieve their study plan adhering to their abilities and interests. In case of any difficulties, accurately determine the nature of the student's difficulties to properly advise the student who is not performing satisfactorily and appropriately advise the course coordinator(s) and Vice Dean for Academic Affairs (VDA) of these circumstances.
3. Counsel assigned students regarding specific learning problems and personal issues which may be affecting the educational process and maintaining student confidentiality unless permission is granted by the student and conduct all aspects of advising and counseling in a manner that is inclusive of all students, regardless of their affiliation, gender, age, disability, or learning style.
4. Establish a mechanism for referral of students to the VDA or Student Assistance Unit at the University and direct the students to proper authority in the college for special cases as needed.
5. Guide reporting violations of the code of ethics and conduct to the VDA.
6. Assign and post regular office hours for advising, as approved by the department chair.
7. Schedule monthly meetings with students and arrange for more meetings if necessary.
8. Make available the minutes of meetings with students who were unable to attend.
9. Encourage students to participate in other academic and non-academic activities of the college and help them identify future employment opportunities.

This policy will increase the awareness of faculty and staff for students' academic difficulties, hardships, and grievances. In addition, it will enhance services available to correct these difficulties, creating positive interactions between students, their advisors, and the faculty. The policy will enable students to directly interact with their teachers in a confidential and collegial manner, so that they feel supported, and their hardships are considered and appropriately resolved.

Responsibility

1. All faculty members (with no administrative duties).
2. All students at the College of Pharmacy.
3. The policy is administered by the Vice Dean for Academic Affairs.
4. Advising staff reports directly to the Students Support and Academic Advising Unit (AAU) head who reports to the Vice Dean for Academic Affairs.

Procedure

1. The Academic Advisory Committee provides the advisor with the list of students he/she will advise throughout the academic year and connects them through the Student Information System (SIS), Academic Advising portal.
2. The advisor meets with students once per month unless more meetings are necessary.
3. Students must be notified of the date, time and place of the meeting.
4. Advisors will forward a summary of their meetings with the students to the Academic Advisory Committee, including recommendations for corrective action using the Individual or Group Counseling Case Form.
5. Course Coordinators will report any students who are experiencing academic difficulties to the appropriate advisor through the Student Information System (SIS).
6. The advisor will respond appropriately to these students. If the difficulties remain unresolved, a report is forwarded to the Academic Advisory Committee for further action.

7. At week 10 of the semester, the advisor should submit ONE combined registration report for all students they are supervising using the Proposed courses for Next Semester registration Form.
8. At the end of the semester, the advisor will forward a summary report of all activities and interactions with students to the Academic Advisory Committee.

There are 2 areas of focus regarding student advising:

- Student academic performance.
- Student conduct.

Academic Performance

- If a student is experiencing difficulties in a specific course, the course coordinator will immediately inform the advisor.
- The course coordinator and advisor will coordinate arrangements for tutoring, extra sessions or assignments, etc. to assist the student to successfully complete the course.
- If the student's performance and grades do not improve, the advisor will file a report to the AAU head who in collaboration with the VDA will suggest corrective action.

Student Conduct:

- If a student commits any misconduct (refer to Policy on Student Code of Conduct), the VDA will inform the AAU and the student's advisor.
- Based on the severity of the incidence, the VDA will determine the subsequent appropriate actions:
 - A meeting in the presence of the advisor.
 - Refer the case to the disciplinary committee.
- A report of the appropriate meeting is forwarded to the student's advisor with a copy maintained in student's file.
- For students placed on probation or compliance for a determined period, the advisor will continually monitor the student and provide monthly reports to the AAU head, who will report to the VDA until the student is removed from probationary or disciplinary status.

Academic Advising Rights and Responsibilities:

Students' Rights and Responsibilities

1. The student has the right to have an advisor and has the responsibility to learn the name and office location of the advisor early in the first semester.
2. The student has the right to expect the advisor to help plan a program of study, designed through personal interaction between the student and the advisor, which reflects the student's academic background, course prerequisites, and educational goals.
3. The student has the right to expect the advisor to create an atmosphere of openness, caring and concern so meaningful communication and trust can occur.
4. The student has the right to expect the advisor to thoroughly understand the university's structure and its academic policies on such things as registration, add/drop, withdrawal, and academic grievances.
5. The student has the right to expect the advisor to be familiar with the variety of degree offerings, the procedure for referral to and the types of support services available.
6. The student has the responsibility to schedule appointments with the advisor and to keep them informed. If the student finds that it is not possible to keep the scheduled appointment, the student will notify the advisor before the appointed time.

7. The student has the responsibility for decisions made. The student will seek assistance with the decisions to be made rather than expect the advisor to make the decisions.
8. The student has the responsibility to consult with the advisor on a regular basis, when in academic difficulty, prior to transferring to another college, or withdraw from college.
9. The student has the responsibility to follow through with appropriate action after the advising session.
10. The student has the responsibility to seek reassignment to a new advisor if differences between the advisor and student should develop.

Advisors' Rights and Responsibilities

1. The advisor has the right to expect that the student will clarify personal values and goals in advance of the advisement session.
2. The advisor has the right to be treated in a respectful manner and to become acquainted with the advisee.
3. The advisor has the right to expect the student to meet with the advisor at appropriate times to receive advice in a timely fashion.
4. The advisor has the right to expect the student to be knowledgeable about policies, procedures, and requirements.
5. The advisor has a responsibility to know his/her advisees' names.
6. The advisor has the responsibility to keep all scheduled appointments and to notify the student in advance if it is not possible to keep the scheduled appointment.
7. The advisor has the responsibility to gain the necessary knowledge and skills to effectively and accurately articulate specific requirements, as well as college and curriculum requirements.
8. The advisor has the responsibility to provide the student with accurate information about alternatives, limitations, and possible consequences of academic decisions.
9. The advisor has the responsibility to maintain a complete and accurate file on the student in order to monitor progress towards goals and graduation requirements.
10. The advisor has the responsibility to respect the students' privacy.

Group Counseling Case Form

وزارة التعليم

Ministry of Education

043



جامعة الإمام عبد الرحمن بن فيصل
IMAM ABDULRAHMAN BIN FAISAL UNIVERSITY
وكالة الجامعة للشؤون الأكاديمية

لجنة تطوير الإشراف الأكاديمي بكليات الجامعة

Development of Academic Supervision Committee at University Colleges

Group Counseling Case Form

الكلية College		الفصل الدراسي Semester		
القسم Department		العام الدراسي Academic Year		
التخصص Major/		عدد المسترشدين No. of student		

Attendee Students

Name ID			الاسم الرقم الجامعي
Meeting Topic:			موضوع اللقاء:
Meeting Findings:			نتائج اللقاء:
Recommendations:			التوصيات:

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التاريخ Date	التوقيع Signature	المشرف الأكاديمي Academic Supervisor's

Individual Counseling Case Form

وزارة التعليم

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IMAM ABDULRAHMAN BIN FAISAL UNIVERSITY
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Development of Academic Supervision Committee at University Colleges

Individual Counseling Case Form

Personal Information		
اسم الطالب Student's Name:	الرقم الجامعي University ID:	الجوال Mobile No:
القسم Department:	عدد الساعات المكتسبة No. of Passed Hours:	العام الجامعي Academic Year:
التخصص Major:	عدد الساعات المسجلة No. of Registered Hours:	
الفصل الدراسي Semester:	عدد الساعات المتبقية No. of Remaining Hours:	
= عدد الإنذرات إن وجدت No. of Academic Probations (if any) =	المعدل الفصلي Semester GPA:	المعدل التراكمي Cumulative GPA:
هل تم الفصل أكاديميا سابقا؟ Have you ever been dismissed academically?	معلومات أخرى Other information:	المستوى Level
Counseling Meeting Topic		
() تسجيل المقررات الدراسية () Registration of academic courses	() تأجيل الفصل الدراسي () Postponement a semester	
() عملية الحذف والإضافة () Omission & addition processes	() مراجعة الخطة الدراسية () Review of study plan	
() الاعتذار عن الفصل الدراسي () Apology for a semester	() مراجعة التقدم في الدراسة () Review of progress in academic courses	
() انخفاض المعدل الفصلي / التراكمي () Decrease of semester/accumulative GPA	() مراجعة المواظبة والحضور () Review & evaluation of regular attendance	
() الانقطاع عن الدراسة / إعادة قيد () Rejoin/discontinued	() الانسحاب من مقرر/ الجامعة () Withdrawal from course/the university	
() تجاوز المدة النظامية () Exceeding the Statutory period of study	() أخرى () Others:	
Some Problems That Hinder Academic Progress:		
() مشكلة أكاديمية () Academic problem	() مشكلة نفسية () Psychological problem	
() مشكلة صحية () Health problem	() مشكلة أسرية / اجتماعية () Family / Social problem	

<input type="checkbox"/> Healthy problem	<input type="checkbox"/> Familial/social problem
<input type="checkbox"/> مشكلة مادية	<input type="checkbox"/> مشكلة اخرى
<input type="checkbox"/> Financial problem	<input type="checkbox"/> Other problems...
Description :	
وصف المشكلة of the Problem	
التوصيات :	
Recommendation:	

التاريخ Date	التوقيع Signature	المشرف الأكاديمي Academic Supervisor's

Proposed courses for Next Semester registration Form



جامعة الإمام عبد الرحمن بن فيصل
IMAM ABDULRAHMAN BIN FAISAL UNIVERSITY
كلية الصيدلة الإكلينيكية | College of Clinical Pharmacy
Academic Advising and Student Support Unit

استمارة المقررات الدراسية المقترحة للتسجيل للفصل الدراسي القادم

Proposed courses for Next Semester registration Form

.....Academic yea العام الدراسي Semester الفصل الدراسي

المقررات Courses					البيانات الأساسية General Information	
Attempted this course before (F,W, drop)	تعارض الجدول schedule clash	متطلبات Prerequisite completed	اسم المقرر Course name	رمز المقرر Course Code	#	اسم الطالب/الطالبة Student Name
					1	Student ID # الرقم الجامعي
					2	academic level as shown in transcript المستوى الأكاديمي
					3	GPA المعدل
					4	Phone # رقم الجوال
					5	Student graduating this semester (Yes/No)
					6	
						Comments ملاحظات
					Date التاريخ	Student Signature التوقيع

التاريخ Date	التوقيع Signature	المشرف الأكاديمي Academic Supervisor's

Policies and Procedures for Providing Students with Feedback



جامعة الإمام عبد الرحمن بن فيصل

IMAM ABDULRAHMAN BIN FAISAL UNIVERSITY

كلية الصيدلة | College of Pharmacy

Policy Title:	Policies and Procedures for Providing Students with Feedback
Policy Code:	COP-AA-021
Date of Initial Approval:	May 2016
Date of Last Review:	January 2025
Next Review Data:	January 2028
Approved by:	College Council
Responsible Office:	Vice Deanship of Academic Affairs

Purpose

This policy outlines the principles and procedures for providing constructive, timely, and documented feedback to students on their academic performance. It aims to enhance the learning process, promote student engagement, and support academic development across all courses and programs.

Scope

This policy applies to all undergraduate and postgraduate courses, including theoretical, practical, and field training components, offered by the College of Pharmacy. It is applicable to both individual and group-based assessment tasks.

Policy Statement

- Students must be provided with timely feedback on their performance and assessment results within one week of result announcement. This feedback should include suggestions for performance improvement.
- Every student has the right to review and discuss their assessment results with the course instructor.
- If a given assessment task builds upon a previous one, the earlier assignment must be returned to the student at least 10 days before the due date of the subsequent task, accompanied by the earned grade and constructive feedback.
- The process of providing feedback to students must be documented in the course file using methods determined by the relevant departments and academic programs.
- The feedback policies and procedures outlined in this guide apply to all courses involving field training as well as standalone field training courses. In such cases, students must receive continuous feedback on their performance from training supervisors, coordinators, and, where applicable, from representatives of the training sites.

Procedures

- Students must be provided with grading rubrics, scoring matrices, or checklists for each assessment task. These tools should be shared prior to task submission and serve as a guide for student expectations and grading criteria.
- Course instructors must provide feedback to students on each assessment task within one week of announcing the results, enabling students to improve in subsequent tasks.
- Instructors may use feedback as a learning tool by sharing grading rubrics and evaluation criteria before students begin their assignments, to support learning and improvement. This does not apply to exam-based assessments.
- In cases of unavoidable delays that may hinder timely feedback, a clear explanation must be provided to students along with an updated timeline for receiving the feedback.

- Feedback must be provided separately for each assessment task, in a clear manner that allows students to benefit from it. Once grades are entered into the Student Information System (SIS), the course instructor must ensure feedback is delivered within the period specified by the department head.
- Feedback may be given individually or in groups. In group feedback, a summary of comments for each question may be presented without disclosing the names of the students to whom the comments apply.
- In large classes (over 50 students), feedback may be delivered by showcasing model answers, examples of various performance levels, and common student errors.
- Students may access only their individual grades, except in group assignments where individual grades and the overall group grade may be shared, especially if the group task includes individual student contributions to promote accountability.
- The process of providing feedback must be documented using appropriate methods such as the Learning Management System (e.g., Blackboard), official university email, signed attendance sheets during feedback sessions, written comments on draft submissions, etc. Sample documentation must be retained in the course file.

Policy and Procedure for Learning and E-Learning Resources



جامعة الإمام عبد الرحمن بن فيصل
IMAM ABDULRAHMAN BIN FAISAL UNIVERSITY
كلية الصيدلة | College of Pharmacy

Policy Title:	Policy and Procedure for Learning and E-Learning Resources
Policy Code:	COP-AA-022
Date of Initial Approval:	May 2018
Date of Last Review:	January 2025
Next Review Data:	January 2028
Approved by:	College Council
Responsible Office:	Vice Deanship of Academic Affairs

Purpose and Objectives

This policy outlines the College of Pharmacy approach to providing, managing, and maintaining high-quality learning and e-learning resources that support academic success and align with the program's goals. The policy ensures the ethical, effective, and equitable use of resources by all stakeholders and promotes continuous development in the use of educational technologies.

Specifically, the policy aims to:

- Ensure the availability of high-quality, accessible learning resources, both physical and digital, to support teaching, learning, and research in pharmacy.
- Promote the ethical and purposeful use of learning resources in alignment with academic and educational objectives.
- Guarantee equitable access to learning resources for all students and faculty members.
- Outline clear procedures for the acquisition, access, and maintenance of learning resources to meet the evolving needs of the academic community.
- Define the roles and responsibilities of all stakeholders involved in managing and utilizing learning and e-learning resources.
- Encourage the effective use of educational technologies to enhance teaching and learning.
- Monitor and regularly evaluate the adequacy and effectiveness of available learning and e-learning resources.
- Safeguard user data and ensure compliance with applicable laws and institutional regulations related to privacy and digital use.
- Support continuous training and professional development opportunities for faculty and staff in the use of learning technologies and resources.

Scope

This policy applies to all individuals within the College of Pharmacy, including students, faculty, and staff who engage with or contribute to the development, delivery, and use of learning resources. It covers all forms of learning materials, both physical and digital, including textbooks, e-books, multimedia tools, research databases, and e-learning platforms.

Definitions

- **Learning resources:** Educational materials, applications or activities that are used in teaching a course and support students' achievement of learning outcomes
- **E-Learning Resources:** Digital tools, platforms, and content used to support learning and teaching in pharmacy.
- **Blended Learning:** An educational approach that combines online learning with traditional face-to-face teaching.
- **Learning Management System (LMS):** A software application for the administration, documentation, tracking, reporting, and delivery of educational courses or training programs.
- **Accessibility:** The design of resources to ensure they are usable by individuals with disabilities.
- **Blackboard:** The designated Learning Management System (LMS) that fosters student engagement both in and outside the classroom. It provides a variety of learning activities,

including course lessons, assignments, and discussion boards, which faculty members use to deliver content in both synchronous and asynchronous formats. These activities are designed to help students achieve the intended learning outcomes of their courses. The Blackboard system generates reports on student progress, allowing faculty members to offer feedback and communicate with students.

- **SIS:** Student Information System.

5. Policy Statements:

Resource Standards:

Learning resources must adhere to the following criteria:

- Be current and up-to-date.
- Be relevant to the curriculum and academic objectives.
- Maintain high academic quality to support rigorous learning and teaching.
- Be accessible to all students and staff, regardless of their physical or digital access needs.

Accessibility

- All learning resources must be available to students and staff, ensuring equal and inclusive access to educational materials and opportunities.
- Resources and infrastructure must accommodate the needs of individuals with special requirements, such as providing alternative formats for visually impaired users.
- Access must be provided, without discrimination, to all registered users.

Ethical and Responsible Use of Digital Platforms

- Resources must be accessible to all registered users without discrimination.
- Users must comply with copyright laws and licensing agreements.
- Plagiarism and misuse of resources, including unauthorized sharing of materials, are strictly prohibited and may result in disciplinary action and revocation of access.

Privacy and Security

- User data collected through e-learning platforms must be stored securely and used in compliance with applicable data protection laws.
- Authentication is required to access e-learning resources, ensuring protection of intellectual property and user information.

Maintenance and Updates

- Learning resources must be regularly evaluated, reviewed, and updated to ensure they remain relevant, accurate, and meet academic and institutional standards.

Evaluation and Feedback

- The quality of learning resources shall be regularly monitored and include gathering feedback from students and staff to enhance learning resources and ensure the provision of resources is responsive to changes in users' needs and demands

Professional Development

- Regular workshops, seminars, and training sessions will be organized to enhance the digital literacy of faculty and staff. These activities will focus on developing skills necessary to effectively use digital platforms, e-learning tools, and emerging technologies in teaching and learning.
- The Learning Resources Support unit will facilitate these activities.

Library and Information Resources

- IAU maintains an online collection of learning and teaching resources including open-access journals, e-journals and e-books.
- IAU subscribes to various online journal databases, with these subscriptions being reviewed on an annual basis and updated whenever new courses or subjects are approved for instruction.
- Whenever feasible, IAU offers access to digital versions of textbooks in addition to the physical copies.
- All digital resources are available to students and staff through the online library catalog.
- The e-Library can be accessed by both staff and students 24/7, using their unique login credentials on any computer, whether on campus or remotely.
- Security is ensured through access controls, including personalized login credentials and password protection, along with firewall systems for added security.
- Only staff and students with valid IAU identification are authorized to use resources.
- Access to the library and information resources is provided at no cost. Learning materials are tailored to meet the needs of students with specific accessibility requirements.
- Online resources are accessible 24/7.
- Staff and students are introduced to the library and information resources at IAU through an orientation session.

Learning Management System (LMS)

The Deanship of E-Learning at IAU is dedicated to offering training programs and support to faculty members, equipping them with the essential knowledge and skills needed to develop courses that meet basic level standards. These standards for course development include a general outline and essential course information, learning objectives for the overall course and individual lessons, lesson learning steps, course content, learning activities, and assessment criteria.

At the start of each semester, faculty members are required to ensure that all course content is uploaded to the teaching platform and verify the functionality of links, discussions, assignments, and assessments within the course. All educational materials shared via Blackboard by faculty and students must align with the approved curriculum and adhere to an audited course specification.

1. Course Backup and Recovery:

Faculty members have the option to store an archived version of their course on their personal devices for future reference. It is the responsibility of faculty members to create a backup of all activities uploaded to Blackboard in accordance with the policy for written assignments.

2. Course Access Privileges:

Only approved faculty members listed for a course are authorized to request access. Students who are officially enrolled in the course will be granted access with different privileges, which can

be managed through the administrative tools of the Blackboard platform (using the "Student Preview" feature).

3. **Acceptable Use of Blackboard:**

The use of Blackboard is governed by general policies for acceptable use of institutional facilities and other college-wide policies at College of Pharmacy.

4. **Student Information and Privacy:**

Faculty members and students must ensure that their actions within the system do not jeopardize user privacy, in compliance with the intellectual property and copyright policy. All educational materials uploaded to the Blackboard servers by faculty and students are aligned with the approved curriculum and are subject to IAU's intellectual property policy, with copyright owned by the College of Pharmacy. The Blackboard system is solely intended to support the teaching, learning, and assessment of courses offered at College of Pharmacy. Materials posted by faculty and students on these servers will only be used for the purposes intended by the course instructors.

Procedure:

- At the start of each semester, all courses are defined and approved in the SIS based on the curriculum of College of Pharmacy.
- Courses are identified using the course codes specified in the study plan, which have been approved by the deanship of admission and registration.
- Through the integration of the SIS and Blackboard systems, courses will be synchronized, and faculty members will gain access to their assigned courses on Blackboard.
- Once a student completes their course enrollment in SIS, they will gain access to the corresponding Blackboard activities.

IT Technical Support System

The technical support services at IAU are designed to deliver professional and effective assistance to students, faculty, and staff, following global best practices. These services encompass IT support, system maintenance, troubleshooting, and software help, ensuring that both students and staff have the necessary tools for their academic and professional needs.

To request maintenance or services, faculty and students must submit an incident or service request through the ticketing system ([SANED](#)). The support team will respond and resolve the issue within a specified timeframe. SANED allows users to request technical support and new services without the need for phone calls or emails, and it enables users to track the status of their requests. Access the system via the provided link: <https://saned.iau.edu.sa/assystnet/> Or through the '[SANED](#)' system on the university's website, under the 'Information Technology Services' section, within the 'Technical Support System'.

Procedures

Updating Learning and E-Learning Resources:

1. At the end of each academic year, the Learning Resources Support Unit will reach out to faculty members to update the list of learning resources based on the course specifications previously approved by the respective department council.
2. Course coordinators will review the list and may add new resources (e.g., textbooks, e-books), update existing resources, or remove outdated ones.
3. The updated list will be reviewed and approved by the relevant Department Council before being submitted to the Learning Resources Support Unit.
4. After collecting all updates, the unit will compile and review the changes, then forward them to the Vice Dean for Academic Affairs for further review.
5. The final updated list, after review, will be submitted to the College Council for final approval.

Monitoring Learning and E-Learning Resources

These procedures aim to ensure the continuous improvement of learning and e-learning resources at the college. By collecting feedback from students and faculty, evaluating the effectiveness of current resources, and implementing necessary updates, the process ensures that learning materials remain relevant, accessible, and effective.

1. At the end of each academic year, two surveys (Library User Satisfaction Survey and E-Learning Satisfaction Survey) will be distributed to students and faculty to collect feedback on learning and e-learning resources effectiveness.
2. The surveys focus on key areas such as accessibility, satisfaction, and areas for improvement and etc.
3. The surveys data will be reviewed and analyzed to identify areas of improvement and evaluate the effectiveness of the existing resources.
4. Based on the surveys analysis, necessary updates and improvements will be implemented in the upcoming academic year to enhance the quality and relevance of learning resources.

Policies and Procedure for Student Rewards



جامعة الإمام عبد الرحمن بن فيصل
IMAM ABDULRAHMAN BIN FAISAL UNIVERSITY
كلية الصيدلة | College of Pharmacy

Policy Title: Policies and Procedure for Student Rewards

Policy Code: COP-AA-023

Date of Initial Approval: May 2016

Date of Last Review: January 2025

Next Review Data: January 2028

Approved by: College Council

Responsible Office: Vice Deanship of Academic Affairs

Purpose

This policy outlines a structured and transparent system for recognizing and rewarding students at the College of Pharmacy at Imam Abdulrahman Bin Faisal university (IAU). It aims to support student achievement, enhance motivation, and align with national regulations governing student support in higher education.

Scope

This policy applies to all enrolled students at the College of Pharmacy.

References

- Regulations of the Board of Higher Education
- National Center for Academic Accreditation and Evaluation (NCAAA) Standards
- Articles 41, 43–46 of the Higher Education Council Regulations

Responsibilities

The following entities are responsible for the implementation and oversight of this policy:

- Dean, College of Pharmacy
- College Board
- Deanship of Admission and Registration

Policy and Procedures

Students of the College of Pharmacy may be eligible for the following rewards on stipends stipulated in the Article 41 of the Board of higher education.

Any unemployed regular university or higher education Saudi student receives the following rewards and stipends:

(A) University level - Undergraduate:

- i. Students enrolled in scientific disciplines, including pharmacy, are eligible for a monthly stipend of SR 1,000
- ii. Students who achieve an “Excellent” grade average at the end of the academic year are granted an additional SR 1,000 as a reward.

(B) Higher Education Level - Postgraduate

- ii. A monthly reward of SR 900.
- iii. A further one-month reward annually, for books and learning resources, is given on condition that the student completes his/her studies within the allocated time.
- iv. A reward of SR 3000 is given to a master student and SR 4000 to a PhD student for publishing his/her thesis.

Based on the Articles 43-46, Commission of Higher Education the University may provide:

- Unemployed regular University or higher education student with accommodation when available.
- A student traveling to another city as necessitated by their academic program will receive one return economy class ticket upon recommendation from the department and the College Board and the approval of the University president.

- Subsidized meals for students. The University Board reserves the right to price the meals.
- The president of the University may allow university students to work at the university colleges during non-academic hours provided that:
 - The University budget allows for this procedure.
 - Contracts are hourly based or jobs are on part-time basis.
 - The reward shouldn't exceed SR 1,000 monthly.

Scientific Research and Innovation

Policies and procedures for Scholarships and Training – Saudi Faculty and Staff



جامعة الإمام عبد الرحمن بن فيصل
IMAM ABDULRAHMAN BIN FAISAL UNIVERSITY
كلية الصيدلة | College of Pharmacy

Policy Title:	Policies and procedures for Scholarships and Training – Saudi Faculty and Staff
Policy Code:	COP-RI-001
Date of Initial Approval:	May 2016
Date of Last Review:	January 2025
Next Review Data:	January 2028
Approved by:	College Council
Responsible Office:	Vice Deanship of Research and Innovation

Purpose:

The purpose of this procedure is to provide the rules and regulations for scholarships and training of Saudi faculty and staff.

Scope:

This procedure applicable to all Saudi faculty members and teaching staff.

References:

Board of Higher Education and NCAAA standards

Responsibilities:

- Human resource Development
- Financial Affairs
- Department of Medical Education

Procedure**The Scholarships and Training Committee**

The scholarships and Training Committee was established by the University Board for professional development and enhancement of teaching skills, administrative, and technical through training and workshops according to the needs of the department.

The following subjects must be considered by the training committee:

- The Committee makes a recommendation for general policy for scholarships and training.
- Providing annual plan for scholarship and training for the University and coordinating with the training facilitator of the University.
- Consider the recommendation of the College board for scholarship annual plan for demonstrators and lectures of the College of Pharmacy.
- Recommend training needs and records on the training matrix according to the plan approved by the University.
- Prepare detailed annual report on the scholarships and training in the College and present it to the University Board.

Scholarships of Lectures and Demonstrators

According to Article 4 stipulated from the rules and regulation for training and scholarship from Commission of higher education the requirements for Foreign or International Scholarship program as follows:

- For master's degree.
- For a Doctorate Degree.
- For both Masters and Doctorate, taking into consideration what is mentioned in the 7th paragraph of the 3rd Article.
- For fellowship in Pharmacy specialties.

Scholarship Provisions

Foreign and international scholarships for demonstrators and lecturers are conditioned by the following:

- Saudi national.
- Working for the University for a period not less than one year after appointment and should be given a suitable work program to be done accordingly.

- Getting acceptance from a recognized University.
- A female student should be accompanied by a chaperon during the whole period of her scholarship.
- A demonstrator should not be more than thirty (30) years-old, and a lecturer should not be more than thirty-five (35) years-old. The University Board might make exceptions.
- Conduct working at the University for a period of at least equivalent to the Scholarships duration after coming back from scholarship.

Scholarship Duration

According to Article 7 stipulated on the rules and regulations for scholarship and training from the Commission of higher education the Scholarship duration as follows:

- One year for language study. The University Board might extend this period to two years, if necessary.
- Two years for Masters.
- Three years for Doctorate or equivalent in all specialties except medicine, wherein the duration is determined according to the regulations of the country where the concerned University is located.

The scholarship student should travel to the place of study after the administrative order is issued. The order would be cancelled if the student fails to arrive at the place of study after three months from the date specified in the order.

Payment for scholarship students starts upon their arrival at the place of study, provided that they start their study within one month upon their arrival.

Extension

The University Board might extend the duration of internal or foreign scholarships for one year for Masters, and two years for Doctorate and medical fellowship, based on the recommendation of the supervisor of the student and the recommendations of the Faculty Board of the department, the College or the Institute, or their equivalent, and the Scholarships and Training Committee. The University Board, based on the recommendation of the supervisor of the student and the recommendations of the Faculty Board of the department, the College or the Institute, or their equivalent, and the Scholarships and Training Committee, might extend the duration for a maximum period of one more year for each level after presenting convincing justifications. As for foreign scholarship, the supervisor's opinion should be supported by the Saudi Cultural Attaché in the Country concerned.

Switch of Specialization and Transfer from the University.

- The scholarship student is not allowed to switch the major or minor specialization except if the University Board, based on the recommendations of the Faculty Boards of the department, the College or the Institute, or their equivalent, and, the Scholarships and Training Committee, agree to that. In the case of switching the major or minor specialization without the agreement of the University Board, all scholarship benefits are suspended and the University Board considers the termination of the scholarship.
- The scholarship student is not allowed to transfer from university to another or from country to another except if the University Board, based on the recommendations of the Faculty Boards of the department, the College or the Institute, or their equivalent, and, the Scholarships and Training Committee, agrees to that. As for foreign scholarship, the recommendations should be supported by the Saudi Cultural Attaché.

Financial Benefits

According to Article 13 & 14 the Scholarship student is eligible for the same benefits given to the government employees who are foreign scholarship students. And chaperon accompanying a foreign scholarship female student is eligible for the same benefits given to the foreign scholarship student's wife mentioned in the scholarship's regulations. And the foreign scholarship student who received a scholarship from a different institution is eligible for only half of the salary paid by his/her employer. If the scholarship or fellowship benefits are less than the benefits and merits fixed for other scholarship students, he/she is paid the difference between the two.

Scientific Travel

The foreign scholarship student might make one trip during the preparation of the thesis within the period of one level of study to the Kingdom, or another country outside the place of study according to the following rules:

1. The supervisor recommends that the research requires scientific travel.
2. The support of the Saudi Cultural Attaché.
3. The approval of the Faculty Boards of the department, the College or the Institute, or their equivalent, and the Scholarships and Training Committee at the University granting the scholarship.
4. The duration of the trip should not exceed a maximum period of three months.
5. If the travel is inside the kingdom, the scholarship student should carry out work under the supervision of the department he/she belongs to. The department then should write a comprehensive report about the trip.
6. If the trip is to another country and outside the place of study, the supervisor should submit a report about the trip to the Cultural Attaché which will provide the University with a copy of it.

Travel Tickets

The foreign scholarship student is eligible for an air ticket by economy class as follows:

1. The foreign scholarship single student or the married student who is not accompanied by his family:
 - a. A one-way ticket from the Kingdom to the place of study.
 - b. A return ticket from the place of study to the Kingdom, on completion of one full academic year, for vacation.
 - c. A return ticket from the place of study to the destination of the scientific travel.
 - d. A return ticket inside the country of study for examinations or research. This ticket is granted only once for a distance exceeding a hundred (100) kilometers.
 - e. A return ticket from the place of study to the Kingdom in case of death of one of the parents, a spouse, a son or a daughter.
 - f. A one-way ticket from the place of study to the Kingdom on graduation or termination of scholarship.
2. The foreign scholarship married student who is accompanied by his family:

The foreign scholarship married student who is accompanied by his family, his wife, his underage children, his unmarried daughters and his mother if legally defendant and accompanied him to the place of study, are eligible for the tickets mentioned in No. 1. a, b, c, d, e and f above.

A return ticket is granted to the scholarship student only once to attend conferences, scientific symposiums or short courses during one level of study according to these rules:

1. The conference, scientific symposium or the short course should have a direct relationship with the specialty or the subject of research.
2. The approval of the Scholarships and Training Committee at the University based on the recommendation of the supervisor and the support of the Saudi Cultural Attaché.

Internal Scholarship

- Internal Scholarship is granted in these cases:
 1. From one educational institution to another in two different places.
 2. From one educational institution to another in the same city.
 3. From one branch to another in the same educational institution in two different places.
- The internal scholarship student, whether a demonstrator or a lecturer, is charged with administrative or teaching tasks suitable for the specialty, provided that this will not affect his/her academic attainments, according to what is decided by the Faculty Board of the department where he/she studies.

The scholarship student might make one journey during the preparation of the thesis within the period of one level of study outside the place of study whether inside or outside the Kingdom, according to the following rules:

1. The supervisor recommends that the research requires scientific journey.
2. The approval of the Faculty Boards of the department, the College or the Institute, or their equivalent, and the Scholarships and Training Committee at the University granting the scholarship.
3. The duration of the journey should not exceed a maximum period of three months.
 - The scholarship student earns his/her full salary and transport allowance paid to him/her monthly.
 - If the scholarship is in an educational institution in a different city, the scholarship student is entitled to freight allowance equal to one month salary, if the distance between the two cities is similar to the distance determined for secondment.
 - The scholarship student, his wife, his underage children, his unmarried daughters and his mother if legally dependent, are eligible for air tickets as follows:
 1. One-way tickets for economy class from the place of work to the place of study.
 2. Return tickets by economy class from the place of study to the place of work, at the end of each academic year.
 3. In the case of impossibility of air travel between the place of work and the place of study, the student is entitled to compensation equal to the travel fare by public transport.

- The scholarship student is entitled to annual books and references allowance equal to one month salary, paid for the period of the scholarship without extension.
- The scholarship student is entitled to thesis printing and binding allowance equal to (SAR 3000) three thousand Saudi Riyals for Masters, and (SAR 4000) four thousand Saudi Riyals for Doctorate, paid only once.
- The demonstrator or lecturer, who joins a graduate program in the same educational institution in the same place, is treated as an internal scholarship student.

Suspension of Benefits and Termination of Scholarship

In regard to Suspension of Benefits and Termination of Scholarship according to the rules and regulations from the commission of higher education the following grounds are:

- Scholarship benefits are suspended when he/she gets the degree, or, if he/she changes the place of study, the specialty or the University without the approval of the University Board.
- The University Board might terminate the scholarship, based on the recommendations of the Faculty Boards of the department, the College or the Institute, or their equivalent, and the Scholarships and Training Committee, in the following cases:
 - Inability to continue the study, according to performance reports.
 - The scholarship student requests to terminate the scholarship and return to the Kingdom.
 - Violation of regulations and instructions or refusing to follow them.
 - Inability to get the degree within the determined time.
 - Discontinuation of study without an acceptable excuse.
- The internal or foreign scholarship student, who requests to terminate his /her scholarship, is not allowed to leave the place of study before the approval of the University Board. In case of returning before the approval of the University Board, Item 1 or 2 of Article 30 of these regulations is applied.
- In case of approval of scholarship termination according to Article 28 of these regulations, the University Board might:
 - Decide to terminate his/her service within a period not more than one year from the date of the termination of scholarship,
 - Transfer him/her to an administrative job, if the University needs his/her service, or
 - Leave him/her on the same job and determine a duration, not more than two years, to pursue his/her graduate study. In case of exceeding this duration, Item 1 or 2 of this Article is applied.
- In case of a spouse and children accompanying the scholarship student, the instructions mentioned in the decisions and regulations governing this are applied.

Scholarship and Training for non-academic Faculty

The requirements for Scholarship and training program for non-academic Faculty:

- Must be a Saudi National.
- Age not more than forty (40) years. The University Board might make exceptions to this provision.
- General standard of university certificate or equivalent should not be less than "Good".

- Working for the University for a period of not less than one year after appointment. Except for doctors who might be granted scholarships on completion of one year after appointment.
- There should be a direct relationship between the scholarship specialty and the work he/she will do.
- Performance evaluation for the last two years should not be less than "Very Good".
- Getting acceptance from a recognized educational Institution.
- A female student should be accompanied by a chaperon during the whole period of scholarship.

Taking into consideration what is mentioned in Articles 32 and 36, the regulations governing the scholarship of demonstrators and lecturers are applied to the scholarship of other University faculty.

The scholarship student is not allowed to join two graduate study programs at the same time. However, the University Board might make exceptions to this.

A scholarship for Training is conditioned by the following:

1. Saudi national.
2. Working for the University for a period of not less than one year after appointment. Except for doctors who might be granted scholarships on completion of one year after appointment.
3. There should be a direct relationship between the scholarship specialty and the work he/she will do.
4. Performance evaluation for the last two years should not be less than "Very Good".
5. Getting acceptance from a recognized training Institution.
6. Should be competent in the language of the training program.
7. The training program aims at providing the trainers with new skills needed for their present and future work.
8. Nomination for Training should be by the trainer's place of work which should also the kind of program and the work to be done by him/her after training.
9. A female student should be accompanied by a chaperon during the whole period of scholarship.

Scholarships and Training are awarded by a decision from the University Board based on the recommendations of the institution which the employee belongs to and the Scholarships and Training Committee. The decision should include the degree, the major, the minor specialization, the duration of the scholarship and the educational institution where he/she will study.

The non-academic scholarship students (administrative and technicians) are eligible for the same financial benefits given to other government civil employees.

Policy and Procedure for Scientific Research and Innovation



جامعة الإمام عبد الرحمن بن فيصل

IMAM ABDULRAHMAN BIN FAISAL UNIVERSITY

كلية الصيدلة | College of Pharmacy

Policy Title: Policy and Procedure for Scientific Research and Innovation

Policy Code: COP-RI-002

Date of Initial Approval: May 2017

Date of Last Review: January 2025

Next Review Data: January 2028

Approved by: College Council

Responsible Office: Vice Deanship of Research and Innovation

1. Purpose

This policy outlines the College of Pharmacy approach to promoting, managing, and monitoring scientific research and innovation. In alignment with the charter of Imam Abdulrahman Bin Faisal University (IAU), research is a core institutional objective. The Research and Innovation Unit (RIU) is responsible for ensuring that all research activities conducted under the College's name meet the highest scientific and ethical standards and contribute to academic excellence, innovation, and national research goals.

2. Scope

This policy applies to:

- All students at the College of Pharmacy
- PharmD interns
- Faculty members
- Collaborating researchers conducting research under the College's name

3. Definitions

- **RIU:** Research and Innovation Unit, College of Pharmacy
- **PI:** Principal Investigator
- **Converis:** IAU's online platform for research proposal and ethics submission

4. Responsibilities

Stakeholder	Responsibilities
RIU	Reviewing research proposals, monitoring ethical compliance, managing research data and KPIs, maintaining research records, and offering consultations.
Research Mentors	Supervising student and intern researchers and ensuring compliance with approved protocols.
Internship Program Director	Approving final versions of interns research proposals.
Faculty Researchers	Submitting research outputs, updates, and ethical approvals to the RIU in a timely manner.

5. Research Procedures

5.1. Undergraduate Research

- Students (individually or in groups) select a research topic.
- Pre-approval is required from the RIU before proposal development.
- Students complete and submit Form 1, endorsed by their mentor, to the RIU.
- The RIU reviews and, if compliant, issues a formal approval letter.
- Students should allow 2–4 weeks for the review process.

5.2. Intern Research

- Interns select a research topic under faculty supervision.

- Pre-approval is required from the RIU.
- Form 2 must be completed, reviewed by the mentor, and submitted to the RIU.
- Final proposals must be approved by the Internship Program Director.
- Upon approval, a formal letter is issued to interns and their mentor within 2–4 weeks.

5.3. Faculty Research

- Faculty are encouraged to actively participate in research activities.
- All faculty must submit their annual publication record to the RIU.
- Abstracts of new research projects under the College's name must be submitted to the RIU.
- PIs must report any funded projects, budgets, and updates.

6. Ethical Approval Process

- A complete proposal with methodology must be submitted to the RIU.
- The RIU schedules the proposal for the next unit meeting.
- If ethical approval is required:
 - The PI must obtain departmental endorsement.
 - The PI applies through the Converis system.
- If not required, the RIU issues a no-need-for-approval letter.

7. Research Proposal Guidelines

7.1. Format

- Maximum: 4 pages or 1,000 words (excluding annexes)
- Includes cover letter, title, objectives, design, outcomes, methodology, and references.

7.2. Required Sections

- Title
- Introduction (max. 250 words)
- Objectives
- Expected outcomes
- Study design and duration
- Sampling and inclusion/exclusion criteria
- Data collection and analysis plan
- At least 5 Vancouver-style references
- Annexes (questionnaires, data collection tools, etc.)

8. Research Performance Monitoring and KPIs

8.1. Purpose

To evaluate the effectiveness and progress of research activities, the RIU monitors a set of performance indicators aligned with strategic priorities.

8.2. Key Research KPIs

1. Number of submitted and approved research proposals
2. Number of completed student, intern, and faculty research projects
3. Number and quality of publications (indexed/non-indexed)
4. Citation metrics (average citations per paper)
5. Number of funded projects and total funding received
6. Number of student researchers involved
7. Number of publications with students as co-authors
8. Conference participation (national/international)
9. Number of research workshops and training sessions
10. Research requiring and receiving ethical approval
11. Innovation outputs (e.g., patents, prototypes)

8.3. KPI Monitoring Procedure

- **Data Collection:** Via annual reports, Converis data, SciVal data and publication databases
- **Verification:** Based on documentation (e.g., DOIs, approval letters)
- **Reporting:** Annual reports submitted to the Dean and College Board
- **Action:** Gap analysis and improvement plans initiated by RIU
- **Archiving:** All KPIs-related documents are stored for quality assurance and audits

Appendix: Form 1 – Undergraduate Research Proposal Submission Form



جامعة الإمام عبد الرحمن بن فيصل
IMAM ABDULRAHMAN BIN FAISAL UNIVERSITY

كلية الصيدلة | College of Pharmacy

**Form 1: Undergraduate Research Proposal
Submission Form**

To be completed by the student/intern and reviewed by the research mentor.

1. Personal Information

Student Name:

University ID:

Email:

Mobile Number:

Academic Year:

GPA:

2. Research Project Information

Project Title:

Research Type:

Area of Research:

Proposed Duration of Research: From: ____/____/20__ To: ____/____/20__

3. Research Mentor Information

Mentor Name:

Department:

Email:

Phone (optional):

4. Proposal Summary

Attach a detailed proposal with the following sections: Introduction, Objectives, Methods, Ethical Considerations, and References.

Brief Summary:

5. Ethical Approval

Does this research involve human or animal subjects?

Yes No

If yes, has the proposal been submitted to the Ethics Committee?

Yes No Not yet

6. Declaration

I hereby declare that the information provided is accurate and I will comply with all research policies and ethical standards of IAU.

Signature: _____ Date: ____/____/20____

7. Mentor’s Recommendation

I have reviewed the proposal and support the application.

Mentor Name: _____

Signature: _____

Date: _____

For RIU Use Only

Approved Needs Revision Rejected

Comments: _____

Reviewed by RIU Member: _____

Date: _____

Approval Letter Issued on: ____/____/20____

Appendix: Form 2 – Internship Research Proposal Submission Form



جامعة الإمام عبد الرحمن بن فيصل

IMAM ABDULRAHMAN BIN FAISAL UNIVERSITY

كلية الصيدلة | College of Pharmacy

Internship Research Proposal Submission Form

To be completed by the student/intern and reviewed by the research mentor.

1. Personal Information

Intern Name(s):

University ID(s):

Email(s):

Training Site:

Start Date of Research:

Expected Completion Date:

2. Research Project Information

Project Title:

Research Type:

Area of Research:

Proposed Duration of Research: From: ____/____/20__ To: ____/____/20__

3. Research Mentor Information

Mentor Name:

Department:

Email:

Phone (optional):

4. Proposal Summary

Attach a detailed proposal with the following sections: Introduction, Objectives, Methods, Ethical Considerations, and References.

Brief Summary:

5. Ethical Approval

Does this research involve human or animal subjects?

Yes No

If yes, has the proposal been submitted to the Ethics Committee?

Yes No Not yet

6. Declaration

We confirm that this project is our original work and complies with the university's research ethics policy.

Intern Signature(s): Date: ____/____/20__

7. Mentor's Recommendation

I have reviewed the proposal and support the application.

Mentor Name:

Signature:

Date:

8. Internship Program Director Approval

I confirm that this research proposal aligns with the internship objectives.

Director Name:

Signature:

Date:

For RIU Use Only

Approved Needs Revision Rejected

Comments:

Reviewed by RIU Member:

Date:

Approval Letter Issued on: ____/____/20__

Policy and Procedure for Procurement of Research Equipment



جامعة الإمام عبد الرحمن بن فيصل

IMAM ABDULRAHMAN BIN FAISAL UNIVERSITY

كلية الصيدلة | College of Pharmacy

Policy Title:	Policy and Procedure for Procurement of Research Equipment
Policy Code:	COP-RI-003
Date of Initial Approval:	May 2017
Date of Last Review:	January 2025
Next Review Data:	January 2028
Approved by:	College Council
Responsible Office:	Vice Deanship of Research and Innovation

Purpose

This policy outlines the procedures for the procurement, inspection, installation, and management of research equipment at the College of Pharmacy, Imam Abdulrahman Bin Faisal University (IAU), ensuring that all purchases align with strategic research and educational needs and comply with university and national procurement regulations.

Scope

This policy applies to all research equipment procurement processes and related activities, including planning, approval, inspection, maintenance, training, and documentation across all departments of the College of Pharmacy.

Procurement Planning and Prioritization

- The regulations and manuals for the procurement process are published on the IAU website ([procurement process](#)). The Directorate General of Procurement and Competitive Bidding of the university is responsible for meeting all the University's requirements of instruments, appliances, supplies and the University campus projects according to the policy.
- Procurement of research equipment is conducted in coordination with department heads, lab representatives, and the Research & innovation Unit and the Lab Council.
- Each department submits its equipment needs, which are reviewed, prioritized, and consolidated by the Lab Council.
- Prioritized requests are approved by the Dean and forwarded to the Directorate of Procurement, which manages the tendering and purchasing processes in accordance with IAU procurement policies and Saudi government regulations (Figure 1).

Quotation, Evaluation, and Approval Process

- A minimum of three quotations must be obtained for each item, following competitive bidding protocols.
- Upon receiving quotations, a departmental committee is formed to inspect specifications, assess technical suitability, and recommend the most appropriate option.
- Decisions are recorded in formal meeting minutes and forwarded to the Purchasing Department for final administrative processing and approval by higher authorities.

Delivery, Installation, and Maintenance

- All equipment deliveries undergo technical inspection upon receipt to ensure they match specifications.
- The supplier is responsible for installation, initial calibration, and user training.
- A maintenance contract is required for all high-value instruments, including a scheduled plan for routine servicing and emergency repairs.
- Maintenance activities are documented in logs maintained by the Lab Council.

Documentation and Record-Keeping

- Records include purchase requests, quotations, committee minutes, technical inspection reports and maintenance schedules.



Figure 1: Flow-chart of the purchase process.

- A centralized inventory of all research equipment and Standard Operating Procedures (SOPs) is maintained and periodically updated by the Lab Council.

Compliance and Ethical Considerations

- All equipment procurement must follow university procurement laws.
- Any potential conflict of interest must be declared. In such cases, the individual must abstain from procurement decision-making.

Policy and Procedure for Research Facilities and Equipment Management



جامعة الإمام عبد الرحمن بن فيصل
IMAM ABDULRAHMAN BIN FAISAL UNIVERSITY
كلية الصيدلة | College of Pharmacy

Policy Title:	Policy and Procedure for Research Facilities and Equipment Management
Policy Code:	COP-RI-004
Date of Initial Approval:	May 2017
Date of Last Review:	January 2025
Next Review Data:	January 2028
Approved by:	College Council
Responsible Office:	Vice Deanship of Research and Innovation

Purpose

This policy outlines the procedures for the safe selection, use, management, and maintenance of research facilities and equipment at the College of Pharmacy. It aims to:

- Ensure safe and effective utilization of research equipment and facilities.
- Minimize risks and injuries to staff, students, and laboratory users.
- Promote regulatory compliance, proper documentation, and responsible use.
- Establish systems for continuous training, supervision, and risk management.

Scope

This policy applies to all:

- Research equipment and tools used in laboratories across the college
- Faculty, researchers, staff, students, and technicians accessing these facilities
- Laboratories including departmental labs and the Central Instrumentation Facilities (CIF)

Definition

Research Equipment includes all tools, machines, and devices used in laboratory-based research activities, including but not limited to:

- Simple hand tools
- Complex laboratory machinery
- IT and digital instruments
- Instruments operating under thermal, mechanical, chemical, radiation, or electrical systems
- Disposable labware and safety accessories

Policy Statement

The College of Pharmacy is committed to ensuring that all research equipment and facilities are:

- Properly selected and procured for their intended scientific or instructional use
- Installed and maintained in accordance with manufacturer and institutional safety standards
- Regularly inspected, risk-assessed, and used only by trained, qualified personnel
- Supported by proper documentation and log systems to ensure traceability and accountability

Responsibilities

Stakeholder	Responsibility
Vice Dean for Research and Innovation	Oversees overall policy compliance, safety standards, risk assessments, and log reviews.
Designated Expert Faculty	Conducts or supervise equipment risk assessments; report non-compliance.
Laboratory Council Staff	Conduct inspections, coordinate maintenance, and document training, maintenance, and usage logs.

Quality Management and Academic Accreditation Unit	Conducts annual internal audits on all college facilities including the research facilities
Faculty, Staff, and Students	Use equipment responsibly as trained and report any defects or safety issues.

Risk Assessment and Safety Arrangements

The Vice Dean for Research and innovation or a designated faculty member from the Lab Council must ensure that a **risk assessment** is completed for each piece of research equipment, covering:

- Installation and setup
- Routine use and operation
- Preventive and corrective maintenance
- Equipment malfunction or emergency scenarios
- Removal or disposal

Risk assessments must consider:

- Suitability of the equipment for its intended use
- Mechanical, electrical, thermal, ergonomic, chemical, or radiation hazards
- Potential exposure to noise, vibration, or toxic substances
- Required control measures and personal protective equipment (PPE)
- Training, supervision, and access limitations
- Inspection frequency and detailed checklists
- Record-keeping and documentation requirements

Research Facilities Management

Facilities Management Structure

- Each department designates a Lab-in-Charge responsible for laboratory oversight and safety.
- Specialized equipment within the Central Instrumentation Facility (CIF) is assigned to expert faculty, who ensure proper usage, calibration, training, and documentation.
- Usage of shared equipment is supervised and scheduled by the Lab Council to ensure equitable access.

Facility Infrastructure and Safety

- All laboratories are equipped with:
 - Fire alarms, and safety sprinklers
 - Eyewash stations, first-aid kits, fire extinguishers, and PPE cabinets
 - Hazardous signage and material labelling
 - Secure access systems (locks, surveillance cameras, and 24/7 security)
- Waste disposal is managed through certified contractors such as HYGI SERV and SRACO.

Specialized Facilities

- **Departmental Labs:**
 - Pharmaceutics Lab, Natural Products Lab, Pharmaceutical Chemistry Lab, and Pharmacology Lab, each with specialized functions and equipment.
- **Central Instrumentation Facility (CIF):**
 - Houses HPLC-MS/MS, LC-MS/MS, GC-MS, FTIR, NMR, Zetasizer, and other high-end instruments.
 - Access is supervised by trained faculty with booking and usage protocols in place.
 - NMR and fluorescence microscopy suites have restricted access and dedicated operators.

Procedures

1. **Pre-Purchase Safety Check**
 - The Vice Dean for Research and innovation or delegate must ensure proposed equipment meets technical and safety standards.
2. **Inspection and Maintenance**
 - All equipment must be inspected by competent personnel.
 - Sophisticated instruments such as the LC-MS/MS and GC-MS must be maintained by experienced faculty members to ensure regular tuning, calibration, and troubleshooting.
 - Routine maintenance is performed by the Biomedical Engineering Department and includes:
 1. Regular inspection
 2. Preventive and corrective maintenance
 3. Emergency repair support
 - A logbook is maintained for each instrument to record usage, calibration, and any incidents.
3. **Training and Supervision**
 - All users must undergo documented training.
 - Additional supervision is required for high-risk or complex instruments.
4. **Risk Documentation**
 - Equipment with significant hazards must have a written risk assessment.
 - All safety-related documents must be stored for at least five years.
5. **Reporting Defects**
 - Defects or incidents must be reported immediately to the department head or lab supervisor or directly to the head of the Lab Council.
 - Corrective actions are coordinated by the Vice Dean for Research and Innovation and the Head of the Lab Council.
6. **Oversight and Monitoring**

- Expert faculty are assigned to monitor high-risk equipment.
- Safety records and usage logs are reviewed regularly.

Inventory and Access Management

- Each department maintains an updated inventory of research equipment, consumables, and chemicals.
- The college's central inventory, including CIF equipment, is published on shared OneDrive link accessible by all faculty.
- Logbooks are maintained for each instrument to track usage, calibration, and incidents.
- Equipment is made accessible to faculty and students upon training and approval.

IT and Digital Infrastructure

- Laboratories are supported by institutional IT systems with secured access, data backup, and usage monitoring.
- Computers and data handling instruments are subject to the same safety and access policies.

Evaluation and Review

- The Lab Council is responsible for:
 - Maintaining a central archive of risk assessments, inspection logs, and training records.
 - Reviewing safety and compliance performance annually.
 - Coordinating with external and internal auditors for facility evaluations.
- The Quality Management and Academic Accreditation is responsible for conducting annual internal audits on all college facilities including the research facilities.
- Laboratory usage and user feedback are monitored through institutional surveys administered via the IAU Estibana platform, including instruments such as the Course Evaluation Survey, Student Experience Survey, and Program Evaluation Survey.

Chemical and Biohazard Waste Disposal Policy and Procedure



جامعة الإمام عبد الرحمن بن فيصل

IMAM ABDULRAHMAN BIN FAISAL UNIVERSITY

كلية الصيدلة | College of Pharmacy

Policy Title: Chemical and Biohazard Waste Disposal Policy and Procedure

Policy Code: COP-RI-005

Date of Initial Approval: May 2017

Date of Last Review: January 2025

Next Review Data: January 2028

Approved by: College Council

Responsible Office: Vice Deanship of Research and Innovation

Purpose

This policy establishes standardized procedures for the safe handling, segregation, storage, and disposal of chemical and biohazardous waste generated from teaching, research, and laboratory activities at the College of Pharmacy. It aims to ensure compliance with national safety regulations, protect human health and the environment, and maintain a safe academic and research environment.

Scope

This policy applies to:

- All faculty, staff, researchers, students, interns, and technical personnel involved in laboratory work.
- All chemical and biological waste generated within research and teaching laboratories, including the Central Instrumentation Facility (CIF) and departmental labs.

Definitions

- **Chemical Waste:** Unused or expired chemicals, solvents, reagents, and hazardous laboratory materials that may pose risks to health, safety, or the environment.
- **Biohazardous Waste:** Biological materials including human/animal tissues, microbial cultures, contaminated disposables (e.g., pipette tips, gloves), sharps, and other infectious agents requiring specialized handling.
- **Sharps:** Needles, syringes, scalpels, or other objects capable of puncturing or cutting skin.
- **Waste Contractor:** An external company licensed to collect, transport, and dispose of hazardous waste (e.g., HYGI SERV).

Policy Statement

The College of Pharmacy is committed to:

- Complying with local and international safety and environmental regulations on hazardous waste disposal.
- Minimizing risks to personnel, facilities, and the environment through proper waste segregation, labelling, and containment.
- Ensuring that all personnel handling hazardous waste are properly trained and supervised.
- Partnering only with licensed waste management contractors for hazardous waste collection and disposal.

Roles and Responsibilities

Stakeholder	Responsibilities
Vice Dean for Research and Innovation	Ensure institutional compliance with waste disposal policies; coordinate with external contractors.
Lab Supervisors / Principal Investigators	Oversee proper handling, labeling, and temporary storage of hazardous waste in their laboratories.
Lab Technicians / Lab Council Staff	Implement waste segregation protocols, conduct routine waste inspections, and ensure containers are available and labeled.

Faculty, Staff, and Students	Follow all waste handling protocols and report incidents or non-compliance immediately.
Waste Contractor (e.g., HYGI SERV)	Collect, transport, and dispose of hazardous waste in accordance with national regulations.

Procedures for Waste Disposal

A. Segregation and Labeling

All laboratory users must segregate waste at the point of generation as follows:

Waste Type	Container	Label
Chemical Waste	Leak-proof, chemical-resistant containers	"Chemical Waste" – include type and date
Biohazardous Waste	Autoclavable red bags in rigid containers	"Biohazard Waste" – include lab name and date
Sharps	Puncture-resistant sharps container	"Sharps Waste – Do Not Reopen"
Broken Glass	Labeled cardboard box or glass waste bin	"Broken Glass – Non-Biohazardous"

- All containers must be clearly labelled, closed securely, and stored in designated areas.

B. Temporary Storage

- Waste must be stored in designated areas within each laboratory or in centralized temporary storage rooms.
- Waste must not be stored in hallways or common-use areas.
- Containers must be checked weekly by lab staff and replaced when 75% full.

C. Collection and Final Disposal

- The University contracts with licensed hazardous waste disposal companies (e.g., HYGI SERV for biohazard waste and SRACO for cleaning support).
- The contractor collects waste on a scheduled basis (e.g., weekly or biweekly), as coordinated by the Lab Council.
- A manifest or logbook must be signed by the lab representative and contractor at the time of collection.

Training and Awareness

- All laboratory personnel must receive annual training on chemical and biohazardous waste management.
- Training includes:
 - Waste classification and segregation
 - Use of PPE
 - Spill response and emergency procedures

- Proper labelling and documentation
- Records of training must be maintained by the Lab Council.

Emergency Spill Response

- Minor spills can be handled by trained personnel using spill kits.
- Major or dangerous spills must be reported immediately to the Lab Supervisor and Safety Officer.
- A spill response plan must be visibly posted in every laboratory.

Documentation and Record Keeping

The following records must be maintained for a minimum of five years:

- Waste disposal manifests and collection logs
- Training attendance and certifications
- Incident or spill reports
- Equipment and inspection checklists for waste containers and storage areas

Compliance and Auditing

- Regular audits of waste handling procedures and storage areas are conducted by the Lab Council.
- Non-compliance may result in disciplinary action and retraining.
- The College of Pharmacy adheres to national environmental and safety regulations, including those from:
 - The Ministry of Environment, Water and Agriculture (MEWA)
 - Saudi Food and Drug Authority (SFDA)
 - General Directorate of Civil Defence

Research Funding and Grant Management Policy



جامعة الإمام عبد الرحمن بن فيصل
IMAM ABDULRAHMAN BIN FAISAL UNIVERSITY
كلية الصيدلة | College of Pharmacy

Policy Title: Research Funding and Grant Management Policy

Policy Code: COP-RI-006

Date of Initial Approval: May 2017

Date of Last Review: January 2025

Next Review Data: January 2028

Approved by: College Council

Responsible Office: Vice Deanship of Research and Innovation

Purpose

This policy establishes the framework for the effective management of research funding and grants at the College of Pharmacy, Imam Abdulrahman Bin Faisal University (IAU). It aims to support faculty, researchers, and students in securing, utilizing, and reporting research funds in a manner that is compliant with institutional regulations, national policies, and international standards of research integrity and financial accountability.

Scope

This policy applies to all research funding activities at the College of Pharmacy, including:

- Internal research grants funded by IAU
- External grants from national or international agencies, industry, and collaborators
- Research funding for faculty, graduate students, interns, and undergraduate students
- Collaborative and interdisciplinary research projects involving College of Pharmacy personnel

Definitions

- **Principal Investigator (PI):** The lead researcher responsible for the scientific and financial conduct of the research project.
- **Research Grant:** Any financial support received for the conduct of scientific research, including seed funding, competitive grants, and industry-sponsored research.
- **Funding Agency:** An internal or external organization providing financial support for research.

Policy Statement

The College of Pharmacy is committed to:

- Encouraging faculty and researchers to pursue competitive internal and external funding
- Ensuring transparent, ethical, and effective use of all research funds
- Supporting compliance with the funding agency's guidelines, university financial regulations, and national laws
- Strengthening research output, innovation, and impact through strategic funding management

Responsibilities

Stakeholder	Responsibilities
Vice Dean for Research and Innovation	Oversight of all research funding activities; verification of compliance with university and funding body policies
Principal Investigator (PI)	Preparation of proposals, execution of project activities, budget adherence, and reporting
Department Heads	Support proposal development and monitor research performance of faculty
Research and Innovation Unit (RIU)	Administrative support for proposal submission, coordination with funding agencies, documentation, and internal reporting

Deanship for Scientific Research (DSR)	Budget control, fund disbursement, expenditure tracking, and financial reporting
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Funding Sources

Research funding at the College may be obtained from the following sources:

1. **Internal Funding:**
 - University-funded research programs (e.g., Deanship of Scientific Research)
 - Student research support
2. **External Funding:**
 - National funding bodies e.g., Research, Development and Innovation Authority (RDIA), Saudi National Institute of Health (SNIH), etc.
 - International organizations, academic partners, and industry collaborations
 - Endowment or donor-supported research funds

Grant Application Process

- Researchers must submit their proposal to the Research and Innovation Unit (RIU) for review before forwarding to external or internal sponsors.
- All proposals must include:
 - Project title, objectives, and methodology
 - Budget breakdown and justification
 - Ethical considerations (if applicable)
 - Timeline and expected deliverables
- The RIU will assist with formatting, compliance, and approvals from the Dean and DSR before submission.

Budget and Financial Management

- The PI is responsible for ensuring that all expenditures align with the approved budget and funding agency guidelines.
- All spending must comply with IAU's financial regulations and procurement procedures.
- Budget reallocations or changes require prior written approval from the funding body and DSR.
- The DSR, in coordination with the PI and RIU, will maintain accurate financial records.

Monitoring, Reporting, and Compliance

- The PI must submit periodic technical and financial reports as required by the funding agency.
- A copy of all submitted reports must be shared with the RIU.
- In cases of non-compliance or financial mismanagement, the College reserves the right to suspend funding and initiate an investigation.

Collaborative Projects and Industry Engagement

- Collaborative projects involving other institutions or industry must have a Memorandum of Understanding (MoU) or contract outlining roles, intellectual property rights, and financial responsibilities.
- All agreements must be reviewed and approved by IAU's Local and International Partnership Unit.

Record-Keeping and Archiving

- The RIU must maintain comprehensive records of:
 - All grant applications and approvals
 - Budgets and financial transactions
 - Progress and final reports
 - Correspondence with funding agencies
- Records must be retained for a minimum of five years after project completion, or longer if required by the funding body.

Clinical Affairs

Policy and Procedure for Advanced Pharmacy Practice Experience



جامعة الإمام عبد الرحمن بن فيصل

IMAM ABDULRAHMAN BIN FAISAL UNIVERSITY

كلية الصيدلة | College of Pharmacy

Policy Title: Policy and Procedure for Advanced Pharmacy Practice Experience

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Responsible Office: Vice Deanship of Clinical Affairs

Purpose

This document establishes policies and procedures for the Advanced Pharmacy Practice Experience (APPE) within the PharmD program. It ensures a structured, high-quality educational experience, adhering to accreditation standards and preparing students for professional pharmacy practice.

Scope

This policy applies to all PharmD students, preceptors, faculty, and affiliated training sites involved in the APPE program.

Definitions

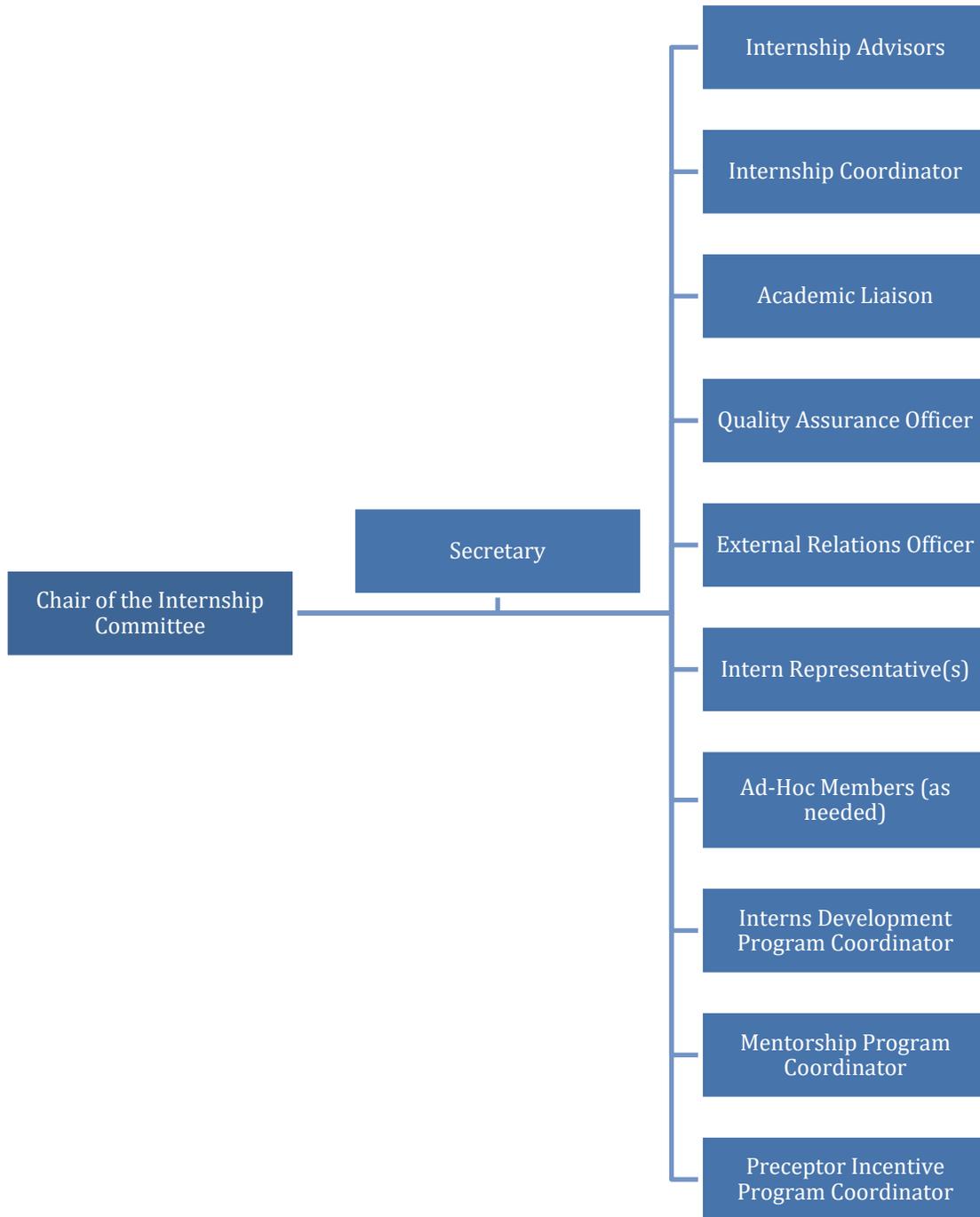
- APPE: Advanced Pharmacy Practice Experience, a series of practical rotations during the final year of the PharmD program.
- Preceptor: A licensed and qualified pharmacist responsible for mentoring and evaluating students during rotations.
- Training Site: An approved healthcare or pharmacy facility providing experiential learning opportunities.

Policy Statements

1. The APPE program will align with ACPE accreditation standards and college objectives.
2. Students must complete all pre-internship requirements prior to beginning rotations.
3. Training sites and preceptors must meet quality standards and be reviewed annually.
4. Students must comply with attendance, professional conduct, and portfolio requirements throughout the program.
5. Risk management and quality assurance measures will ensure program effectiveness.

Internship Committee Structure and Responsibilities

1. Structure



2. Responsibilities

Chair of the Internship Committee

1. Lead the committee and oversee all activities.
2. Set meeting agendas and preside over meetings.
3. Ensure alignment with the college's goals and objectives.
4. Liaise with external partners and stakeholders.
5. Approve final decisions on internship placements and policies.
6. Provide support and guidance to committee members.
7. Oversee the development and implementation of the Interns Development Program, Preceptor Incentive Program, and Mentorship Program.

Secretary

1. Prepare and distribute meeting agendas and minutes.
2. Maintain accurate records of committee activities and decisions.
3. Handle correspondence and communication on behalf of the committee.
4. Coordinate logistics for meetings and events.
5. Ensure timely dissemination of information to all members.

Internship Advisor(s)

1. Monitor intern progress and performance.
2. Address issues and concerns from interns and preceptors.

Internship Coordinator

1. Develop and manage internship schedules.
2. Coordinate placements with clinical sites and preceptors.
3. Manage the evaluation on going process and share them with the internship advisors.
4. Provide training and orientation for interns and preceptors.
5. Coordinate the absence process.

Academic Liaison

1. Ensure alignment of internship activities with academic requirements.
2. Coordinate with faculty to integrate internship experiences with coursework.
3. Provide academic support and resources to interns.
4. Serve as a point of contact for academic concerns related to internships.

Quality Assurance Officer

1. Develop and implement evaluation metrics for the internship program.
2. Evaluate and update the internship manual.
3. Conduct regular assessments and surveys to measure program effectiveness.
4. Compile and analyze feedback from interns and preceptors.
5. Recommend improvements based on evaluation data.
6. Ensure continuous quality improvement of the internship program.
7. Manage the internship risk management.
8. Assess the effectiveness of the Interns Development Program, Preceptor Incentive Program, and Mentorship Program.

External Relations Officer

1. Develop partnerships with external organizations and clinical sites.
2. Facilitate communication and collaboration with external stakeholders.
3. Organize networking events and career fairs.
4. Promote the internship program to potential partners and sponsors.
5. Manage any contractual agreements with external partners.
6. Award academic titles to contributors of intern training.

Intern Representatives

1. Represent the interests and concerns of interns on the committee.
2. Provide feedback on the intern experience and suggest improvements.
3. Act as a liaison between interns and the committee.
4. Participate in decision-making processes related to the internship program.

Ad-Hoc Members (as needed)

1. Provide expertise and support on specific projects or issues.
2. Participate in subcommittees or task forces as needed.
3. Assist with special events, initiatives, or research related to internships.

Interns Development Program Coordinator

1. Design and implement professional development activities for interns.
2. Organize workshops, seminars, and training sessions.
3. Coordinate with internship coordinators to integrate development activities.
4. Monitor and evaluate the effectiveness of the development program.

Mentorship Program Coordinator

1. Develop and oversee a mentorship program connecting interns with experienced professionals.
2. Recruit and train mentors from the clinical community.
3. Match interns with suitable mentors based on interests and career goals.
4. Monitor the progress of mentorship relationships and provide support as needed.
5. Evaluate the outcomes and impact of the mentorship program.

Preceptor Incentive Program Coordinator

1. Develop and manage a program to incentivize and recognize preceptors.
2. Identify and implement various incentive strategies (e.g., awards, recognition events, professional development opportunities).
3. Communicate the benefits and structure of the program to preceptors.
4. Monitor and assess the program's impact on preceptor engagement and performance.

Pre-internship Requirements

Before commencing the internship, students are required to fulfill the following pre-internship obligations:

- **Academic Clearance:** Obtain a clearance letter from the Academic Affairs confirming successful completion of all prerequisite courses.

- **Orientation Attendance:** Students are required to attend the orientation session before the beginning of the internship program. This session is essential for understanding the program's structure, expectations, and resources available.
- **Documentation Submission:** Students must provide:
 - Saudi ID or Iqama, passport (if applicable), and mother's ID (for non-Saudi interns with a Saudi mother).
 - Bank account IBAN.
 - Updated CV detailing your academic and professional experiences.
 - Proof of immunizations required immunizations, including MMR, polio, tetanus/diphtheria, varicella, influenza, and hepatitis B.
 - Basic Life Support (BLS) or CPR certification.
- **Additional Requirements:** GPA verification, physical examination, infection control certification, and health volunteering documentation, if required.
- **Training Preference.:** Student to fill out and submit the training preference form distributed by the internship coordinator.

Program Structure

- The PharmD internship program is organized into a series of rotation blocks. Each block consists of 4 weeks during which students complete a specific rotation.
- There are a total of 11 rotations which include 4 core and 7 elective rotations
 - Core Rotations
 - Community pharmacy
 - Ambulatory patient care/ outpatient pharmacy
 - Inpatient pharmacy
 - Internal medicine
 - Elective Rotations (minimum 2 elective rotations which focuses on direct patient care)
 - Direct patient care rotations:
 - Critical Care
 - Nephrology
 - Solid Organ Transplant
 - Oncology/Hematology
 - Pediatrics
 - Pediatrics Critical Care
 - Neonatal
 - Infectious Diseases
 - Cardiology
 - Total Parenteral Nutrition
 - Psychiatry
 - Other elective rotations:
 - Saudi FDA
 - Pharmacy Administration
 - Drug Information Center
 - Toxicology and Poison Control
 - Drug Manufacturing
 - Drug Company
 - Medication Safety
 - Pharmacy Quality Assurance
 - Academia

- Informatics
 - Pharmacoeconomics
- The start and end dates of each block are fixed and communicated to sites and students prior to the commencement of the internship period.

Training Sites and Preceptors

1. Training Site Requirements:

Training sites must meet the following criteria to be eligible for inclusion in the program:

- Recognition: The training site must be recognized by the relevant professional bodies or deemed acceptable by the college, ensuring compliance with essential legal and operational requirements.
- Adequate Facilities: The site must provide necessary resources, including workstations, patient access, technology, and reference materials.
- Learning Environment: The site should foster a positive learning environment conducive to professional growth, encouraging skill development, critical thinking, and ethical practice.
- Diversity of Experience: The site should provide opportunities for students to engage in a range of professional activities, including patient care (if applicable), management, and administrative tasks.
- Commitment to Education: The site must demonstrate a commitment to the education and development of students, with an understanding of the program's learning objectives.
- Compliance with Program Requirements: The site must comply with the college's internship program guidelines and meet student supervision and training needs.

2. Preceptors Requirements:

Preceptors must fulfill the following criteria to qualify for inclusion in the program:

- Qualifications: Preceptors are required to have relevant qualifications, including proper licensure and certifications in the field of pharmacy, with a minimum of a bachelor's degree in pharmacy.
- Experience: Preceptors should have a minimum of 3 years of professional experience in the field and possess teaching, mentoring, or supervisory experience.
- Preceptor-to-Student Ratio: The preceptor-to-student ratio should ideally be 1:2, ensuring quality interaction and mentorship. At a minimum, the ratio should not exceed 1:3 to maintain effective supervision and support for students.

Training sites and preceptors will undergo annual review to ensure compliance with the program's standards.

Placement Process

- Student Rotation Preferences: Information on each student's desired rotations and locations.
- Training Site Availability: Review of available training sites to ensure quality opportunities for students.
- Placement Alignment: Integration of student preferences with the educational objectives of the APPE program and site availability.

Assignment Changes

Assignment changes will be allowed under the following conditions:

- Preceptor-Initiated Changes: If unforeseen circumstances affect a preceptor's availability, the preceptor should contact the student advisor at the college to request a change.
- Advisor -Initiated Changes: The advisor may mandate changes to rotation assignments for various reasons, including student performance or attitude, or changes in preceptor availability or eligibility.
- Student-Initiated Changes: Student requests for changes will be considered only under serious professional circumstances. Students must submit a written explanation using the switch rotation form to the student advisor. There is no guarantee of an available alternative rotation or a specific rotation type.
- All change requests, once approved by the student advisor, must be reviewed with the APPE coordinator to arrange an alternative rotation and then receive final approval from the head of the internship committee.

Attendance and Leave Policy

A. Attendance Requirements:

- All students must sign and comply with the APPE attendance policy. Each student is required to spend a minimum of 40 contact hours per week at their assigned site, totaling 160 hours per rotation.
- Students are expected to be present at the training site for 8 hours per day. Additional hours may be necessary to complete assignments as determined by both the college and the hospital preceptor.
- Attendance is compulsory for all APPE visits on the scheduled APPE day unless prior arrangements have been made and approved by both the hospital preceptor and the APPE coordinator.
- Time missed will be made up at the preceptor's discretion.
- Any absence for more than 5 days will result in rotation termination.
- Students should follow site policy about any bad weather situations.
- All leaves will be tracked to ensure students complete the required number of contact hours and meet attendance requirements.

B. Permitted Leaves

- Students may be granted up to 3 days of leave for educational purposes, such as attending conferences, workshops, or other academic events. Each student is allowed a maximum of 5 educational leaves throughout the program. Prior approval from both the preceptor and the APPE coordinator is required.
- Students may be granted 2 days leave for taking the Saudi Pharmacy Licensure Examination (SPLE) exam. Students must provide the exam schedule and obtain approval from the preceptor and APPE coordinator.
- Requests for other types of professional leave will be considered on a case-by-case basis and must be approved by the preceptor and APPE coordinator.
- Students are entitled to up to 2 months of maternity leave. Notification and approval from the preceptor and APPE coordinator are required.
- Students are granted leave for the National Day and Eid Al-Fitr and Eid Al-Adha holidays. Specific dates will be communicated in advance.
- All planned leave requests must be submitted with a notification at least two weeks in advance.

C. Absence Reporting

- In the event of personal circumstances preventing attendance, the student must notify both the respective preceptor and APPE coordinator as soon as possible.
- Students must complete the online absence request form, which includes a brief description of the reason for the absence, supporting documentation, and a plan for making up the missed time. This form requires approval from both the preceptor and the APPE coordinator.

D. Unexcused Absences

- Unexcused absences are not tolerated and jeopardize the student's ability to complete the program.
- Such absences can lead to the student failing the rotation.
- Failing to inform the coordinator and preceptor about the need to be absent, arrive late, or leave early due to illness or an emergency will result in an unexcused absence.

Professional Conduct**1. Professional and Academic Integrity:**

Students are required to adhere to the IAU for Health Sciences Academic Integrity Code of Conduct in all professional and academic matters. This encompasses interactions with health team members, handling confidential and protected patient health information, and providing timely care under the direct supervision of the designated preceptor. Punctuality at the rotation site, as stipulated by the preceptor, is mandatory; tardiness may be considered an unexcused absence. Any violation of these policies, confidentiality, or regulations is solely the student's responsibility and may result in further consequences.

2. Dress Code:

The students must conform to the following dress code, in addition to any required dress codes required by the training site:

- All students must wear their official IAU College of Pharmacy ID when participating in APPE rotations; if the rotation site requires its own ID badge, the student is expected to wear both badges.
- At all times clothing should be neat and clean, modest in style and color, and should fit properly and be loose enough to allow performance of experiential activities.
- White coats must be worn for all rotation activities; white coats must be clean and freshly ironed.

3. Confidentiality

The student is responsible for maintaining confidentiality in agreement with the policies of the hospital. Inappropriate disclosure of protected health information or other related information could result in a student's dismissal from the training site.

4. Disability

Students with disabilities or those needing accommodations at practice sites should notify the internship coordinator.

Student Dismissal Procedure

Any student who is not in compliance with the college and hospital policies should face consequences for violation of policies. In first 2 cases of violation of rotation policy, student will be issued with a warning

letter after the thorough enquiry of the incident. In breach of policies after 2 warning letters students will be dismissed/terminated from the internship with immediate effect if found guilty.

Procedure to Report Concerns

- Any discrepancies within the rotation activities or training sites should be addressed to APPE coordinator which will be forwarded to Advisors and the head of internship committee
- For interns who have conflict with the hospital preceptor or training site:
 - The intern should follow the following steps:
 - Student should first communicate with his or her preceptor regarding the conflict or the issue.
 - If the conflict can't be solved by the 1st step, students should contact the training coordinator of the training center.
 - If the issue is still unsolved then as a last step, students should contact the APPE coordinator.
 - For the hospital preceptor who faces issues with intern he or she should follow the below steps:
 - Preceptor should contact the training coordinator at his/her site.
 - The training coordinator can communicate with the APPE coordinator at the college to resolve the issue as following:
 - Initial Resolution:
The Intern Advisor shall be the first point of contact to address and resolve any complaints raised by the intern.
 - Escalation Process:
If the intern is not satisfied with the resolution provided by the Intern Advisor, the matter shall be escalated to the Vice Dean for Clinical Affairs.
 - Committee Formation:
Upon escalation, the Vice Dean for Clinical Affairs shall form a committee to review and address the intern's complaint in a formal and comprehensive manner.
 - Final Decision:
The committee's decision shall be considered final and will be communicated to the intern in a timely manner.

Roles and Responsibilities of Students

Each student is responsible for ensuring successful completion of the rotation by emphasizing the following:

Before starting the rotation, students should:

- Be knowledgeable of and compliant with the material in internship manual
- Fulfill all prerequisites specific to the rotation.
- Send an introductory email and a copy of the APPE resume to the preceptor at least 3- 4 weeks before the start of the rotation.
- Ask the preceptor if there are any resource materials to read for the rotation.
- Ask the preceptor about parking, dress code, usual hours and other rotation relevant issues.

During the rotation:

- Submit all assignments and assessments in a timely fashion
- Positively accept feedback and constructive criticism and identify its intended purpose (helping the student grow professionally)
- Provide consistent and punctual attendance
- Express willingness and enthusiasm for learning
- Always have courteous, respectful and non-judgmental communication with preceptors, patients, students, and staff
- Be present at the training site for a minimum of 40 hours per week
- Behave professionally and respectfully at all times
- Be proactive with their experiential learning, which necessitates active participation, communication, and independent learning opportunities at every site
- Never be hesitant to admit they do not know something and should seek help when required
- Never publicly question the advice or directions of the preceptor; these issues should be discussed in private. The student and the preceptor are encouraged to discuss differences or conflicts with the APPE Coordinator

Student Portfolio

All students must maintain a rotation binder/portfolio. The portfolio is a collection of documented learning activities. The experiential portfolio is a very important tool because it improves students' communication, writing, and organizational skills and enables faculty and preceptors to longitudinally assess the professional development of students. Also, the portfolio is a strategically organized document that can be used for future job searches. Students should share their portfolio with their preceptor at the beginning of each rotation.

Portfolio Content:

- Student CV.
- Personal and career objectives.
- Student Site Placement (Schedule).
- Student reflection(s).
- Patient care documentation (maintaining patient confidentiality), for example:
- Direct patient interaction
 - Patient care notes – e.g. Subjective, Objective, Assessment, Plan (SOAP), pharmacokinetic, renal dosing, anticoagulation management, therapy monitoring, IV to PO switches.
 - ADR/ Medication Error reports.
- Presentations/Written assignments with copies of evaluation forms signed by preceptor
 - Copy of formal presentation slides.
 - Copy of journal club presentation.
 - Any other written materials:
 - Presentation for public audience or health fair activity.
 - Patient presentation with pharmacy care plan.
 - Patient education material.
 - Drug information requests.
- Any of the following documentations:
 - Formulary management material, e.g. drug monograph, therapy and protocol review/development.

- Newsletter article.
- Medication use evaluation (MUE).
- Confidentiality statement.
- Each intern is required to include a minimum of 11 documentation samples in their portfolio. The documentation must reflect a minimum of 1 sample per rotation.
- The portfolio is not part of the evaluation, but having a completed portfolio by the end of the internship is required.

Preceptor Orientation:

- Preceptor orientation day is conducted at the beginning of the internship each year for all preceptors in training sites to discuss the following:
 - Internship objectives.
 - Core and elective rotations.
 - Objective for each rotation.
 - Preceptor expectations.
 - Assessment method.
 - Mode of communication.
 - Policy and procedures.
- Email sent to the preceptors attached with the updated manual.
- The hospital visit will be arranged before each rotation to meet each preceptor to make sure they are aware of the objectives and expectations.

Roles and Responsibilities of Preceptor

- Be willing and enthusiastic to serve as a role model and mentor for students.
- Foster an environment of mutual learning and growth.
- Provide an orientation before the rotation begins, covering both the site and systems, along with clear objectives and expectations for the rotation.
- Assist students in achieving the stated objectives of the rotation.
- Be a licensed pharmacist or healthcare provider in good standing.
- Be knowledgeable about and compliant with the material in the APPE manual.
- Assess and evaluate students' achievement of the rotation learning outcomes.
- Provide feedback to the college regarding students' skills and competencies.
- Guide students to appropriate resources to enhance their learning experience.

Assessment and Evaluation

A. Midpoint Evaluation:

The midpoint evaluation is a key verbal assessment conducted halfway through the APPE rotation. The student first reflects on their progress and areas for improvement. The preceptor then reviews and provides constructive feedback. For students who are not performing as expected, the preceptor must notify the coordinator and in collaboration with the student advisor, they will develop a contingency plan. This evaluation ensures students are on track to meet their learning objectives and allows for necessary adjustments to their training.

B. End-of-Rotation Evaluation

The end-of-rotation evaluation is a comprehensive online assessment conducted by the preceptor at the end of each APPE rotation. This evaluation is discussed in detail with the

students, providing valuable feedback on performance, strengths, and areas for improvement. It ensures students receive constructive guidance, recognize their achievements, and understand future expectations. The evaluation process is crucial for professional growth and tailoring the educational experience.

A pass/fail grading scale is used, requiring students to achieve a score of 70 or higher to pass. The evaluation and final grading are entirely determined by the preceptor, ensuring an accurate reflection of the student's performance and competency.

C. Rotation Expected Activities

- Clinical Rotations:
 - SOAP notes.
 - Medication history/patient interview/ discharge counseling/medication reconciliation.
 - Searching for a drug information request.
 - Formal patient case presentation.
 - Journal club.
- Non-Clinical Rotations:
 - Types of activities and assignments need to be agreed upon during the orientation session with the preceptor at the site.

Textbooks/Resources

Students are encouraged to develop their own personal library of resources and are advised to obtain a digital device for accessing a dependable drug and disease information database. They are expected to take initiative in sourcing relevant drug literature for patient care needs. Instructors may provide additional required or recommended readings related to conference discussions and patient care.

Internship Completion

- Upon successful completion of the 11 required rotations with a passing score and the submission of a fully updated portfolio, students will be required to complete the Internship Satisfaction Survey.
- Once these requirements are met, the internship certificate will be issued to the student, marking the completion of the program.

Program Monitoring and Quality Metrics

The Quality Assurance Officer at the internship committee is responsible for evaluating the program, student, and preceptor performance on a regular basis to ensure that goals and objectives are achieved using the following tools:

1. Student Rotation Evaluation

This evaluation will be conducted after the end of each rotation and utilized as an essential tool in the quality metrics of the internship program. The feedback gathered from students will help in assessing the effectiveness of the program, identifying areas for improvement, and ensuring the quality of the training provided. This evaluation will contribute to continuous program development and alignment with institutional standards, ultimately enhancing both student and preceptor experiences.

2. Preceptor/Site Evaluation

The preceptor/site evaluation is an essential online assessment completed by the student at the end of each APPE rotation. This evaluation allows students to provide feedback on their preceptor's performance, the quality of mentorship received, and the overall training environment at the site. Students can highlight what aspects of the rotation were most beneficial, suggest areas for improvement, and report any concerns or issues encountered. This feedback is crucial for maintaining high standards of training and for making necessary adjustments to enhance the educational experience for future students.

3. Internship Satisfaction Survey

The survey is a final assessment tool designed to gather feedback from both preceptors and interns at the end of the internship. This survey aims to evaluate overall satisfaction with the internship experience, covering aspects such as learning opportunities, guidance provided, communication, and overall environment. The feedback collected helps improve future internship programs by addressing any concerns and enhancing the quality of both the training and the support provided to students and preceptors.

Risk Management

The internship program is committed to proactively managing risks through identification, assessment, and mitigation strategies that ensure the safety of all participants and the quality of the learning experience. The Quality Assurance Officer will oversee risk management processes and ensure adherence to this policy. All students will be briefed on the program's risk management protocols at the beginning of the internship.

1. Risk Identification:

All potential risks must be identified in the following areas:

- Operational Risks: Related to the day-to-day functioning of the internship program (e.g., preceptor availability, resource shortages).
- Clinical Risks: Risks related to patient safety, student exposure to hazards, or clinical errors.
- Educational Risks: Issues that might affect the achievement of learning outcomes (e.g., insufficient mentorship or unclear expectations).
- Legal and Regulatory Risks: Non-compliance with institutional, local, or national laws, regulations, and accreditation standards.

2. Risk Assessment:

Once risks are identified, they must be assessed by likelihood and impact:

- Likelihood: The probability of the risk materializing.
- Impact: The severity of consequences if the risk occurs.
- Risks are categorized as high, medium, or low priority, with high-priority risks requiring immediate action.

3. Risk Mitigation:

For each identified risk, mitigation strategies must be developed:

- Operational Mitigation: Ensure there are contingency plans for staffing issues, resource availability, and site-specific challenges.
- Clinical Mitigation: Implement clinical safety protocols, conduct safety training, and enforce infection control practices.

- Educational Mitigation: Ensure clarity in learning objectives, regular communication, and structured feedback mechanisms between preceptors and interns.
- Legal and Regulatory Mitigation: Regular reviews of the program's adherence to legal requirements and accreditation standards.

4. Risk Monitoring:

The Quality Assurance Officer will continuously monitor risk factors:

- Incident Reporting: Any incidents, near misses, or safety concerns must be reported immediately to the Quality Assurance Officer.
- Review Meetings: Monthly reviews will assess the status of risks, identify new risks, and monitor the effectiveness of mitigation measures.
- Feedback Loops: Use student evaluations, preceptor feedback, and other sources of input to adjust and improve risk management strategies.

5. Incident Reporting and Response:

- Immediate Action: In case of a significant risk event (e.g., a safety incident or legal violation), the Quality Assurance Officer must initiate an immediate response, including investigation and corrective actions.
- Root Cause Analysis: Conduct a detailed analysis to understand the cause of the incident and prevent recurrence
- Documentation: All incidents and corrective actions must be documented for review and future reference

6. Documentation and Records:

- Risk Register: A risk register must be maintained to log all identified risks, their assessment, and mitigation measures
- Incident Logs: All incidents and related corrective actions will be documented and securely stored, with access granted to relevant personnel for reviews and audits.

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