



Quality Assurance and Institutional Effectiveness Council (QA-IEC) Meeting

Date: 30 June 2026

Time: 11:00 a.m.

Venue: Conference Room, First Floor

Meeting Ref.: QA-IEC/2025-2026/Q4/30-07-2026

AGENDA

Meeting focus: review and validation of the consolidated RIL-OBEF Corrective Action Plan for Continuous Improvement, covering 24 KPI CAPs, 156 improvement actions, Q1-Q4 activities for AY 2025-2026, progress outputs, evidence submission, internal-audit compliance, and institutional effectiveness. Participant designations are aligned with the enclosed organizational structure; actual attendance and quorum must be confirmed from the signed attendance sheet.

1. Members and Invited Participants

No.	Name / Participant Group	Role in Meeting	Designation / Unit
1	Dr. Burton A. Aggabao	Chairperson	Director, Quality Assurance and Institutional Effectiveness Affairs
2	Dr. Corrien Van Belkum	Director /CAP Owner	Director for Academic Affairs; College of Health Sciences
3	Dr. Jose Fernandez	Director /CAP Owner	Center for Research, Innovation, and Excellence
4	Dr. Mohamed Al Hammadi	Director/CAP Owner	Support Services and Community Relations
5	Dr. Ahmed Zain Elabdin	Dean / CAP Owner	College of Business Administration
6	Dr. Ahmed Khalifa	Dean / CAP Owner	College of Engineering and Technology
7	Dr. Faisal Almatalka	Dean / CAP Owner	College of Arts and Humanities
8	Dr. Issa Rabadi	Dean / CAP Owner	College of Law
9	Mr. Mohammad Jamal	Head / CAP Owner	Department of Student Recruitment and Registration
10	Mr. Nasereldeen Alnageeb	Head / CAP Owner	Center for Library and Learning Resources
11	Dr. Omraan Abdulrazak	Head / CAP Owner	Department of General Education
12	Ms. Ghanema Alraqbani	Head / CAP Owner	Department of Student Affairs
13	Mr. Basil Faris	Head / CAP Owner	Unit of Digital Innovation
14	Mr. Mohamad Hassan	Head / CAP Owner	Department of Financial Management
15	Ms. Layla Alnaqbi	Head / CAP Owner	Department of Strategic Communication and Institutional Relations
16	Dr. Hazem Aldabbas	Head / CAP Owner	Center of Development and Continuing Education
17	Ms. Ameirah Altabahi	Head / CAP Owner	Department of Human Resources
18	Engr. Mohamad Ramadan	Head / CAP Owner	Department of Facilities Management
19	Mr. Saeed Albakari	Head / CAP Owner	Unit of IT Support
20	Program Coordinators	Invited Participants / CAP Owners	All academic programs concerned
21	Concerned Faculty and Staff	Invited Participants / Evidence Owners	Academic and administrative units concerned

2. Meeting Purpose and Intended Outcomes

1. Validate the consolidated CAP architecture and confirm that all 24 KPI CAPs are linked to identified performance gaps, targets, action owners, expected contributions, quarterly activities, outputs, and evidence.
2. Review the implementation status of 156 improvement actions and distinguish between activities initiated, outputs produced, outcomes achieved, and actions that may be considered closed.
3. Validate the Q1, Q2, Q3, and Q4 sequence for AY 2025-2026 and identify incomplete actions that require recovery, rephrasing, or formal rollover into AY 2026-2027.
4. Confirm the sufficiency, accessibility, authenticity, and direct relevance of evidence supporting each progress claim and internal-audit closure.
5. Prioritize improvement measures for KPIs below benchmark or institutional target while sustaining high-performing KPIs through quality, impact, and evidence controls.
6. Approve accountabilities, validation protocols, escalation arrangements, and the next CAP monitoring cycle.

3. Documents Circulated and Reviewed

No.	Document	Purpose in the Meeting
1	FU RIL-OBEF V.11.5 Corrective Action Plan for Continuous Improvement - Consolidated CAP	Primary working document: historical performance, self-reflection, targets, action matrices, Q1-Q4 timelines, progress status, and evidence fields for 24 KPIs.
2	RIL-OBEF KPI data and performance benchmarks embedded in the consolidated CAP	Basis for identifying KPI gaps, target trajectories, high-performance areas, and priority improvement requirements.
3	Relevant internal-audit findings, evidence repository records, and unit-level source documents	Supporting records for validation of compliance, progress outputs, evidence sufficiency, and closure.

4. Order of Business

Item	Agenda Item	Lead	Expected Output
4.1	Call to order, welcome, attendance, and quorum confirmation	Chairperson	Meeting formally convened; attendance and quorum recorded.
4.2	Approval of the agenda and confirmation of the documents reviewed	Chairperson / Secretariat	Agenda and working documents approved.
4.3	Presentation of the consolidated CAP portfolio and quantitative status	Director, QA-IEA	Scope, status distribution, evidence coverage, and material gaps confirmed.
4.4	Review of Q1-Q4 primary activities, sub-activities, outputs, and implementation sequencing	Directors, Deans, Program Coordinators, Heads of Units	Quarterly deliverables validated; delayed actions rephased or escalated.
4.5	Pillar 1 and Pillar 2 review: employability, teaching, learning, and student success	Academic and support owners	Priority interventions and evidence requirements confirmed.
4.6	Pillar 3 and Pillar 4 review: placement, industry engagement, research, innovation, and impact	Academic, research, and support owners	Conversion, collaboration, research-impact, and IP actions confirmed.
4.7	Pillar 5 and Pillar 6 review: rankings, accreditation, internationalization, academic events, and community impact	QA-IEA, CRIE, academic and support owners	Readiness, sustainability, and impact-evidence requirements confirmed.
4.8	Evidence submission and internal-audit compliance review	QA-IEA / Internal Audit / Evidence Owners	Evidence accepted, returned, or identified as outstanding; closure rules confirmed.
4.9	Adoption of resolutions, responsibilities, deadlines, monitoring, and escalation arrangements	QA-IEC Chairperson	Resolutions and action directives adopted.
4.10	Other business, next review, and adjournment	Chairperson	Additional matters recorded and meeting closed.



Quality Assurance and Institutional Effectiveness Council (QA-IEC) Meeting

Date: 30 July 2026

Time: 11:00 a.m.

Venue: Conference Room, First Floor

Meeting Ref.: QA-IEC/2025-2026/Q4/30-07-2026

MEETING MINUTES AND RESOLUTIONS

Document status: Draft for confirmation and approval. The substantive minutes and quantitative findings below are grounded in the consolidated CAP used during the meeting. The signed attendance, quorum, exact wording of motions, specific deadlines, apologies, and adjournment time must be verified before final issuance.

1. Meeting Information

Meeting Title	QA-IEC Meeting: Update RIL-OBEF Corrective Action Plans, Progress Outputs, and Evidence Submission
Date	30 July 2026
Start Time	11:00 a.m.
Venue	Conference Room, First Floor
Chairperson	Dr. Burton A. Aggabao, Director, QA-IEA
Secretariat	QA-IEA Secretariat
Quorum	To be confirmed against the signed attendance sheet

2. Attendance and Apologies

No.	Name / Participant Group	Role	Designation / Unit
1	Dr. Burton A. Aggabao	Chairperson	Director, Quality Assurance and Institutional Effectiveness Affairs
2	Dr. Corrien Van Belkum	Director / Participant	Director for Academic Affairs; College of Health Sciences
3	Dr. Jose Fernandez	Director / Participant	Center for Research, Innovation, and Excellence
4	Dr. Mohamed Al Hammadi	Director / Participant	Support Services and Community Relations
5	Dr. Ahmed Zain Elabdin	Dean / CAP Owner	College of Business Administration
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10	Mr. Nasereldeen Alnageeb	Head / CAP Owner	Center for Library and Learning Resources
11	Dr. Omraan Abdulrazak	Head / CAP Owner	Department of General Education
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19	Mr. Saeed Albakari	Head / CAP Owner	Unit of IT Support
20	Program Coordinators	Invited Participants /CAP Co-Owners	All academic programs concerned
21	Concerned Faculty and Staff	Invited Participants / Evidence Co-Owners	Academic and administrative units concerned

3. Document-Based Executive Status Presented to the Council

Indicator	Documented Result	Interpretation for QA-IEC
KPI CAPs reviewed	24	All six OBEF pillars were represented.
Improvement actions reviewed	156	Actions include resources, owners, expected KPI contribution, status, comments, and evidence fields.

4. Discussion Summary and Deliberations

Item	Subject	Discussion Highlights / Findings	Decision / Directive	Responsible
4.1	Call to order and governance context	The Chairperson called the meeting to order at 11:00 a.m. and emphasized that the meeting was an institutional validation and accountability session, not merely a document-completion exercise. The CAP ecosystem must demonstrate an auditable link from KPI gap to corrective action, output, evidence, outcome, and sustained performance.	Meeting convened; attendance and quorum	Chairperson / Secretariat
4.2	Scope and architecture of the CAP portfolio	QA-IEA presented the consolidated 119-page CAP covering 24 KPIs and 156 improvement actions. Each KPI section included historical performance, benchmark and target information, institutional self-reflection, action ownership, expected contribution, progress status, comments, Q1-Q4 timelines for AY 2025-2026, and multi-year institutionalization and optimization stages.	The standardized architecture was validated as the institutional basis for monitoring, subject to completion of evidence, remarks, and updated progress data.	QA-IEA/All CAP Owners
4.3	Implementation-status integrity	Members discussed the need to differentiate activity initiation, output completion, institutional implementation, and KPI outcome improvement.	Progress percentages shall be retained only when supported by the corresponding quarterly output and evidence. Unsupported percentages shall be revised pending validation.	Directors, Deans, Program Coordinators, Unit Heads, QA-IEA
4.4	Q1-Q4 timeline validation	The Council reviewed the common implementation logic used across the CAP: Q1 framework and governance definition; Q2 development of policies, protocols, templates, systems, and partnerships; Q3 pilot implementation; and Q4 evaluation, validation, and evidence integrity. The longer-term sequence moves to institution-wide implementation in AY 2026-2027 and optimization, analytics, sustainability, and benchmarking in AY 2027-2028.	Each owner shall confirm whether the Q1-Q4 output was delivered, delayed, rephased, or rolled forward, with rationale and a revised completion date.	All Action Owners/Co-owners
4.5	Evidence submission and traceability	Only 3 of 156 action rows contained a populated evidence-link entry, while the current-progress-remarks field was blank throughout. The Council considered this a material documentary-control weakness because narrative progress cannot be treated as validated completion without accessible, attributable, current, and directly relevant evidence.	All missing evidence references and current-progress remarks shall be completed. QA-IEA shall validate evidence and return inaccessible, unsigned, outdated, duplicative, or irrelevant records for correction.	Evidence Owners/QA-IEA
4.6	Performance priorities and high-performing KPIs	The Council distinguished recovery KPIs from sustain-and-enhance KPIs. Employment, relevant employment, retention, employer feedback on employed graduates, professional licensure, microcredentials, placement-to-employment conversion, joint industry courses, FWCI, joint industry research, student research, IP, rankings, and dual/joint degrees require targeted recovery. Stronger areas such as employer feedback on placements, student satisfaction, placement participation, publication ratio, international research collaboration, academic events, and community initiatives require quality, impact, and sustainability controls.	CAP monitoring shall prioritize both gap closure and prevention of regression in high-performing indicators.	KPI Owners /QA-IEA
4.7	Internal-audit compliance and closure	The Council reaffirmed that an internal-audit observation remains open until evidence is verified. Partially complied and not complied findings require a documented residual gap, recovery action, responsible person, deadline, and proof of closure. CAP status and internal-audit status must be reconciled to avoid inconsistent institutional reporting.	QA-IEA and Internal Audit shall reconcile CAP records, evidence validation results, and audit findings before closure is reported.	Internal Audit /QA-IEA / Concerned Units
4.8	Accountability and escalation	Directors, deans, program coordinators, and heads of units remain accountable for the accuracy, completeness, implementation, and timeliness of assigned CAP actions. Faculty and staff evidence owners are responsible for producing source documents. QA-IEA is responsible for methodology, consolidation, validation, monitoring, and escalation.	A single accountable owner shall be confirmed for every action. Overdue or materially deficient actions shall be escalated through the relevant director and the QA-IEC Chairperson.	All Responsible Units / QA-IEA
4.9	Resolutions and next monitoring cycle	The Council consolidated its deliberations into the resolutions and action directives below. The next review will focus on validated evidence, revised status percentages, Q4 output closure, approved rollover actions, and the resulting KPI trajectory.	Resolutions recorded for confirmation through approval of these minutes.	QA-IEC Chairperson/ Secretariat

5. Pillar-Level Deliberations and Priority Directives

Pillar	Portfolio Scope	Status Distribution	Principal Findings	Priority Directive
Pillar 1 Employability Outcomes	2 KPIs / 12 actions	6 at 25% 6 at 50% 0 at 75% Evidence: 3/12	KPI 1.1 and KPI 1.2 both report 59% against a sector mean of 78%. The CAP prioritizes structured employer partnerships, mandatory credit-bearing internships, career acceleration, Graduate Destination Survey strengthening, ENSCO/ISCO alignment, and integrated alumni-employment monitoring.	Validate employer-partnership, internship, GDS/CRM, occupational-mapping, and career-readiness outputs; prioritize evidence of implementation and employment outcomes.

Pillar	Portfolio Scope	Status Distribution	Principal Findings	Priority Directive
Pillar 2 Learning, Teaching, and Student Success	6 KPIs / 36 actions	20 at 25% 16 at 50% 0 at 75% Evidence: 0/36	The portfolio combines areas requiring recovery and areas requiring sustainability: retention is 78% versus an 82% mean; employer feedback on work placements is strong at 4.81; employer feedback on graduates is 4.27 versus 4.50; professional licensure is 20% versus 40%; microcredential attainment is 5% versus 25%; student satisfaction is 4.57 versus 4.40.	Prioritize early alert, structured advising, first-year experience, foundation support, licensure and microcredential pathways, employer-feedback closure, teaching-quality assurance, and student-experience analytics.
Pillar 3 Work Placement and Industry Engagement	4 KPIs / 24 actions	17 at 25% 7 at 50% 0 at 75% Evidence: 0/24	Placement participation is high at 98%, but conversion to job offers is 48.8% versus 75%; joint industry courses are 17.4% versus approximately 25%; industry contributions remain substantial at AED 6.25 million but below the AED 8 million high-performance reference.	Shift from participation volume to placement quality, hiring conversion, formal industry co-delivery, contribution valuation, partnership governance, and integrated placement/industry dashboards.
Pillar 4 Research, Innovation, and Impact	6 KPIs / 42 actions	32 at 25% 10 at 50% 0 at 75% Evidence: 0/42	Publication ratio is 3.3 and above the mean range; FWCI is 1.11 and below the mean range; joint industry research is 25.4% versus 40%-50%; student research participation is 23% versus 25%-35%; research impact is 40 units; awarded IP is 3 versus a mean range of 6-12.	Strengthen citation impact, industry-linked research, student participation, impact validation, IP generation and commercialization, incentives, external partnerships, and research analytics.
Pillar 5 Reputation and Internationalization	4 KPIs / 28 actions	21 at 25% 6 at 50% 1 at 75% Evidence: 0/28	The University is not yet included in major global ranking systems; international accreditation has the most advanced CAP action, with one action at 75%; international dual/joint-degree participation is not available; international research collaboration is strong at 74.4%.	Establish ranking-readiness governance and data systems, sustain accreditation compliance, conduct dual/joint-degree feasibility and partnership development, and monitor the quality and impact of international collaboration.
Pillar 6 Academic and Community Engagement	2 KPIs / 14 actions	8 at 25% 6 at 50% 0 at 75% Evidence: 0/14	Academic events with student participation (64) and community initiatives (95) exceed high-reference ranges, but the CAP identifies the need to move from event counts toward verified participation, outcome, beneficiary, and impact evidence.	Standardize event and community-engagement frameworks, define impact indicators, validate beneficiary and student-participation data, and deploy engagement dashboards.

6. Formal Resolutions and Action Directives

Resolution No.	Subject	Decision Statement	Responsible	Timeline	Required Evidence
2025-26-QAIEC-01	CAP Portfolio Validation	Resolved that the consolidated RIL-OBEF CAP covering 24 KPIs and 156 improvement actions shall serve as the institutional monitoring baseline, subject to validation of updated progress, remarks, evidence, and Q4 outputs.	QA-IEA / All CAP Owners	Immediate	Controlled consolidated CAP and approved minutes
2025-26-QAIEC-02	Evidence Completion	Resolved that the 153 action rows without populated evidence references and all action rows without current-progress remarks shall be completed and submitted through the controlled evidence repository.	All Evidence Owners / CAP Owners	Within five working days of approved minutes	Evidence register, accessible links, document codes, approvals, and repository timestamps
2025-26-QAIEC-03	Progress-Status Validation	Resolved that 25%, 50%, and 75% progress claims shall be confirmed only where the corresponding quarterly output and evidence are available; no action shall be marked complete solely on narrative assertion.	QA-IEA / Internal Audit / Action Owners	During evidence-validation cycle	Validated CAP tracker and evidence-validation results
2025-26-QAIEC-04	Q4 Closure and Rollover	Resolved that incomplete AY 2025-2026 actions shall be classified as delayed, rephased, or approved for rollover, with cause, residual risk, revised output, responsible person, and completion date documented.	Directors / Deans / Unit Heads	Before the next QA-IEC review	Approved recovery or rollover matrix
2025-26-QAIEC-05	Priority KPI Recovery	Resolved that action owners shall prioritize interventions for KPIs below benchmark or target, particularly employment, relevant employment, retention, employed-graduate feedback, licensure, microcredentials, placement conversion, joint industry courses, FWCI, industry research, student research, IP, rankings, and joint/dual degrees.	Relevant KPI Owners and Co-owners	Quarterly and ongoing	Updated outputs, performance data, and KPI trajectory
2025-26-QAIEC-06	Sustain High Performance	Resolved that high-performing KPIs shall be managed through quality, impact, sustainability, and evidence controls to prevent regression and avoid reliance on volume alone.	Relevant KPI Owners / QA-IEA	Quarterly and ongoing	Quality and impact reports, benchmark review, dashboard evidence
2025-26-QAIEC-07	Internal-Audit Reconciliation	Resolved that no internal-audit observation shall be closed until QA-IEA and Internal Audit verify documentary evidence and reconcile the audit finding with the CAP status.	Internal Audit / QA-IEA / Concerned Units	Per audit cycle	Reconciled audit follow-up and closure register
2025-26-QAIEC-08	Data Systems and Dashboards	Resolved that responsible units shall advance the integrated dashboards identified across the CAP, including employability, retention, placement, industry engagement, research, IP, rankings, and community-impact analytics.	Unit of IT Support / Digital Innovation / Data Owners	Phased according to Q1-Q4 and approved rollover	System specifications, pilot outputs, validation reports, and user-access records
2025-26-QAIEC-09	Accountability and Escalation	Resolved that each action shall have one accountable owner; co-owners shall have defined deliverables; overdue, unsupported, or materially deficient actions shall be escalated to the relevant director and QA-IEC Chairperson.	All Directors / Deans / Heads / QA-IEA	Ongoing	Ownership matrix, escalation records, and status reports
2025-26-QAIEC-10	Next Monitoring Review	Resolved that QA-IEA shall convene the next CAP validation review after completion of the initial evidence-submission and correction cycle.	QA-IEA Secretariat	Within ten working days after the validation cycle	Updated CAP dashboard, validation report, and meeting notice

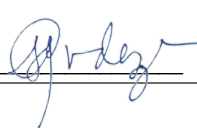
7. Consolidated Action Register

No.	Action Required	Responsible	Deadline/imeline	Evidence/Completion Requirement
1	Complete all missing evidence-link entries and current-progress remarks in the CAP matrices.	All CAP Owners and Evidence Owners	Within five working days of approved minutes	Updated CAP matrices and controlled evidence register
2	Verify the 104 actions at 25%, 51 actions at 50%, and one action at 75% against Q1-Q4 outputs.	QA-IEA / Internal Audit / Action Owners	During the initial validation cycle	Validation checklist and revised status report
3	Document delayed, rephased, and rollover actions with root cause, residual risk, revised output, owner, and date.	Directors, Deans, Program Coordinators, Heads	Before next review	Recovery and rollover matrix
4	Correct inaccessible, unsigned, outdated, duplicative, or indirectly relevant evidence.	Evidence Owners	Within three working days of QA-IEA feedback	Corrected evidence and repository timestamp
5	Implement the pillar-specific priority directives stated in Section 5.	Relevant Owners and Co-owners	According to approved CAP timeline	Outputs and performance evidence by KPI
6	Reconcile CAP progress with internal-audit compliance status.	QA-IEA / Internal Audit	Before closure reporting	Reconciled CAP-audit register
7	Advance the integrated dashboard and data-governance actions identified in the CAP.	IT Support / Digital Innovation / Data Owners	Phased implementation	Specifications, pilot, validation, and training evidence
8	Update KPI trajectories using the most recent validated result, target, variance, and projected contribution of actions.	KPI Owners / QA-IEA	Quarterly	Updated KPI dashboard and analytical narrative
9	Escalate overdue or materially deficient CAP submissions.	Relevant Director / QA-IEC Chairperson	As required	Escalation notice and recovery commitment
10	Circulate approved minutes and convene the next validation review.	QA-IEA Secretariat	After approval and validation cycle	Approved minutes, meeting notice, and updated tracker

8. Closing Matters

Other Business	None
Next Monitoring Review	To be scheduled by QA-IEA after the initial evidence-validation and correction cycle.
Adjournment Time	12:20 p.m.
Minutes Distribution	After review and approval by the QA-IEC Chairperson.
Official Storage	QA-IEA controlled repository: QA-IEC Minutes and Resolutions, AY 2025-2026.

9. Preparation, Review, and Approval

Prepared by	Reviewed by	Approved by / Chairperson
Ms. Jean Gandeza QA-IEA Secretariat Name/Signature/Date: 	Mr. Aldren E. Aseron QA-IEC Secretary / Reviewer Name/Signature/Date: 	Dr. Burton A. Aggabao Director, QA-IEA / QA-IEC Chairperson Signature/Date: 

10. Document Control

Document Title	QA-IEC Agenda and Minutes: Update RIL-OBEF CAPs, Progress Outputs, and Evidence Submission
Meeting Reference	QA-IEC/2025-2026/Q4/30-07-2026
Source CAP	FU RIL-OBEF V.11.5 Corrective Action Plan for Continuous Improvement - Consolidated CAP, 119 pages
File Name	QAIEC 2025-26: 30 June 2026 Agenda Minutes
Status	Approve
Custodian	Quality Assurance and Institutional Effectiveness Affairs
Retention and Access	Retain in the controlled QA-IEA repository for the applicable accreditation, audit, and institutional records cycle.

APPENDIX A - KPI CAP STATUS SNAPSHOT FROM THE CONSOLIDATED WORKING DOCUMENT

This appendix reproduces a concise management view of the performance values, benchmarks, targets, action counts, progress distribution, and evidence-link coverage contained in the consolidated CAP used during the meeting. Values are retained substantially as stated in the source document.

KPI	Current	Mean / Sector Reference	High Reference	1-Year Target	2-Year Target	Actions	Progress Distribution	Evidence Links
1.1 - Graduate Employment Rate (%)	59%	78%	88%	80%	85%	6	25%: 3 50%: 3 75%: 0	3/6
1.2 - Employment in Relevant Jobs (%)	59%	78%	88%	75%	85%	6	25%: 3 50%: 3 75%: 0	0/6
2.2 - Retention Rate (FYR) (%)	78%	82	90	82%	88%	6	25%: 2 50%: 4 75%: 0	0/6
2.3 –Employer Feedback in Work Placements	4.81	4.5	4.8	4.8	4.85	6	25%: 4 50%: 2 75%: 0	0/6
2.4 - Employer Feedback on Graduates in Employment	4.27	4.5	4.8	4.8	4.85	6	25%: 4 50%: 2 75%: 0	0/6
2.5a - Rate of graduates obtaining professional licenses	20%	40%	65%	30%	45%	6	25%: 3 50%: 3 75%: 0	0/6
2.5b - Microcredential Attainment	5%	25%	≈40–45%	15%	25%	6	25%: 4 50%: 2 75%: 0	0/6
2.6 - Student Satisfaction with Learning Experience	4.57	4.4	4.8	4.65	4.75	6	25%: 3 50%: 3 75%: 0	0/6
3.1 –Job Offer Post Work-placement	48.8%	75%	90%	85%	90%	6	25%: 4 50%: 2 75%: 0	0/6
3.2 - Student Participation Rate in Work Placements	98%	85%	95%	100%	100 (sustained with quality enhancement)	6	25%: 4 50%: 2 75%: 0	0/6
3.3 –Joint Industry Courses	17.4%	≈25%	35%–45%	25%	35%	6	25%: 5 50%: 1 75%: 0	0/6
3.4 –Industry Contributions	AED 6,252,458.00	AED 2M – 5M annually	AED 8M+ annually	Establish baseline (≥ AED 1M tracked contributions)	≥ AED 3M total contributions (cash + in-kind)	6	25%: 4 50%: 2 75%: 0	0/6
4.1 –Publication Ratio	3.3	~2.5–3.0	~4.0–5.0+	3.5	5	7	25%: 5 50%: 2 75%: 0	0/7
4.2 - Field-Weighted Citation Impact (FWCI)	1.11	≈1.2–1.5	≈2.5–3.5	1.3	2	7	25%: 5 50%: 2 75%: 0	0/7
4.3 - Joint Industry Research (%)	25.4%	40%–50%	65%–75%	≥40%	≥65%	7	25%: 6 50%: 1 75%: 0	0/7
4.4 - Student Participation Rate in Research (%)	23%	25-35%	40-50%	25%	40%	7	25%: 5 50%: 2 75%: 0	0/7
4.5 - Research Impact (%)	40	30–60 units (5-year)	80–120 units	≥25	≥30	7	25%: 5 50%: 2 75%: 0	0/7
4.6 –Awarded Intellectual Property (IP)	3	6-12	15-25	≥12	≥18	7	25%: 6 50%: 1 75%: 0	0/7

APPENDIX A - KPI CAP STATUS SNAPSHOT (CONTINUED)

KPI	Current	Mean / Sector Reference	High Reference	1-Year Target	2-Year Target	Actions	Progress Distribution	Evidence Links
5.1 - Global University and Subject Rankings	Not ranked / no reported value	Emerging Universities=800 – 1500 / Regional Competitive Level=400 – 800	≤ 300	≤ 1500	≤ 800	7	25%: 6 50%: 1 75%: 0	0/7
5.2 –International Accreditation Status	1	60% – 80%	90% – 100%	100	100	7	25%: 3 50%: 3 75%: 1	0/7
5.3 –Student Participation Rate in International Dual/Joint Degrees	NA	3% – 7%	8% – 12%	3%	5%	7	25%: 7 50%: 0 75%: 0	0/7
5.4 - International Research Collaboration (%)	74.4%	40% – 60%	70% – 85%	75%	80%+	7	25%: 5 50%: 2 75%: 0	0/7
6.1 –Academic Events with Student Participation	64	20 – 40 events	40 – 60 events	≥ 65	≥ 70	7	25%: 4 50%: 3 75%: 0	0/7
6.2 - Events and Initiatives for the Community	95	30 – 60 events	60 – 90 events	90	100	7	25%: 4 50%: 3 75%: 0	0/7