STARDOM UNIVERSITY

Quality Assurance and Continuous Improvement

1. Purpose

To establish a documented, evidence-informed process for monitoring academic quality, identifying risks and gaps, implementing corrective actions, and improving student learning and institutional effectiveness.

2. Scope

Applies to academic programs, teaching and learning, assessment, student support, learning resources, and academic quality review within the University's applicable scope.

3. Policy requirements

Quality principles

Quality decisions must use reliable evidence, defined responsibilities, documented review, and proportionate corrective action.

The University must distinguish proposed targets from achieved results and must not publish performance claims without a verified data source and a defined reporting period.

Quality assurance must support improvement and accountability and must not replace applicable regulatory obligations or academic judgment.

Monitoring and review

Academic Affairs coordinates periodic review of program objectives, learning outcomes, curriculum mapping, course delivery, assessment, faculty sufficiency, and learning resources.

Reviews should consider available evidence such as student feedback, course results, progression and completion data, complaints, faculty feedback, and documented operational issues, where such data are collected reliably.

Each review must record the date, participants, evidence considered, findings, decisions, action owners, deadlines, and closure evidence.

Corrective action and risk

Material gaps must be entered in a corrective-action log with a clear description, risk or impact, responsible owner, due date, status, and evidence required for closure.

Overdue or high-risk actions must be escalated to the President or the designated authorized officer according to the University's governance arrangements.

Changes to targets or review frequency must be documented and approved by the appropriate authority.

Responsibilities and records

Academic Affairs is the policy owner and coordinates the quality-review calendar, evidence register, annual evaluation, and reporting to the President.

Relevant units must provide accurate information and complete assigned improvement actions within approved deadlines.

Records must be stored securely, access-controlled, and retained under the University's records-retention requirements.

4. Responsibilities

Academic Affairs is responsible for maintaining this policy, coordinating implementation, retaining evidence, and proposing revisions. The President of the University is the final approving authority.

5. Review and document control

Annually and after a material change to programs, governance, delivery, or applicable requirements.

The approved version must be version-controlled, published in an accessible format, and reconciled with the current catalog, enrollment agreement, applicable academic documents, and other policies. Superseded copies must be archived or clearly marked.

6. Regulatory and publication note

This policy does not itself establish BPPE approval, accreditation, government recognition, or authorization to operate. Statements about the University's legal or regulatory status must reflect current, independently verified evidence. Before publication, confirm the policy's applicability to the relevant legal entity, programs, and student population.

Approval / Effective Date: January 2026 | Next Review: January 2027

This policy must be interpreted consistently with applicable law, the current University Catalog, and the relevant enrollment agreement.