###  TEMPLATE

### REPORT

### on corrective measures taken in a Higher Education Institution having obtained a conditional rating following a programme evaluation (....... profile)

**Name of the higher education institution:**

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**Name of the basic organisational unit providing the field of study under evaluation:**

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**Name of the field of study under evaluation with indication of the level, profile and mode of education:**

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**Composition of the panel preparing the report:**

 First name and surname Position/title or academic degree/function

 in the higher education institution

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**1. Faults listed in Resolution no. .................................... of the Presidium of the Polish Accreditation Committee of ………………………………… :**

**2. Information on corrective measures taken to address individual faults listed in point 1. and self-evaluation of their efficacy.**

**3. Information on other changes directly related to the field of study, to which the resolution mentioned in point 1. relates, introduced over the period between the evaluation conducted by the PKA evaluation panel, which ended with the resolution mentioned in Part 1, and the date of obtaining notice of the programme follow-up evaluation, including changes resulting from the amendment of law.**

**4. Information referred to in points 2-3 should be documented in accordance with the rules and templates of documents specified in the self-evaluation report forming Annex no. 1. or 2 to this resolution.**

**5. If any changes were introduced to the composition of minimum staff resources over the period between the evaluation conducted by the PKA evaluation panel, which ended with the resolution mentioned in Part 1, and the date of obtaining notice of the programme follow-up evaluation, description of academic teachers included in the minimum staff resources over that period prepared in accordance with a template forming Annex no. 2 point 4. to the self-evaluation report separately for general academic and practical profile should be enclosed to the report.**

(HEI’s seal)

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 (Rector’s signature)

.........................., date........................... .....................................

(place) (signature of the Dean/Manager of the Unit)