**(2025)**

**Course Report**

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| **Academic Year** | **........ /.........** | **Semester** | **................** |

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| Course Title (according to the bylaw): |  |
| Course Code (according to the bylaw): |  |
| Department/s that participated in the teaching: |  |
| Total number of credit hours/points of the course: |  |
| Course Type: |  |
| The level to which the course was introduced: |  |
| Academic Program: |  |
| Faculty/Institute: |  |
| University/Academy: |  |
| Name of Course Coordinator: |  |
| Course Report Approval  (Attach the decision/minutes of the department /committee/council ....) |  |
| Date of approval of the course report | Click or tap to enter a date. |

1. **Basic Information**
2. **Data and Statistics**

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| **Course Instructors** | | | |
| **Number of Teaching Assistants** | | **Number of Faculty Staff** | |
| **Part-time**  **(1 or 2 days)** | **Full-time**  **(at least 4 working days)** | **Part-time**  **(1 or 2 days)** | **Full-time**  **(at least 4 working days)** |
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|  | | | |
| **Specialty** | **Academic degree** | **Department** | **Instructor Name** |
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| **Notes (if any):**  ..................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................  …………………………………………………………………………………………………………………………………… | | | |

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| **Teaching and Learning** | | | | | |
| **Other**  **(to be mentioned)** | **Total number of self-learning hours**  **(if any)** | **Total number of field training hours**  **(if any)** | **Total number**  **of**  **training hours (practical/clinical/...)** | **Total number of**  **theoretical teaching hours**  **(Lectures/ ......)** | **Number**  **of weeks**  **of actual study** |
|  |  |  |  |  |  |
| **Notes (if any)** **on:**  Topics not covered, changes in teaching methods, number of teaching hours or content .......:  **.**.................................................................................................................................................................................................................................................................. **.**..................................................................................................................................................................................................................................................................**.**.................................................................................................................................................................................................................................................................. **.**.................................................................................................................................................................................................................................................................... | | | | | |

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| **Student Assessment Methods that have been Implemented** | | | | |
| **Method of assessment \*** | **Date of Evaluation** | **Marks/Score** | **Type and number of questions** | **Measured Course Learning Outcomes**  (Mention the text) |
| **Exam (1) Semester work** | Click or tap to enter a date. |  |  |  |
| **Exam (2) Semester work** | Click or tap to enter a date. |  |  |  |
| **Midterm exam** | Click or tap to enter a date. |  |  |  |
| **Final Practical Exam** | Click or tap to enter a date. |  |  |  |
| **Final Oral Exam** | Click or tap to enter a date. |  |  |  |
| **Final written exam** | Click or tap to enter a date. |  |  |  |
| **Field training** | Click or tap to enter a date. |  |  |  |
| **Projects/ Assignments/ Portfolio/**  **Logbook/ ...** | Click or tap to enter a date. |  |  |  |
| **Other**  **(to be mentioned)** | Click or tap to enter a date. |  |  |  |
| **\* The methods mentioned are examples the institution may add and delete depending on the nature of the course**  **Comment on the procedures and rules of student assessment that have been implemented (e.g. examination committees, exam paper review, blueprints, ….), and the rules for passing the course:**  ..................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................**.**............................................................................................................................................................................................................................................................................................................................................................................................................................. **.**.................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................... | | | | |

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| **Student Assessment Results** | | | | | | | | |
| **Number of students (who started the course):** | | | |  | | | | |
| **Number of students (who completed the course/ sat for the exam):** | | | |  | | | | |
| **Number of students who did not attend the final written exam (absent - deprived - withdrawn):** | | | |  | | | | |
| **Total number of students who passed the exams successfully:** | | | |  | | | | |
| **Percentage of success (out of the total number of students who sat for the final exam)** | | | |  | | | | |
| **Grade Distribution \*** | | | | | | | | |
| **Grade** | **A+** | **A** | **C+** | **C** | **B+** | **B** | **D+** | **D** | |
| **Number of students** |  |  |  |  |  |  |  |  | |
| **Percentage** |  |  |  |  |  |  |  |  | |
| **\* In case the distribution of grades differs from the current model, it should be replaced by grades according to the bylaws** | | | | | | | | |
| **Total number of students who failed the exams:** | | | |  | | | | |
| **Percentage of failure (for the total number of students who took the final exam)** | | | |  | | | | |
| **Commenting on student results, analyzing student performance (including factors that affected the results if any), and comparing them with the results of the previous year:**  **.**.................................................................................................................................................................................................................................................................. **.**...................................................................................................................................................................................................................................................................**.**.................................................................................................................................................................................................................................................................. **.**..................................................................................................................................................................................................................................................................... **.**.................................................................................................................................................................................................................................................................. **.**.................................................................................................................................................................................................................................................................... **.**.................................................................................................................................................................................................................................................................. **.**...................................................................................................................................................................................................................................................................**.**...................................................................................................................................................................................................................................................................**.**. **.**........................................................................................... | | | | | | | | |

1. **Student Feedback \***

**\* Feedback from students must include their evaluation of the following: scientific content – teaching and learning methods – facilities and learning resources – examinations - …………**

(attach the questionnaire analysis report or any other means used, and the points evaluated).

| Item | Comment |
| --- | --- |
| Means of Evaluation: |  |
| Timing of Evaluation: |  |
| Number of students who participated in the course evaluation |  |
| Percentage of participants to the total number |  |
| Important points of satisfaction | **1-**  **2-**  **3-** |
| Important points of dissatisfaction | **1-**  **2-**  **3-** |

**4. Instructors Reflection \***

**\*** **Instructors’ views on the educational process, scientific content, adequacy of resources, etc. (if any)**

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1. **Course Enhancement**

**Comment on uncompleted corrective/improvement actions from last year's plan**

**(if any, mentioning the reasons)**

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**Course development plan for the next academic semester/year**

(considering the student assessment results as well as the student feedback and instructors’ reflection)

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| **No.** | **Points that need**  **development or improvement** | **Corrective/ Improvement**  **Actions** | **Methods of implementation** | **Notes** |
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| **Name and Signature**  **Head of the department council** |  | **Name and Signature**  **Course Coordinator** |