

## **CONTROL OF PROBLEM STUDENTS**

### **SOP-FTIP-UNPAD-8.7.5**

#### **1. PURPOSE**

This SOP provides guidelines in controlling problem students

#### **2. SCOPE**

This SOP applies to all undergraduate, master, and doctoral students at the Faculty of Agricultural Industrial Technology, UNPAD.

#### **3. GENERAL DESCRIPTION**

1. This SOP is implemented to ensure that problematic students are handled properly and are able to complete their studies by fulfilling the minimum academic and non-academic requirements.
2. Problematic students include students who commit :
  1. Academic Negligence
  2. Administrative Negligence
  3. Failure to attend teaching activities
  4. Violation of the law
  5. Breaches of Moral and Professional Ethics
  6. Academic Ethics Offences
3. The implementation of problematic student identification is carried out at the beginning of each semester.
4. The implementation of identification and monitoring of problem students can be carried out by Guardian Lecturers, Study Programmes, TPBK Lecturers and Vice Dean 1.
5. Handling of problem students is carried out periodically throughout the semester
6. Handling problem students follows the following stages:
  1. Academic warning
  2. Academic sanctions
  3. Termination of study

7. Categories of student misconduct based on sanctions to be imposed are divided into 5 groups, as in the following table:

CATEGORIES	SANCTIONS
I	Academic warning in the form of a warning letter from the Faculty Leader (Dean / Deputy Dean 1) addressed to the student concerned, copied to the parents / guardians.

COPY

CATEGORIES	SANCTIONS
II	Academic warning in the form of a letter of "Recommendation not to continue the study" from the Faculty Leader (Dean/Wadek) addressed to students and parents/guardians.
III	Suspension by the Dean up to termination of studies by the Rector due to violation of academic ethics
IV	Suspension until the termination of studies by the Rector due to legal decisions.
V	Termination of Studies which means students are expelled from the faculty or study programme due to academic performance.

8. Types of errors for each category above can be seen in the attached provisions (PM-UNPAD-FTIP-8.7.5/L1)
9. In certain cases, the Faculty may issue its own decision as long as it does not conflict with the provisions of the law or regulations above it.

#### **4. PROCEDURE**

1. Guardian Lecturer
  1. Conduct coaching to students in their guardianship both programmed and unprogrammed
  2. Monitoring study progress and problems faced by students
  3. Handling any problems faced by students under their guardianship
  4. Encourage and motivate students to get out of their problems
  5. Reporting student problems to the TPBK lecturer (non-academic problems) and the Head of the Study Programme (academic problems), if points 4.1.3 and 4.1.4 are not successful using the SOP-FTIP-UNPAD-8.7.5/F1 Form.
2. TPBK Lecturer
  1. Receive a report from the Guardian Lecturer
  2. Conduct a review of 4.2.1, if found discrepancies can be confirmed to the Guardian Lecturer
  3. Calling students for confirmation regarding the problems faced

4. Identify potential causes related to problems faced by students in a complete and in-depth manner.
  5. Addressing and resolving potential causes of problems faced by students based on the scope of authority of the TPBK
  6. Recording the results of the activities of item 4.2.5 using the SOP-FTIP-UNPAD-8.7.5/F1 Form.
  7. Establish follow-up recommendations for handling problem students in the form SOP-FTIP-UNPAD-8.7.5/F1
  8. Distribute follow-up recommendations to the Head of Study Programme
  9. Forwarding the handling of problem students to the University Psychology Bureau, if the implementation of point 4.2.5 has not resolved the problem
  10. Monitoring the resolution of problems faced by students by the university psychology bureau
3. Head of Study Programme
1. Receive problem student reports from guardian lecturers
  2. Receive recommendations for follow-up handling of problem students from TPBK lecturers
  3. Coordinate the parties under his control for handling non-academic problem students
  4. Coordinating parties under his/her control for the discussion of students with academic problems
  5. Establish follow-up recommendations for handling students with academic problems using the SOP Form -FTIP-UNPAD-8.7.5/F2
  6. Determine the person responsible for implementing follow-up recommendations in SOP Form -FTIP-UNPAD-8.7.5/F2
  7. Distribute SOP-FTIP-UNPAD-8.7.5/F2 to Guardian Lecturers and Supervisors with copies to the Dean, Deputy Dean II, and other related parties.
  8. Monitoring the implementation of TPBK recommendations and follow-up recommendations for academic-related issues



9. Store and maintain SOP Form -FTIP-UNPAD-8.7.5/F2
4. Guardian and Supervising Lecturer
  1. Receive recommendation from the Head of Study Programme
  2. Implement follow-up recommendations for academic-related issues
  3. Reporting the progress of controlling students with academic and non-academic problems to the Head of Study Programme.
  4. Keeping and maintaining records of the results of controlling problem students

**5. RELATED FORMS**

1. SOP-FTIP-UNPAD-8.7.5/F1: Problem Student Report Form
2. SOP-FTIP-UNPAD-8.7.5/F2: Troubled Student Follow-up Recommendation Form

**6. RELATED ATTACHMENTS**

1. SOP-UNPAD-FTIP-8.7.5/L1: Provisions for Problem Students
2. SOP-UNPAD-FTIP-8.7.5/L2: Academic Warning II (example)

	<b>FACULTY OF AGRICULTURAL INDUSTRIAL TECHNOLOGY</b>		
	<b>PADJADJARAN UNIVERSITY</b>		
	<b>STANDARD OPERATING PROCEDURE</b>		
<b>IMPLEMENTATION OF STUDENT PERFORMANCE EVALUATION</b>			
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## **IMPLEMENTATION OF STUDENT PERFORMANCE EVALUATION**

### **SOP-FTIP-UNPAD-9.1.1**

#### **1. PURPOSE**

This SOP provides guidelines for the implementation of student performance evaluation

#### **2. SCOPE**

This SOP applies to all students of undergraduate, master, doctoral programmes at the Faculty of Agricultural Industrial Technology, UNPAD.

#### **3. GENERAL DESCRIPTION**

1. This SOP is implemented to ensure the accuracy of completion of study time for students
2. The total credits that must be completed by students follow the following provisions:
  1. Bachelor's degree, minimum 144 credits
  2. Master, minimum xx credits
  3. Doctorate, minimum
3. Student study time follows the following provisions:
  1. Bachelor's degree, maximum 14 semesters
  2. Master, maximum 10 semesters
  3. Doctorate, maximum 14 semesters
4. Implementation of student performance evaluation only for administratively active students
5. The implementation of student performance evaluation is carried out on components, including:
  1. GPA
  2. Study time
  3. The maximum number of D grades is 20% of the total course.
  4. Student involvement in academic and non-academic activities
  5. Offences committed by students that can defame the faculty

6. The time and person in charge of student performance evaluation are as follows:

No.	Evaluation components	Evaluation time	Responsible
1	GPA	Every start of term 3	Head of Study Programme
2	Study time	Start semester 9	Head of Study Programme
3	The maximum number of D grades is 20% of the total course.	Before the comprehensive examination	Head of Study Programme
4	Student involvement in academic and non-academic activities	End of study period	Head of Study Programme
5	Offences committed by students that can defame the faculty	During the study period	Vice Dean I for Learning, Student Affairs and Research

7. Undergraduate students with a GPA below 2.00 or above 2.00 but there are E grades or D grades of more than 20% or the study time is close to the maximum, monitoring and coaching is carried out, and if based on the time set the student concerned cannot improve his performance to meet the minimum requirements, it is recommended to resign.
8. Master's programme students with a GPA below 2.75 or a study time close to the maximum, monitoring and coaching are carried out, and if based on the specified time the student concerned cannot improve his performance to meet the minimum requirements, he is encouraged to resign.
9. Doctoral programme students with a GPA below 3.25 or a study time close to the maximum, monitoring and coaching are carried out, and if based on the specified time the student concerned cannot improve his performance to meet the requirements, he is encouraged to resign.
10. Students who have completed 80% of the total credits must have started to make a research proposal for their final project.

#### 4. PROCEDURE

1. Academic Subdivision (SBA)
  1. Recap student performance at the end of each semester including:

1. GPA
  2. Study time
  3. Number of credits
  4. Other important notes
2. Check and ensure the completeness of the recap
  3. Submit a recap of student performance to the Academic and Student Affairs Manager no later than the fourth week of the beginning of the following semester.
2. Manager of Academic and Student Affairs
    1. Receive student performance recap from SBA
    2. Conduct an in-depth review of student performance (item 3.6) if found unclear confirmed to SBA
    3. Make follow-up recommendations for each student, especially for students who are potentially unable to continue their studies related to items 3.7 to 3.9 using the SOP-FTIP-UNPAD-9.1.1/F1 Form. If necessary, consult with the Deputy Dean of Academic and Student Affairs.
    4. Determine the person responsible for implementing the follow-up recommendations in the SOP-FTIP-UNPAD-9.1.1/F1 Form.
    5. Organising coordination with relevant parties (point 4.2.4) for the implementation of follow-up recommendations
3. Head of Study Programme and Head of Laboratory
    1. Receive the SOP-FTIP-UNPAD-9.1.1/F1 form from the Academic and Student Affairs Manager.
    2. Coordinate parties under his/her control for the implementation of follow-up recommendations
    3. Recording the results of follow-up implementation
    4. Report the results of the implementation of follow-up to the Manager of Academic and Student Affairs
4. Academic and Student Affairs Manager
    1. Receive a report on the results of the implementation of follow-up from the Head of Study Programme or Head of Laboratory

2. Conduct an in-depth review, if unclear, confirm with the Head of Study Programme or Head of Laboratory.
  3. Make an evaluation of student performance at the end of each semester using the SOP-FTIP-UNPAD-9.1.1/F2 Form.
  4. Socialising the results of student performance evaluation to the Head of Study Programme or Head of Laboratory
  5. Report the results of student performance evaluation to the Vice Dean of Academic and Student Affairs with a copy to the Vice Dean of Human Resources
  6. Store and maintain student performance evaluation results
5. Head of Study Programme and Head of Laboratory
1. Receive student performance evaluation results from the Academic and Student Affairs Manager
  2. Coordinating parties under his/her control in the improvement of learning/lecture/practicum services to improve student performance
  3. Store and maintain performance evaluation results and improvement plans to be carried out

**5. RELATED FORMS**

1. SOP-FTIP-UNPAD-9.1.1/F1: Follow-up Recommendation Form
2. SOP-FTIP-UNPAD-9.1.1/F2: Form for Implementation of Student Performance Evaluation

**6. RELATED ATTACHMENTS**

N/A

# **IMPLEMENTATION OF PERFORMANCE ANALYSIS AND EVALUATION**

## **SOP-FTIP-UNPAD-9.1.8**

### **1. PURPOSE**

This SOP provides guidelines in the implementation of performance analysis and evaluation

### **2. SCOPE**

This SOP applies to every Head of Work Unit, Lecturer, and Education Personnel

### **3. GENERAL DESCRIPTION**

1. Performance analysis and evaluation is carried out to review the level of effectiveness achieved from the performance of the head of the work unit, Lecturers, and Education Personnel.
2. Performance analysis and evaluation is carried out by the Dean and a team from the Directorate of Resources and the Directorate of Research and Community Service.
3. The performance analysis and evaluation team is coordinated by the Dean and its members are appointed by the Director of UNPAD Resources.
4. Results and follow-up of performance analysis and evaluation are documented for discussion at faculty meetings.
5. Performance analysis and evaluation is carried out on a scheduled basis, once every 6 months based on the following provisions:
  1. February and August for Lecturers
  2. June and December for Education Personnel
6. Criteria for analysing and evaluating performance include all lecturer and education personnel requirements set by the university and faculty.

### **4. PROCEDURE**

1. Vice Dean of Human Resources, Organisation and Information
  1. Receive information related to the performance analysis and evaluation system from the university;

2. Inform or socialise to Heads of Departments and Managers about the system item 4.1.1. especially if the performance analysis and evaluation system has changed from previous years;
  3. Provide assistance (if required) to Department Heads and Managers in fulfilling the performance analysis and evaluation system.
2. Department Heads and Managers
    1. Received socialisation related to the performance analysis and evaluation system from the Vice Dean of Human Resources, Organisation and Information.
    2. Socialising item 4.2.1. to the Head of Work Unit, Lecturers, and Education Personnel
    3. Provide assistance (if needed) to Lecturers and Education Personnel in fulfilling the performance analysis and evaluation system.
    4. Monitoring the completion of performance analysis and evaluation forms from lecturers and education personnel.
  3. Head of Work Unit, Lecturers, and Education Personnel
    1. Received socialisation and tools for performance analysis and evaluation system;
    2. Fill in the performance evaluation and analysis form based on the performance that has been achieved (SOP-FTIP-UNPAD-9.1.9/F1), if you need information, please contact the Head of Department or Manager;
    3. Check and ensure that all information in item 4.2.2. is complete and correct;
    4. Submit the performance evaluation and analysis form based on the time set by the system for review and approval;
    5. Monitoring the results of system verification related to the performance for which they are responsible from the Dean and the university;

6. Monitoring feedback from the dean or university if based on system verification it is rejected;
7. Transferring performance results that have been system-verified by the Deanery and university into the system;
8. Create performance goals for the next semester in the system format based on the deadline set by the university.

4. Deanery Team

1. Identify, find, analyse and evaluate the performance targets of Lecturers and Education Personnel. If discrepancies are found, they are confirmed to the person concerned;

Verify the performance targets of the Head of Work Unit, Lecturers, and Education Personnel for the next semester;

2. Provide guidance to the Head of Work Unit, Lecturers, and Education Personnel related to performance targets, especially if there are new regulations or provisions from the university;
3. Monitor, create, and analyse performance trends achieved or demonstrated by Heads of Work Units, Lecturers, and Education Personnel.

**5. RELATED FORMS**

1. SOP-FTIP-UNPAD-9.1.9/F1: Form for Performance Analysis and Evaluation

**6. RELATED ATTACHMENTS**

1. SOP-FTIP-UNPAD-9.1.9/L1: Flowchart



**FACULTY OF AGRICULTURAL INDUSTRIAL  
TECHNOLOGY  
PADJADJARAN UNIVERSITY**

**STANDARD OPERATING PROCEDURE**

**INTERNAL AUDIT IMPLEMENTATION**



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# **INTERNAL AUDIT IMPLEMENTATION**

## **SOP-FTIP-UNPAD-9.2.1**

### **1. PURPOSE**

This SOP provides guidelines for the implementation of internal audits

### **2. SCOPE**

This SOP applies to every work unit and party related to education, research and community service services at the Faculty of Agricultural Industrial Technology UNPAD.

### **3. GENERAL DESCRIPTION**

- 3.1. Internal audits are conducted to review the level of effectiveness achieved from the implementation of the faculty management system and identify opportunities for improvement as needed.
- 3.2. Internal audits are carried out by a team of auditors who are independent and have the ability to audit faculty management systems.
- 3.3. The internal auditor team is coordinated by the and its members are appointed by the Technology UNPAD.
- 3.4. The internal audit *reviewer* team is appointed by the Technology UNPAD.
- 3.5. Internal audit results and follow-up are recorded and documented for discussion at management review meetings.
- 3.6. Internal audits are conducted on a scheduled basis, once every 6 months. If based on the development of the implementation of the faculty management system or the interests of the faculty wishes to review more deeply the part / aspect of a particular quality management system, then additional audits can be carried out outside the provisions mentioned above. Example: if there are customer complaints, reprimands from related institutions.
- 3.7. The audit criteria used by the auditor cover all management system requirements applicable to the relevant work unit.

### **4. PROCEDURE**

- 4.1.

- 4.1.1. Prepare an annual programme of internal audit implementation using the SOP-FTIP-UNPAD-9.2.1/F1 form and an internal audit schedule using the SOP-FTIP-UNPAD-9.2.1/F2 form;
- 4.1.2. Submit the internal audit programme and schedule to the dean for approval;
- 4.1.3. Conduct socialisation of the internal audit programme to each work unit / related parties;
- 4.1.4. Make a notification to the *reviewer*, head of work unit and internal auditor team at least 1 week before the audit is carried out by sending a copy of the internal audit programme and schedule.

#### 4.2. Head of Work Unit/Related Parties

- 4.2.1. Receive notification/socialisation of internal audit implementation from the ;
- 4.2.2. Make preparations in the work unit to ensure that the internal audit can run effectively;
- 4.2.3. Coordinate staff under his/her control;
- 4.2.4. Assist the auditor team in the implementation of internal audits by providing information / evidence and actual explanations in accordance with existing conditions.

#### 4.3. Auditor Team

- 4.3.1. Receive notification of internal audit implementation and a copy of the internal audit programme and schedule from the ;
- 4.3.2. Prepare an audit checklist for each audited work unit/party using the Audit Checklist Form SOP-FTIP-UNPAD-9.2.1/F3;
- 4.3.3. Carry out internal audits based on the prepared checklist;
- 4.3.4. Record audit results in the audit checklist form;
- 4.3.5. Conclude findings of irregularities based on audit results using the Internal Audit Findings Report Form SOP-FTIP-UNPAD-9.2.1/F4;
- 4.3.6. Determine the status of internal audit results and findings that include recommendations, minor, or major based on documented IK;

- 4.3.7. Confirm all findings of irregularities with the relevant *auditee*. If the *auditee* can prove that the irregularity is not proven, the finding can be cancelled;
- 4.3.8. Seek the relevant auditee's agreement on the agreed findings of irregularities, including the timing of the resolution of each finding of irregularity;
- 4.3.9. Submit the internal audit report that has been approved by the relevant *auditee* to the *reviewer* with a copy to the auditee concerned.

#### 4.4. Reviewer

- 4.4.1. Receive internal audit results from the auditor team;
- 4.4.2. Conduct a review of the results of the implementation of internal audit, including:
  - 4.4.2.1. Appropriateness of internal audit scope;
  - 4.4.2.2. Appropriateness of the schedule and timing of internal audits;
  - 4.4.2.3. Completeness and accuracy of the internal audit check list;
  - 4.4.2.4. Completeness and accuracy of internal audit evidence;
  - 4.4.2.5. Accuracy of the formulation of internal audit findings and categories of findings.
- 4.4.3. Make the review results on the Internal Audit Review Results Form SOP-FTIP-UNPAD-9.2.1/F5;
- 4.4.4. Make suggestions to the Head of the Quality Assurance Unit regarding improvements to the implementation of internal audits.

#### 4.5.

- 4.5.1. Receive the internal audit report from the *reviewer*;
- 4.5.2. Reviewing the results of the internal audit including the *reviewer's* input. If there are things that are unclear, incomplete, or not in accordance with the requirements of the audit, then confirm with the *reviewer* and the relevant auditor;
- 4.5.3. Issuing a *Corrective Action Request (CAR)* addressed to the relevant auditee using the SOP-FTIP-UNPAD-9.2.1/F6 form;
- 4.5.4. Monitor CAR completion using the SOP-FTIP-UNPAD-9.2.1/F7 form.

#### 4.6. Head of Work Unit/Related Parties

- 4.6.1. Receive CAR from the ;
  - 4.6.2. Make a potential cause analysis of each finding;
  - 4.6.3. Determine the necessary corrective and preventive measures against any nonconformities that occur in their work unit;
  - 4.6.4. Carry out corrective and preventive actions against any non-conformities found by the auditor with a time limit for improvement agreed with the Head of the Quality Assurance Unit;
  - 4.6.5. Record and document data on the results of the implementation of corrective and preventive actions;
  - 4.6.6. Complete the CAR form and return it to the by the agreed deadline.
- 4.7.
- 4.7.1. Evaluate the effectiveness of the results of corrective actions carried out by the Head of the work unit / related parties. To ensure the effectiveness of corrective actions carried out by the head of the work unit / related parties, the Head of the Quality Assurance Unit can verify the data on the results of corrective actions over a certain period of time (especially for findings with major categories);
  - 4.7.2. Closing the CAR after verifying the results of the improvement and declaring that the results of the improvement are effective. If the action has not been effective, the has the right to request a re-repair;
  - 4.7.3. Document the original CAR that has been completed and then send a copy of the CAR to the head of the work unit / related parties;
  - 4.7.4. Conducting a comprehensive review of the implementation and results of internal audits and requesting improvements needed by *auditors* using the Internal Audit Feedback Form SOP-FTIP-UNPAD-9.2.1/F8.

## **5. RELATED FORMS**

- 5.1. SOP-FTIP-UNPAD-9.2.1/F1: Internal Audit Implementation
- 5.2. SOP-FTIP-UNPAD-9.2.1/F2: Internal Audit Implementation Schedule
- 5.3. SOP-FTIP-UNPAD-9.2.1/F3: Internal Audit Checklist
- 5.4. SOP-FTIP-UNPAD-9.2.1/F4: Internal Audit Findings Report
- 5.5. SOP-FTIP-UNPAD-9.2.1/F5: Internal Audit Review Results

5.6. SOP-FTIP-UNPAD-9.2.1/F6: *Corrective Action Request (CAR) Internal Audit*

5.7. SOP-FTIP-UNPAD-9.2.1/F7: Internal Audit Completion Monitoring (CAR)

5.8. SOP-FTIP-UNPAD-9.2.1/F8: Internal Audit Feedback

## **6. RELATED ATTACHMENTS**

6.1. SOP-FTIP-UNPAD-9.1.1/L1: Flowchart

COPY

## **CONDUCT OF MANAGEMENT REVIEW MEETINGS**

### **SOP-FTIP-UNPAD-9.3.1**

#### **1. PURPOSE**

This SOP provides guidelines for the implementation of management review meetings

#### **2. SCOPE**

This SOP applies to the review of the effectiveness of the management system and any other relevant issues that need to be resolved immediately by the faculty.

#### **3. GENERAL DESCRIPTION**

1. Management review meetings are held to review the effectiveness of the implementation of the faculty management system and address any existing problems in education, research, and community service services.
2. Management review meetings are held every 6 months after internal audits are carried out and findings of irregularities are followed up by the relevant work units.
3. The agenda of the management review meeting shall at least include:
  1. Status of corrective actions from previous management reviews
  2. Changes in external and internal issues relevant to the faculty education management system
  3. Information related to the performance and effectiveness of the management system including related trends:
    1. Satisfaction of students and other beneficiaries;
    2. Student feedback and other beneficiary requirements;
    3. Achievement of performance goals and objectives;
    4. Process performance and conformity of products and services;
    5. Compliance and corrective action;
    6. Monitoring and measurement results;
    7. Internal and external audit results;