GOVERNMENT OF ZAMBIA

STATUTORY INSTRUMENT No. 25 of 2016

The Higher Education Act, 2013 (Act No. 4 of 2013)

The Higher Education (Higher Education Quality Assurance System) Regulations, 2016

IN EXERCISE of the powers contained in section *fifty-two* of the Higher Education Act, 2013, the following Regulations are made:

PART I

PRELIMINARY

1. These Regulations may be cited as the Higher Education (Higher Education Quality Assurance System) Regulations, 2016.

Title

2. In these Regulations, unless the context otherwise requires—

Interpretation

- "Authority" has the meaning assigned to it in the Act;
- " Higher education institution" has the meaning assigned to it in the Act;
- "operational plan" means a plan approved by the Authority in accordance with section seventeen of the Act;
- "repealed Act" has the meaning assigned to it in the Act;
- "Zambia Qualifications Authority" means the Authority established under section *seven* of the Zambia Qualifications Authority Act, 2011.

Act No. 13 of 2011

PART II

REGISTRATION OF PRIVATE HIGHER EDUCATION INSTITUTION

3. A person who intends to operate a private higher education institution shall apply to the Authority for registration in Form I set out in the First Schedule upon payment of the fee set out in the Second Schedule.

Application for registration

4. The Authority shall for the purposes of ensuring compliance with the Act and verification of the information provided in the application by the private higher education institution, conduct—

Institutional audit and physical inspection of premises

Copies of this Statutory Instrument can be obtained from the Government Printer; P.O. Box 30136, 10101, Lusaka, Price K 52.00 each

- (a) an institutional audit; and
- (b) a physical inspection of the premises to be used.

Certificate of registration

- 5. (1) The Authority shall, where it approves an application for registration, issue an applicant with a certificate of registration in Form V set out in the First Schedule.
- (2) A private higher education institution with more than one campus shall be issued with a separate certificate for each campus.

PART III

Accreditation of Learning Programmes in Higher Education Institutions

Purpose of accreditation

- 6. The Authority shall accredit learning programmes offered in a higher education institution for the purpose of—
 - (a) setting and safeguarding the quality of academic programmes;
 - (b) recognising learning programmes;
 - (c) ensuring the continuous improvement of the quality of academic programmes;
 - (d) providing the public with notice that a higher education institution meets the standards of the Zambia Qualifications Authority; and
 - (e) developing institutional arrangement.

Application for accreditation

- 7. (1) A higher education institution shall apply to the Authority for the accreditation of a learning programme in Form II set out in the First Schedule upon payment of the fee set out in the Second Schedule.
- (2) The Authority shall, where an application meets the requirements for accreditation, within thirty days of receipt of an application under sub-regulation (1), approve the application and inform the applicant in Form III set out in the First Schedule.
- (3) The Authority shall, where it rejects an application for accreditation, inform the applicant in Form IV set out in the First Schedule.

Criteria for accreditation

- 8. The Authority shall accredit a learning programme of a higher education institution if—
 - (a) the aims and objectives of the learning programmes promote national or regional human resource development;

- (b) the curriculum is clearly defined and responds to the demands of the labour market;
- (c) the student enrolment in the learning programmes is clearly determined;
- (d) the levels of qualifications conform to the National Qualifications Framework provided under the Zambia Qualifications Authority Act;
- (e) the higher education institution has clear and defined assessment methods for Under-Graduate and Post-Graduate programmes;
- (f) the staff to be employed are adequate for the efficient delivery of the learning programmes and possess the necessary qualifications and experience in the relevant field;
- (g) the facilities that are required to deliver the learning programmes are sufficient;
- (h) there are academic support services for the efficient delivery of the learning programmes;
- (i) there are institutional management arrangements set in place for the purpose of internal quality assurance; and
- (j) adequate financial provision has been made or is guaranteed for the efficient delivery of the learning programmes.
- 9. The Authority shall, where it approves an application for accreditation, issue the applicant with a certificate of accreditation in Form VI set out in the First Schedule.
- 10. (1) The proprietor of a higher education institution shall not offer a learning programme for which it is not accredited.
- (2) A person who contravenes sub-regulation (2) commits an offence and is liable, upon conviction, to a fine not exceeding two thousand five hundred penalty units or to imprisonment for a period not exceeding two years, or to both.
- 11. (1) A higher education institution shall not alter an accredited learning programme without the prior approval of the Authority.
- (2) An application to alter an accredited learning programme shall be in Form VII set out in the First Schedule.
- (3) The Authority shall, within thirty days of receipt of the application to alter an accredited learning programme, approve the application if the proposed alteration meets the requirement of these Regulations.

Act No. 13 of 2011

Certificate of accreditation

Proprietor not to offer unaccredited learning programme

Review and alteration of accredited programme (4) An alteration of accreditation approval shall be in Form III set out in the First Schedule.

Suspension and revocation of accreditation

- 12. The Authority shall, where a higher education institution fails to comply with the standards set out under regulation 8, issue a notice of intention to revoke its accreditation in Form VIII set out in the First Schedule.
- (2) A notice issued under sub-regulation (1) shall specify the details of the failure to comply with the standards.
- (3) A higher education institution shall, within thirty days of receipt of a notice of intention to revoke accreditation, remedy the failure specified in the notice and make representation in writing to the Authority, stating why the accreditation shall not be revoked.
- (4) Where the higher education institution fails to remedy the default, the Authority shall revoke the accreditation issued to the higher education institution and notify the higher education institution in Form IX set out in the First Schedule.
- (5) The Authority shall, where it revokes the accreditation of a higher education institution, publish a notice of revocation in the *Gazette* and a daily newspaper of general circulation in Zambia.
- (6) The Authority shall cancel the notice of intention to revoke accreditation of a higher education institution if the Authority is satisfied that the higher education institution has put in place necessary measures to comply with these Regulations.
- (7) A higher education institution which is subject to a notice under this regulation shall meet the Authority's administration costs and other expenses incurred in the enforcement of this regulation.

Renewal of accreditation

- 13. (1) A higher education institution may apply for the renewal of accreditation of a learning programme to the Authority in Form II set out in the First Schedule.
- (2) The Authority shall, where a higher education institution complies with these Regulations renew its accreditation of a learning programme.

Display of certificate of accreditation

- 14. The higher education institution shall display—
 - (a) in a conspicuous place on its premises, the certificate of accreditation or a certified copy of the same; and
 - (b) in its official documents, its accreditation number and an indication that it is accredited.

15. The Authority shall, within the first quarter of the year, publish in the *Gazette* and a daily newspaper of general circulation the learning programmes accredited in the higher education institutions.

Publication of accredited learning programmes

PART IV

CLASSIFICATION OF HIGHER EDUCATION INSTITUTIONS

16. (1) A higher education institution may apply to the Authority for classification in Form X set out in the First Schedule.

Application for classification

- (2) The Authority shall, within thirty days of receipt of an application under sub-regulation (1), where the application meets the requirements for classification, approve the application in Form III set out in the First Schedule.
- (3) The Authority shall, where it rejects an application for classification, inform the applicant in Form IV set out in the First Schedule.
- 17. The authority shall, publish a list of the classifications of higher education institutions within the first quarter of the year, in the *Gazette* and a daily newspaper of general circulation in Zambia.

Publication of classification

PART V GENERAL PROVISIONS

18. (1) A higher education institution whose certificate of registration or accreditation is destroyed or lost may apply to the Authority for a duplicate certificate in Form XI set out in the First Schedule upon payment of the fee set out in the Second Schedule.

Duplicate certificate of registration or accreditation

- (2) The Authority may, upon receipt of an application under sub-regulation (1), issue a duplicate certificate of registration or accreditation in Form V or VI set out in the First Schedule respectively.
- 19. The fees set out in the Second Schedule are the prescribed fees for the matters specified in the Schedule.
 - O. A person who is aggrieved with the decision of the Authority

and a person who is aggreed with the decision of the Authority under these Regulations may appeal to the Minister within thirty days of the service of the decision on that person.

Appeals

FIRST SCHEDULE

(Regulations 3, 5, 7, 9, 11 (2), 11 (4), 12 (1), 12 (4), 13 (1), 16 (1), 16 (2), 16 (3) and 18)

Form 1 (Regulation 3)



The Higher Education Act, 2013 (Act No. 4 of 2013)

The Higher Education (Higher Education Quality Assurance System) Regulations, 2016

APPLICATION FOR REGISTRATION AS A PRIVATE HIGHER EDUCATION INSTITUTION

A. INSTRUCTIONS

L. A Private Higher Education Institution applying for Registration should complete this Application Form and forward it to:

The Director-General Higher Education Authority P.O. Box 50464 LUSAKA

2. Applicants should forward all the listed documents with their application. An application will not be processed if any of the required documents is not provided.

	CI	reck
Documents	Yes	No
(1) Certificate of Incorporation or Registration of Business Name		
(2) A sworn affidavit/ declaration that the proprietor, board members have never been declared bankrupt or found guilty of a criminal offence		THE RESIDENCE OF THE PARTY OF T
(3) A sketch showing the location of the Institution		
(4) Three referees (one of whom should be the current banker) who can independently be contacted by the Authority		
(5) Evidence of financial resources or guarantee		
(6) Lease agreement or proof of ownership of training premises	The second consideration and the	
(7) Report or Letter of change of use of premises from the Local Authority		
(8) Report or Letter of approval from the Local Authority in the case of Boarding Houses		
(9) Five copies of the Operational Plan		

															-						
L	3. 1	- 1	7	1	1	N	1	C,	١,	0	١.	١,	r	1	1	17	1)	A	-	1.1	
U). / 1	u	,	1.5	1 1	11 1		.)		I١	. /			1	v	1	1,	1		1	1

1	Name of Proprietor:	
	titulite of thopilotol.	

2. Contact details for the Proprietor

	Please Complete
Physical Address	
Postal Address	
Telephone Numbers	
Fax Number	
E-mail Address	
Contact Person	
Designation of Contact Person	

3. Name of the Higher Education Institution:

4. Address and contact details of the Higher Education Institution

	Please Complete
Physical Address	
Postal Address	
Telephone Numbers	
Fax Number	
E-mail Address	
Website	
Name of Contact Person	
Designation of Contact Person	

5. Bank Name and details

	Please Complete
Name of Bank	
Branch	
Address	

C. OPERATIONAL PLAN

Please provide a summary of the operational plan, under the following headings:

Long, Mediu		Aission a Short Te			of the	Institution.				
2. Go	vern	ince and	Man	agement						
THE RESIDENCE AND ADDRESS OF THE PARTY AND ADD					-	structures,	quantities	and	qualifications	of t
	- hange a more at									
			area consumerous seguina	The best of the second state of the second						
3. Ac	adem	ic Progra	amme	!S						
Delimition	of al	Learni	ng P	rogrami	nes (Undergrad	uate/Post-Gi	adua	te/Research/	Distan

5. Student Admission and Learner Suppo	
 Student Admission and Learner Support Projected numbers of Students, Entry Requirement. 	
September 1 of Outsterns, But y Negativement.	s, and bearner support systems.
112000000000000000000000000000000000000	
6. Staff Staff Policies, Numbers and Qualifications of aca	damic and Sanion Non-Lord Livin Court in Livin
Academic Assistance, disaggregated between Full-	Time and Part-Time Staff.
7. Financial Resources	
Sources and availability of financial resources	to operate the Institution, including financial
management and control procedures.	0.7
8. Physical and Technological Infrastruc	ture
Physical infrastructure to support teaching, learn	ning and research, including technology systems
for learner support and operational functions.	
9. Health and Safety	
Evidence of compliance with the minimum Healt	th and Safety Regulations under relevant written
	th and Safety Regulations under relevant written n the institution for staff and students.
Evidence of compliance with the minimum Healt	th and Safety Regulations under relevant written n the institution for staff and students.
Evidence of compliance with the minimum Healt	th and Safety Regulations under relevant written In the institution for staff and students.
Evidence of compliance with the minimum Healt	th and Safety Regulations under relevant written n the institution for staff and students.
Evidence of compliance with the minimum Health law. Provision of health and safety facilities within the safety facilities within th	th and Safety Regulations under relevant written n the institution for staff and students.
Evidence of compliance with the minimum Health law. Provision of health and safety facilities within the safety facilities within th	th and Safety Regulations under relevant written in the institution for staff and students.
Evidence of compliance with the minimum Heali- law. Provision of health and safety facilities within 10. Any other information	n the institution for staff and students.
Evidence of compliance with the minimum Heali- law. Provision of health and safety facilities within 10. Any other information LARATION here	the institution for staff and students. by declare that the information given above
Evidence of compliance with the minimum Heals law. Provision of health and safety facilities within 10. Any other information LARATION and correct to the best of my knowledge. Sh	the institution for staff and students. by declare that the information given above
Evidence of compliance with the minimum Heals law. Provision of health and safety facilities within 10. Any other information LARATION and correct to the best of my knowledge. Sh	the institution for staff and students. by declare that the information given above
Evidence of compliance with the minimum Heal law. Provision of health and safety facilities within 10. Any other information LARATION , here and correct to the best of my knowledge. Shication shall be rendered invalid.	by declare that the information given above
Evidence of compliance with the minimum Heals law. Provision of health and safety facilities within 10. Any other information LARATION and correct to the best of my knowledge. Sh	the institution for staff and students. by declare that the information given above
Evidence of compliance with the minimum Heal law. Provision of health and safety facilities within 10. Any other information LARATION and correct to the best of my knowledge. Shication shall be rendered invalid. Signed	by declare that the information given above
Evidence of compliance with the minimum Heal law. Provision of health and safety facilities within 10. Any other information LARATION and correct to the best of my knowledge. Shication shall be rendered invalid. Signed	by declare that the information given above
Evidence of compliance with the minimum Heal law. Provision of health and safety facilities within 10. Any other information LARATION and correct to the best of my knowledge. Shication shall be rendered invalid. Signed	by declare that the information given above about the information be verified to be false. Date
Evidence of compliance with the minimum Heal law. Provision of health and safety facilities within 10. Any other information LARATION and correct to the best of my knowledge. Shication shall be rendered invalid. Signed	by declare that the information given above
Evidence of compliance with the minimum Heal law. Provision of health and safety facilities within 10. Any other information LARATION and correct to the best of my knowledge. Shication shall be rendered invalid. Signed	by declare that the information given above about the information be verified to be false. Date

FOR OFFICIAL USE ONLY

Received by:	
Officer	RECEIPT No.
Date Received:	
Amount Received:	
	STAMP
Serial No. of application:	

FORM II (Regulation 7 (1) and 13 (1))



The Higher Education Act, 2013 (Act No. 4 of 2013)

The Higher Education (Higher Education Quality Assurance System) Regulations, 2016

APPLICATION FOR ACCREDITATION/RENEWAL OF ACCREDITATION OF HIGHER EDUCATION LEARNING PROGRAMMES

A. INSTRUCTIONS

A Higher Education Institution applying for accreditation of learning programmes should complete this Application Form and forward it to:

The Director-General Higher Education Authority P.O. Box 50464 LUSAKA

B. ADMINISTRATIVE DATA

- 1. Name of Higher Education Institution:
- 2. Contact details for the Higher Education Institution

	Please Complete
Physical Address	
Postal Address	
Telephone Numbers	
Fax Number	
E-mail Address	
Contact Person	
Designation of Contact Person	

C. Details of Higher Education Learning Programmes

Programme Reference Number
Name of Learning Programme
Aims and Objectives
Rationale of the Learning Programme in relation to national and/or regional human resources
demands.

29th April, 2016	Statutory Instruments	355
Personal transfer of the control of the second of the seco	The FIG. to an investment of the contract of t	
Programme Reference Number		
Name of Learning Programme		
Curriculum		
	ching and Learning Plans, Levels of Qua	difications and
Articulation in the Zambia Qualification		
Programme Reference Number		
Name of Learning Programme		
Assessment		NAMES OF THE PARTY
	nd Security. Arrangements for Assessments	of Dissertations
and Thesis in Post-Graduate Program	mes.	
* * * * * * * * * * * * * * * * * * *	CONTROL OF THE CONTROL OF THE SECOND STATE OF	
Programme Reference Number		The state of the s
Name of Learning Programme		The state of the s
Staff		
Numbers and Qualifications of Staff f	for the Programme, including the balance be	tween Full-Time
	urriculum Vitae of all Staff on this Programm	
	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	
The state of the s		
Programme Reference Number	The state of the s	Constructive transfer and an interest of the second second
Name of Learning Programme		
Facilities for Programme Delivery	T 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Facilities provided and available for	Leaching, Learning and Research	
Programme Reference Number		
Name of Learning Programme		The greek of greek 12 county control 1 when required places (see a county of the
Teaching and Learning Support		AND THE PARTY OF T
Facilities, Equipment and networks a	vailable to support Teaching and Learning.	
	Q	A CALAMATAN THE RESIDENCE OF THE PARTY OF TH
No.	The second secon	
Programma Pafanana Munit		
Programme Reference Number		
Name of Learning Programme		the value along the residence of the second section of the second section of the second section section is the second section of the second section se
Internal Quality Assurance		7
Details in internal policy, strategies of	and institutional arrangements for Internal Q	uality Assurance.
Programme Reference Number		
Name of Learning Programme		
Financial Resources		
The state of the s		

Sources, availability and adequacy of financial resources to support the Learning Programme.

STAMP

OTHER INFORMATION	
Programme Reference Number	
Name of Learning Programme	The same state of the same sta
Other Information pertinent to this Learning Pr	rogramme
ote: Applicants may use additional pages for a	dditional Learning Programmes
DECLARATION	
/We, h s true and correct to the best of my/our knowle alse, this application shall be rendered invalid.	dge. Should the information be verified to b
Signed	- Date
Vitness:	
Neme	Signature
Date	
PAD APPIAL	7. 1120 O.V.
FOR OFFICIA	L USE ONLY
Received by:	
Officer	RECEIPT No.
200-	,
Date Received:	The second of th
Amount Received:	

Scrial No. of application:

Form III (Regulation 7 (2), 11 (4) and 16 (2))



The Higher Education Act, 2013 (Act No. 4 of 2013)

The Higher Education (Higher Education Quality Assurance System) Regulations, 2016

NOTICE OF ACCEPTANCE OF APPLICATION

(1) Here insert the full names and address of	<i>To</i> (1)
applicant. (2) Here insert the reference No. of the	IN THE MATTER OF (2) You are hereby notified that your application for (3)
application. (3) Here insert type of application.	has been accepted on the following conditions*: (a)(b)(c)(d)
	Dated this
	Director-General

Note * Additional conditions may be attached, where necessary, on a separate sheet.

FORM IV (Regulation 7 (3), and 16 (3))



The Higher Education Act, 2013 (Act No. 4 of 2013)

The Higher Education (Higher Education Quality Assurance System) Regulations, 2016

NOTICE OF REJECTION OF APPLICATION

(4) Here insert	<i>To</i> (1)
he full names and address of	
applicant.	IN THE MATTER OF (2)
(5) Here insert the reference No. of the application.	You are hereby notified that your application for (3)
(6) Here insert type of application.	(a)(b)(c)(d)
	Dated this
	Director-General

Note * Additional grounds may be attached, where necessary, on a separate sheet.

FORM V (Regulation 5



The Higher Education Act, 2013 (Act No. 4 of 2013)

The Higher Education (Higher Education Quality Assurance System) Regulations, 2016

CERTIFICATE OF REGISTRATION AS PRIVATE HIGHER EDUCATION INSTITUTION

This is to certif	y that						
Situated at							
has on the day of	in the year						
been Registered as a UNIVERSITY in accordance 2013.	e with the Higher Education Act No. 4 of						
Chairperson Higher Education Authority	Director-General Higher Education Authority						
Certificate Number:							

This Certificate remains the property of the Higher Education Authority and must be surrendered on demand.

on demand.

FORM VI (Regulation 9



The Higher Education Act, 2013 (Act No. 4 of 2013)

The Higher Education (Higher Education Quality Assurance System) Regulations, 2016

CERTIFICATE OF ACCREDITATION

This is to certify that the Higher Edu	neation Learning Programme
Conducted	by
Situated	at
Has satisfied the Quality Standards and Criteria compliance with the Higher Edu	
Chairperson Higher Education Authority	Director-General Higher Education Authority
'ertificate Number:	
his Certificate remains the property of the Higher 1	Education Authority and must be surrendered

FORM VII (Regulation 11 (2))



The Higher Education Act, 2013 (Act No. 4 of 2013)

The Higher Education (Higher Education Quality Assurance System) Regulations, 2016

	APPLICATION FOR ALTER	RATION OF ACCREDI	LED LEARN	ING PROGRAMME
Shad	ed fields for official use only		Certificate code	
Tick where applicable ($$)			Date	
Infor	mation Required	Information Provided		Accreditation no.
L.	Name of the Institution			
2.	Physical address:		COMMISSION AND A STATE OF THE PROPERTY OF THE PROPERTY AND A STATE OF	
3.	Contacts:	THE PERSON OF TH	THE RESERVE WHEN PERSON AND ADDRESS OF THE PERSON ADDR	Control May and the Section of Section 2000 (Section 2000) (Section 2000) (Section 2000)
2.	Physical Address:			
	Tel:			
	Fax:		******************************	The second secon
	Email:		Programme and the state of the	MANUFACTURE STREET, A STREET, AND
	Others:			The state of the s
	C	URRENT PROGRAMM	6	
41.	Programme level - (degree, diploma, etc.,)			
5.	Aims and Objectives:			
6.	Curriculum:	The second secon		THE RESERVE OF THE PARTY OF THE
7	Assessment:			
8.	Details of staff employed for the programme (including qualification, work load, part time and full time):			
9.	Facilities for Programme Delivery:		THE POPULATION SECTION STATES AND A SECTION OF THE POPULATION OF T	The second secon
10.	Teaching and Learning Support:	The second secon	The second secon	
11.	Internal Quality Assurance:			
12.	Financial Resources:			
13.	Other Information pertinent to the learning Programme:			
	A COMPANY OF THE PARTY OF THE P	ROPOSED PROGRAMM	1E	
1.	Programme level - (degree, diploma, etc.,)			
2.	Aims and Objectives:			
3.	Curriculum:			

5. proquanc	tails of staff employed for the ogramme (including alification, work load, part time d full time): cilities for Programme Delivery:	2
	cilities for Programme Delivery:	
7 Tea		
reconstructed by the second	aching and Learning Support:	
8 Int	ernal Quality Assurance:	
9. Fir	nancial Resources:	
	her Information pertinent to this urning programme:	

DECLARATION		
I/We,	edge. Should the in	the information given above nformation be verified to be
Signed		 Date
Witness;		
Name		Signature
Date		
FOR OFFICIA	L USE ONLY	
Received by:		
Officer		RECEIPT No.
Date Received:	TO COMPANY AND THE OWN PROPERTY OF THE RESIDENCE AND THE PROPERTY OF THE PROPE	
Amount Received:		
		STAMP
Serial No. of application:		OTMINIT

FORM VIII (Regulation 12 (1))



The Higher Education Act, 2013 (Act No. 4 of 2013)

The Higher Education (Higher Education Quality Assurance System) Regulations, 2016

NOTICE OF INTENTION TO REVOKE ACCREDITATION OF LEARNING PROGRAMME

	CERTIFICATE NO.:
1) Here insert he full names	To (I)
nd address of colder of certificate.	IN THE MATTER OF (2)
	You are hereby notified that the Higher Education Authority intends to revoke your accreditation of the
	(a)
	Failure to remedy the said breaches shall result in the revocation of your accreditation. Dated this
	Director-General

Note * Additional grounds may be attached, where necessary, on a separate sheet.

FORM IX (Regulation 12 (4))



The Higher Education Act, 2013 (Act No. 4 of 2013)

The Higher Education (Higher Education Quality Assurance System) Regulations, 2016

NOTICE OF REVOCATION OF ACCREDITATION OF LEARNING PROGRAMME

the full names	To (1)
and address of certificate holder.	IN THE MATTER OF (2)
(2) Here insert the certificate number.	You are hereby notified that your accreditation of the
	Director-General

Note * Additional grounds may be attached, where necessary, on a separate sheet.

FORM X (Regulation 16 (1))



The Higher Education Act, 2013 (Act No. 4 of 2013)

The Higher Education (Higher Education Quality Assurance System) Regulations, 2016

APPLICATION FOR CLASSIFICATION OF A HIGHER EDUCATION INSTITUTION

A. INSTRUCTIONS

 Λ Higher Education Institution applying for classification should complete this Application Form and forward it to:

The Director-General Higher Education Authority P.O. Box 50464 LUSAKA

B. DMINISTRATIVE DATA

- 1. Name of Higher Education Institution:
- 2. Contact details for the Higher Education Institution

	Please Complete
Physical Address	
Postal Address	
Telephone Numbers	
Fax Number	
E-mail Address	
Contact Person	
Designation of Contact Person	

3. Please provide details on the following:

1. Vis	ion, N	Aission and St	rategy							
Long, Mediu	n and	Short Term of	jectives a	of the	Institution.					
									1,101,000	
		ince and Man								
Governance	and	Management	systems	and	structures,	quantities	and	qualifications	of	the

	The second secon
3. Academic Programmes	The second secon
Definition of all Learning Programmes (Undergro	aduate/Post-Graduate/Research/ Distance
rogianales, including arrangement of Faculties.)	Toward Con Estatute
4. Research	
Facilities, equipment, etc. to support Research.	
The second secon	
5. Student Admission and Learner Support	The second secon
Projected numbers of Students, Entry Requirements, and	Learner Support systems.
C. C.	
6. Staff	
Staff Policies, Numbers and Qualifications of academic	and Senior Non-Academic Staff, including
Academic Assistance, disaggregated between Full-Time a	and Part-Time Staff.
7. Financial Resources	
Sources and availability of financial resources to op- management and control procedures.	perate the Institution, including financial
The Control procedures.	The state of the s
8. Physical and Technological Intrastructure	
Physical infrastructure to support teaching, learning at	and varyanah inaladi atau t
for learner support and operational functions.	at research, incliding technology systems
A STATE OF THE PROPERTY OF THE	Statements and Albert Statement open and the Statement of
9. Health and Safety	The state of the s
Evidence of compliance with the minimum Health and	Safety Regulations under relevant miles
law. Provision of health and safety facilities within the in-	stitution for staff and students
Non-wall of the second	The state of the s
10. Any other information	
The state of the s	The state of the s

DECLARATION I/We,, hereby declare that the information given above is true and correct to the best of my/our knowledge. Should the information be verified to be false, this application shall be rendered invalid. Signed Date Witness: Name Signature Date FOR OFFICIAL USE ONLY Received by: Officer RECEIPT No. Date Received: Amount Received: STAMP Serial No. of application:

Form XI (Regulation 18)



The Higher Education Act, 2013 (Act No. 4 of 2013)

The Higher Education (Higher Education Quality Assurance System) Regulations, 2016

APPLICATION FOR DUPLICATE *CERTIFICATE OF REGISTRATION/ACCREDITATION

2.	Contact details for the Higher Edu	ication Institution
		Please Complete
Physical A	ddress	
Postal Ado	Iress	
Telephone	Numbers	
Fax Numb	er	
E-mail Ad	dress	
Contact Pe	erson	
Designatio	on of Contact Person	GED CERTIFICATE
Designatio	On of Contact Person PLACEMENT OF LOST/DAMA Certificate of *Registration/Accre	editation Number:
Designation B. REP (i) (ii)	ON OF CONTACT PERSON PLACEMENT OF LOST/DAMA	editation Number:
Designation B. REP (i) (ii)	Certificate of *Registration/Accre	editation Number:
Designation B. REP (i) (ii)	Certificate of *Registration/Accre Year issued: Circumstances which led to loss	editation Number: or damage of the certificate:
Designation B. REP (i) (ii)	PLACEMENT OF LOST/DAMA Certificate of *Registration/Accre Year issued: Circumstances which led to loss	editation Number:
Designation B. REP (i) (ii)	PLACEMENT OF LOST/DAMA Certificate of *Registration/Accre Year issued: Circumstances which led to loss	editation Number:or damage of the certificate:

DECLARATION	
/We,, he s true and correct to the best of my/our knowled false, this application shall be rendered invalid.	
Signed	Date
*Delete whichever is not applicable	
EOD OFFICIAL	L LICE ONL V
FOR OFFICIAL	LUSE ONLY
Comments by the Higher Education Authority	
1675555	
••••	
Application granted/rejected	
Dated this day of	20
Director-	

SECOND SCHEDULE (Regulations 3, 7,18 and 19)

FEES

	Private Higher Education Institution		Public Higher
Category of Fees	Foreign Higher Education Institution Fee Unit	Local Higher Education Institution Fee Unit	Education Institution Fee Unit
Submission of Application for Registration as a Private Higher Education Institution	3, 334	1, 667	
Registration of a Private Higher Education Institution	50,000	33, 334	
Accreditation of a Learning Programme	33,334	16, 667	16,667
Annual Levy	17 per Registered Student	14 per Registered Student	14 per Registered Student
Duplicate Certificate of Registration/Accreditation	6,668	3,334	3,334

Lusaka 26th April, 2016 [MESVTEE/10/21/1] Dr. M. L. Kaingu, Minister of Higher Education