Цифровизация академических форм, упрощение бизнес процессов

Этикет Zoom

Убедительная просьба

Начинать вовремя

Поднимать руку,
чтобы задать вопрос

Подготовить рабочее место

Держать камеру включенной,
ведется запись

Отключить микрофон
во время презентации

Переименовать себя
Имя, ВУЗ или
Имя Отчество, ВУЗ

Коккозов Димаш

- Старший Менеджер Офиса Регистратора
- Nazarbayev University
- +77076622231
- dimash.kokkozov@nu.edu.kz

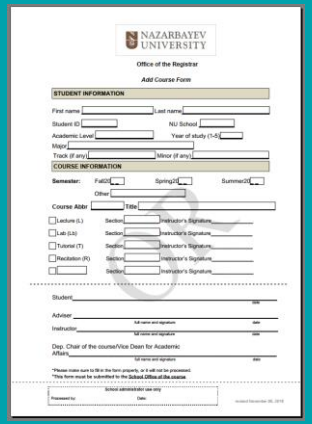
Цифровизация академических форм

упрощение бизнес процессов

Виды Академических Форм

- Добавления курса
- Аудита курса
- Изменения персональных данных
- О перегрузки кредитов
- О недогрузки кредитов
- Дополнительного места
- Неполной оценки
- Об академическом отпуске
- Декларации специальности (майнор)
- Об отмене обязательных требований
- Об отмене приоритета
- Разрешения на пересдачу курса
- Декларации второй специализации (мэйджор)
- Заявления о выборе направления
- Перевода между специальностями
- Перевода между школами
- Добровольного отчисления
- Отказа от курса
- Отмены курса (withdrawal)

Академические Формы до пандемии


NAZARBAYEV UNIVERSITY

Office of the Registrar

Add Course Form

STUDENT INFORMATION

First name ____ Last name ____

Student ID ____ NU School ____

Academic Level ____ Year of study (1-5) ____

Major ____

Track (if any) ____ Minor (if any) ____

COURSE INFORMATION

Semester: Fall20__ Spring20__ Summer20__

Other ____

Course Abbr ____ Title ____

☐ Lecture (L) Section ____ Instructor's Signature ____

☐ Lab (Lb) Section ____ Instructor's Signature ____

☐ Tutorial (T) Section ____ Instructor's Signature ____

☐ Recitation (R) Section ____ Instructor's Signature ____

☐ ____ Section ____ Instructor's Signature ____

Student ____ date

Adviser ____ full name and signature date

Instructor ____ full name and signature date

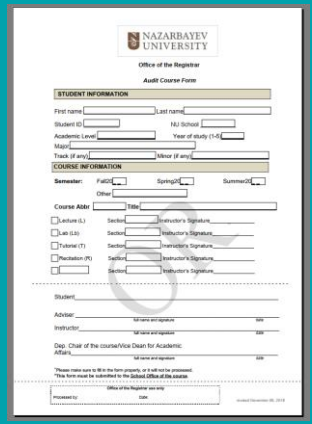
Dep. Chair of the course/Vice Dean for Academic Affairs ____ full name and signature date

*Please make sure to fill in the form properly, or it will not be processed.

*This form must be submitted to the School Office of the course.

School administrator use only

Processed by: ____ Date: ____


NAZARBAYEV UNIVERSITY

Office of the Registrar

Audit Course Form

STUDENT INFORMATION

First name ____ Last name ____

Student ID ____ NU School ____

Academic Level ____ Year of study (1-5) ____

Major ____

Track (if any) ____ Minor (if any) ____

COURSE INFORMATION

Semester: Fall20__ Spring20__ Summer20__

Other ____

Course Abbr ____ Title ____

☐ Lecture (L) Section ____ Instructor's Signature ____

☐ Lab (Lb) Section ____ Instructor's Signature ____

☐ Tutorial (T) Section ____ Instructor's Signature ____

☐ Recitation (R) Section ____ Instructor's Signature ____

☐ ____ Section ____ Instructor's Signature ____

Student ____ signature date

Adviser ____ full name and signature date

Instructor ____ full name and signature date

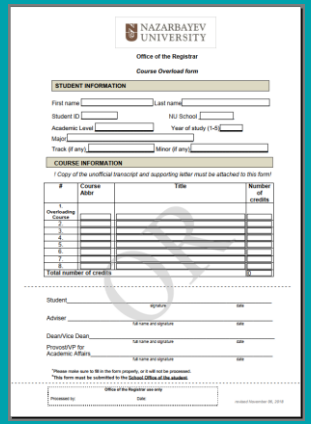
Dep. Chair of the course/Vice Dean for Academic Affairs ____ full name and signature date

*Please make sure to fill in the form properly, or it will not be processed.

*This form must be submitted to the School Office of the course.

Office of the Registrar use only

Processed by: ____ Date: ____


NAZARBAYEV UNIVERSITY

Office of the Registrar

Course Overload form

STUDENT INFORMATION

First name ____ Last name ____

Student ID ____ NU School ____

Academic Level ____ Year of study (1-5) ____

Major ____

Track (if any) ____ Minor (if any) ____

COURSE INFORMATION

! Copy of the unofficial transcript and supporting letter must be attached to this form!

#	Course Abbr	Title	Number of credits
1 Overloading Course			
2			
3			
4			
5			
6			
7			
8			
Total number of credits			0

Student ____ signature date

Adviser ____ full name and signature date

Dean/Vice Dean ____ full name and signature date

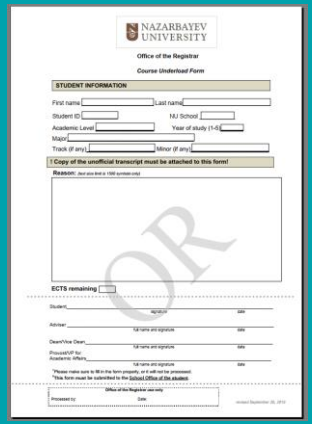
Provost/VP for Academic Affairs ____ full name and signature date

*Please make sure to fill in the form properly, or it will not be processed.

*This form must be submitted to the School Office of the student.

Office of the Registrar use only

Processed by: ____ Date: ____


NAZARBAYEV UNIVERSITY

Office of the Registrar

Course Underload Form

STUDENT INFORMATION

First name ____ Last name ____

Student ID ____ NU School ____

Academic Level ____ Year of study (1-5) ____

Major ____

Track (if any) ____ Minor (if any) ____

! Copy of the unofficial transcript must be attached to this form!

Reason: (text area limit is 1500 symbols only)

ECTS remaining ____

Student ____ signature date

Adviser ____ full name and signature date

Dean/Vice Dean ____ full name and signature date

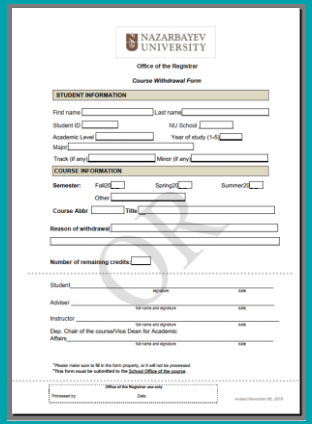
Provost/VP for Academic Affairs ____ full name and signature date

*Please make sure to fill in the form properly, or it will not be processed.

*This form must be submitted to the School Office of the student.

Office of the Registrar use only

Processed by: ____ Date: ____


NAZARBAYEV UNIVERSITY

Office of the Registrar

Course Withdrawal Form

STUDENT INFORMATION

First name ____ Last name ____

Student ID ____ NU School ____

Academic Level ____ Year of study (1-5) ____

Major ____

Track (if any) ____ Minor (if any) ____

COURSE INFORMATION

Semester: Fall20__ Spring20__ Summer20__

Other ____

Course Abbr ____ Title ____

Reason of withdrawal ____

Number of remaining credits ____

Student ____ signature date

Adviser ____ full name and signature date

Instructor ____ full name and signature date

Dep. Chair of the course/Vice Dean for Academic Affairs ____ full name and signature date

*Please make sure to fill in the form properly, or it will not be processed.

*This form must be submitted to the School Office of the course.

Office of the Registrar use only

Processed by: ____ Date: ____

NAZARBAYEV UNIVERSITY

Office of the Registrar

Drop Course Form

STUDENT INFORMATION

First name ____ Last name ____

Student ID ____ NU School ____

Academic Level ____ Year of study (1-5) ____

Major ____

Track (if any) ____ Minor (if any) ____

COURSE INFORMATION

Semester: Fall20__ Spring20__ Summer20__

Other ____

Course Abbr ____ Title ____

☐ Lecture (L) Section ____ Instructor's Signature ____

☐ Lab (Lb) Section ____ Instructor's Signature ____

☐ Tutorial (T) Section ____ Instructor's Signature ____

☐ Recitation (R) Section ____ Instructor's Signature ____

☐ ____ Section ____ Instructor's Signature ____

Student ____ signature date

Adviser ____ full name and signature date

Instructor ____ full name and signature date

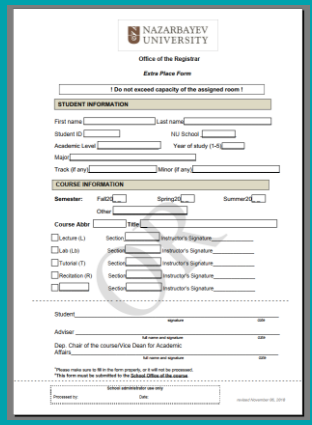
Dep. Chair of the course/Vice Dean for Academic Affairs ____ full name and signature date

*Please make sure to fill in the form properly, or it will not be processed.

*This form must be submitted to the School Office of the course.

School administrator use only

Processed by: ____ Date: ____


NAZARBAYEV UNIVERSITY

Office of the Registrar

Extra Place Form

! Do not exceed capacity of the assigned room !

STUDENT INFORMATION

First name ____ Last name ____

Student ID ____ NU School ____

Academic Level ____ Year of study (1-5) ____

Major ____

Track (if any) ____ Minor (if any) ____

COURSE INFORMATION

Semester: Fall20__ Spring20__ Summer20__

Other ____

Course Abbr ____ Title ____

☐ Lecture (L) Section ____ Instructor's Signature ____

☐ Lab (Lb) Section ____ Instructor's Signature ____

☐ Tutorial (T) Section ____ Instructor's Signature ____

☐ Recitation (R) Section ____ Instructor's Signature ____

☐ ____ Section ____ Instructor's Signature ____

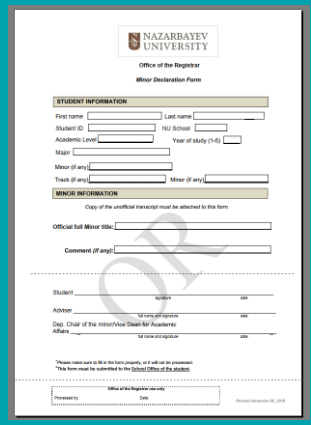
Student ____ signature date

Adviser ____ full name and signature date

Dep. Chair of the course/Vice Dean for Academic Affairs ____ full name and signature date

School administrator use only

Processed by: ____ Date: ____


NAZARBAYEV UNIVERSITY

Office of the Registrar

Minor Declaration Form

STUDENT INFORMATION

First name ____ Last name ____

Student ID ____ NU School ____

Academic Level ____ Year of study (1-5) ____

Major ____

Minor (if any) ____

Track (if any) ____ Minor (if any) ____

MINOR INFORMATION

Copy of the unofficial transcript must be attached to this form.

Official full Minor title: ____

Comment (if any): ____

Student ____ signature date

Adviser ____ full name and signature date

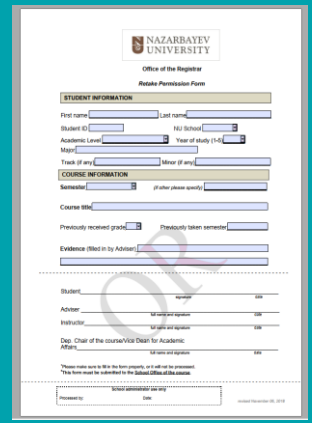
Dep. Chair of the minor/Vice Dean for Academic Affairs ____ full name and signature date

*Please make sure to fill in the form properly, or it will not be processed.

*This form must be submitted to the School Office of the student.

Office of the Registrar use only

Processed by: ____ Date: ____


NAZARBAYEV UNIVERSITY

Office of the Registrar

Retake Permission Form

STUDENT INFORMATION

First name ____ Last name ____

Student ID ____ NU School ____

Academic Level ____ Year of study (1-5) ____

Major ____

Track (if any) ____ Minor (if any) ____

COURSE INFORMATION

Semester ____ (if other please specify) ____

Course title ____

Previously received grade ____ Previously taken semester ____

Evidence (filled in by Adviser) ____

Student ____ signature date

Adviser ____ full name and signature date

Instructor ____ full name and signature date

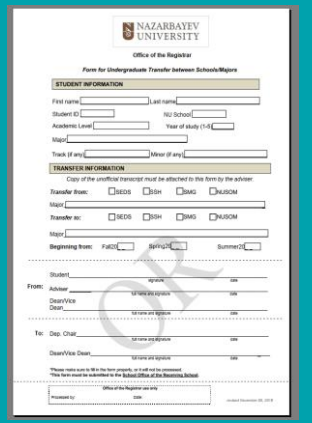
Dep. Chair of the course/Vice Dean for Academic Affairs ____ full name and signature date

*Please make sure to fill in the form properly, or it will not be processed.

*This form must be submitted to the School Office of the course.

School administrator use only

Processed by: ____ Date: ____


NAZARBAYEV UNIVERSITY

Office of the Registrar

Form for Undergraduate Transfer between Schools/Majors

STUDENT INFORMATION

First name ____ Last name ____

Student ID ____ NU School ____

Academic Level ____ Year of study (1-4) ____

Major ____

Track (if any) ____ Minor (if any) ____

TRANSFER INFORMATION

Copy of the unofficial transcript must be attached to this form by the adviser.

Transfer from: ☐ SEDS ☐ SSH ☐ SMG ☐ NUSOM

Major ____

Transfer to: ☐ SEDS ☐ SSH ☐ SMG ☐ NUSOM

Major ____

Beginning from: Fall20__ Spring20__ Summer20__

From:

Student ____ signature date

Adviser ____ full name and signature date

Dean/Vice Dean ____ full name and signature date

To:

Dep. Chair ____ full name and signature date

Dean/Vice Dean ____ full name and signature date

*Please make sure to fill in the form properly, or it will not be processed.

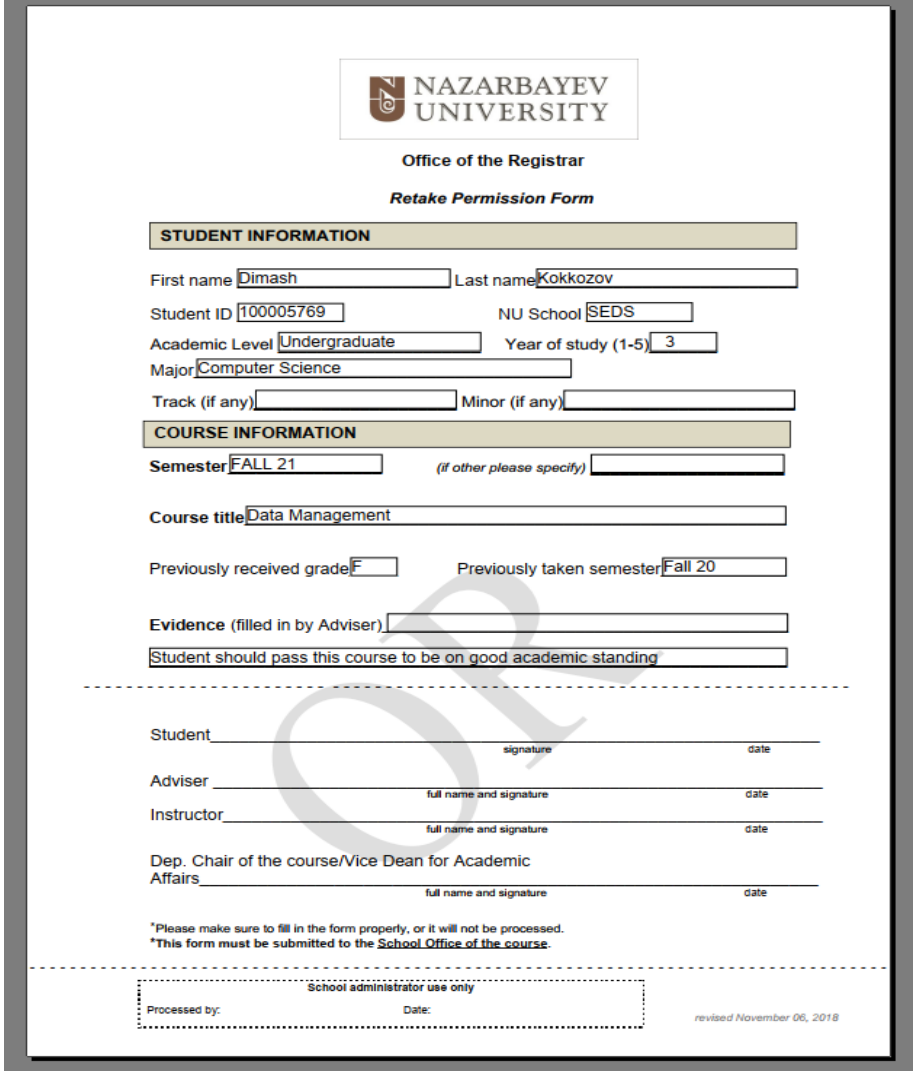
*This form must be submitted to the School Office of the Receiving School.

Office of the Registrar use only

Processed by: ____ Date: ____

RETAKE PERMISSION FORM

В данном слайде приведен пример формы разрешения на пересдачу курса



NAZARBAYEV UNIVERSITY

Office of the Registrar

Retake Permission Form

STUDENT INFORMATION

First name Dimash Last name Kokkozov

Student ID 100005769 NU School SEDS

Academic Level Undergraduate Year of study (1-5) 3

Major Computer Science

Track (if any) Minor (if any)

COURSE INFORMATION

Semester FALL 21 *(if other please specify)*

Course title Data Management

Previously received grade F Previously taken semester Fall 20

Evidence (filled in by Adviser)

Student should pass this course to be on good academic standing

Student _____ signature date

Adviser _____ full name and signature date

Instructor _____ full name and signature date

Dep. Chair of the course/Vice Dean for Academic Affairs _____ full name and signature date

*Please make sure to fill in the form properly, or it will not be processed.
*This form must be submitted to the School Office of the course.

School administrator use only

Processed by: Date:

revised November 06, 2018

Факты о формах и возникшие проблемы

- Основная масса форм используется в период регистрации на курсы.
- 80% всех форм обрабатываются в течении ограниченного периода времени (1 – 1.5 месяца)
- 2-6 утверждающих и 1 процессор (обработчик)
- В некоторых случаях 1 студенту требуется сдать несколько форм
- Непонимание процесса в условиях пандемии
- Устав о подписи
- Принятие срочных решений через вседоступные коммуникационные средства.
- Потеря данных/форм
- Процесс 1 формы мог занимать до 1 месяца

Первые шаги к решениям

01

Онлайн Встреча

с представителями школ (ДЕКАН/ВИЦЕ ДЕКАН)

02

Исключение подписей

Решение о принятии и процесса форм через электронные письма без подписей

03

Один источник

Все формы будут присылаться от одного источника (школьного менеджера)

04

Приоритет

Донесение проблемы до руководства Университета как одна из самых приоритетных

Решение Руководства Университета

Приоритет	**ИТ Департамент**	**Карт-Бланш**
Помимо всех основных внешних/внутренних проблем, также в приоритет поставили вопрос о решении данной ситуации с формами	Задача перед IT департаментом	Полный карт-бланш при установке задач

Работа с ИТ департаментом

Оптимизация

Исключение лишних шагов/подписантов

Передача Идей

Разъяснение по каждой форме/Визуализация

Процесс работы с ИТ

Определение методологии (Scrum)

Оптимизация

Встреча с подписантами

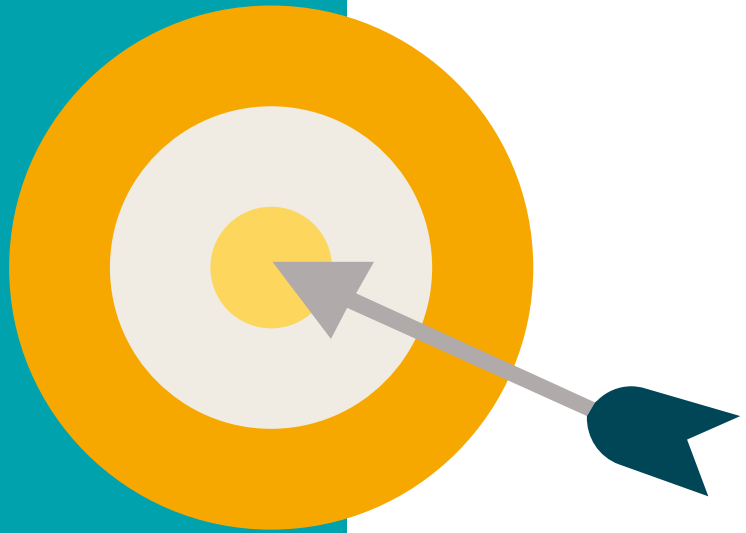
Выяснение необходимости в присутствии в процессе утверждения

Риски

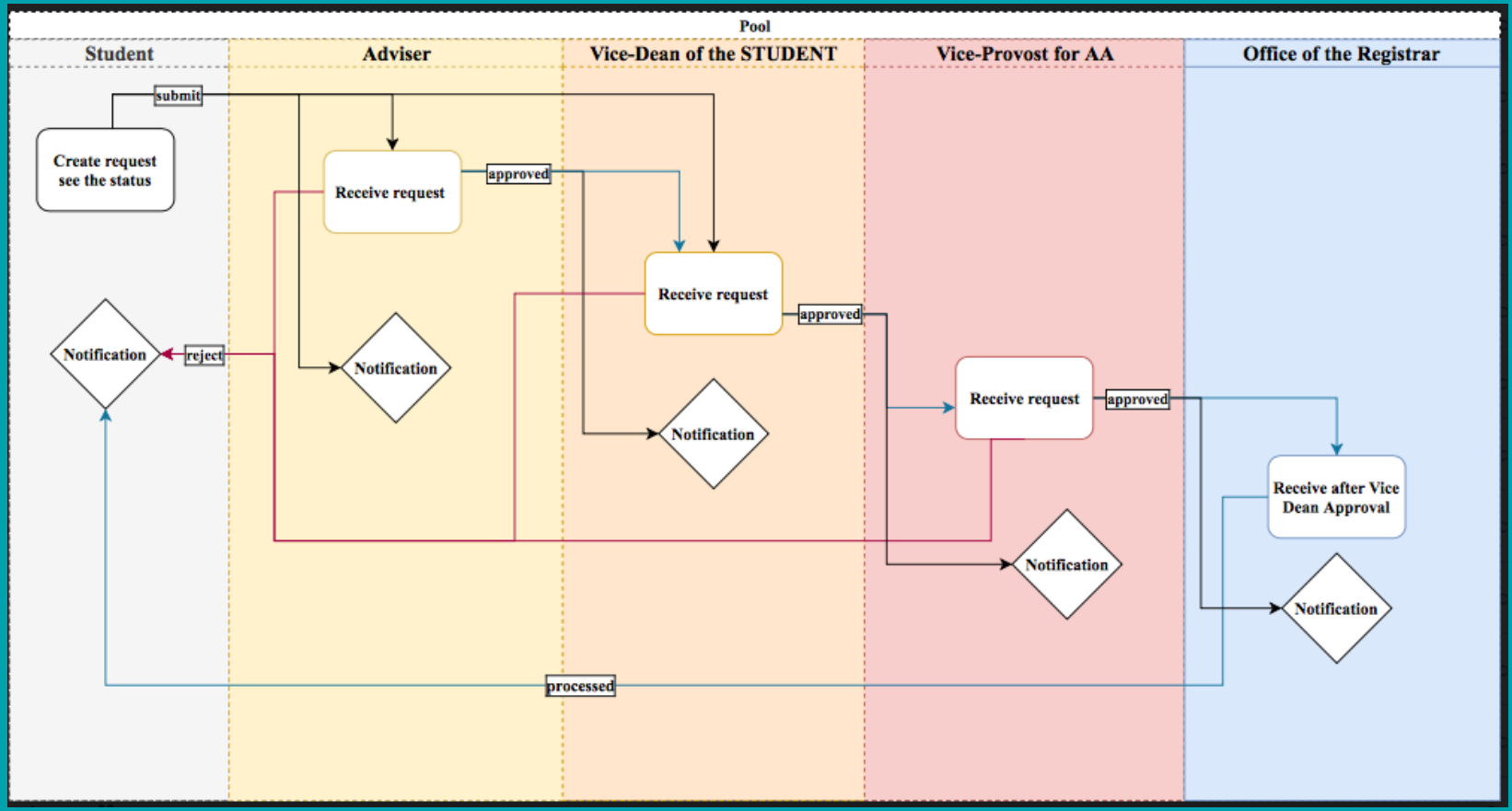
Выявление рисков при оптимизации

Демонстрация нового процесса

Показ оптимизированного процесса главным подписантам



Передача идеи



Процесс работы с ИТ департаментом

Составление задачи

Передача детально описаной технической задачи

Эскиз

Передача визуального (картинка, диаграмма) представление о конечном результате

демонстрация

Разработанного модуля (формы)

Тестирование

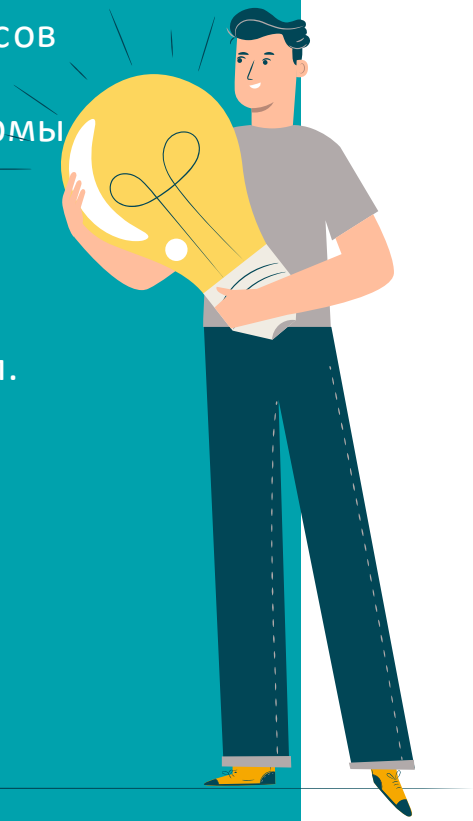
До принятие выполненных работ, провести тестирование оцифрованной формы

Минусы оцифрованных форм

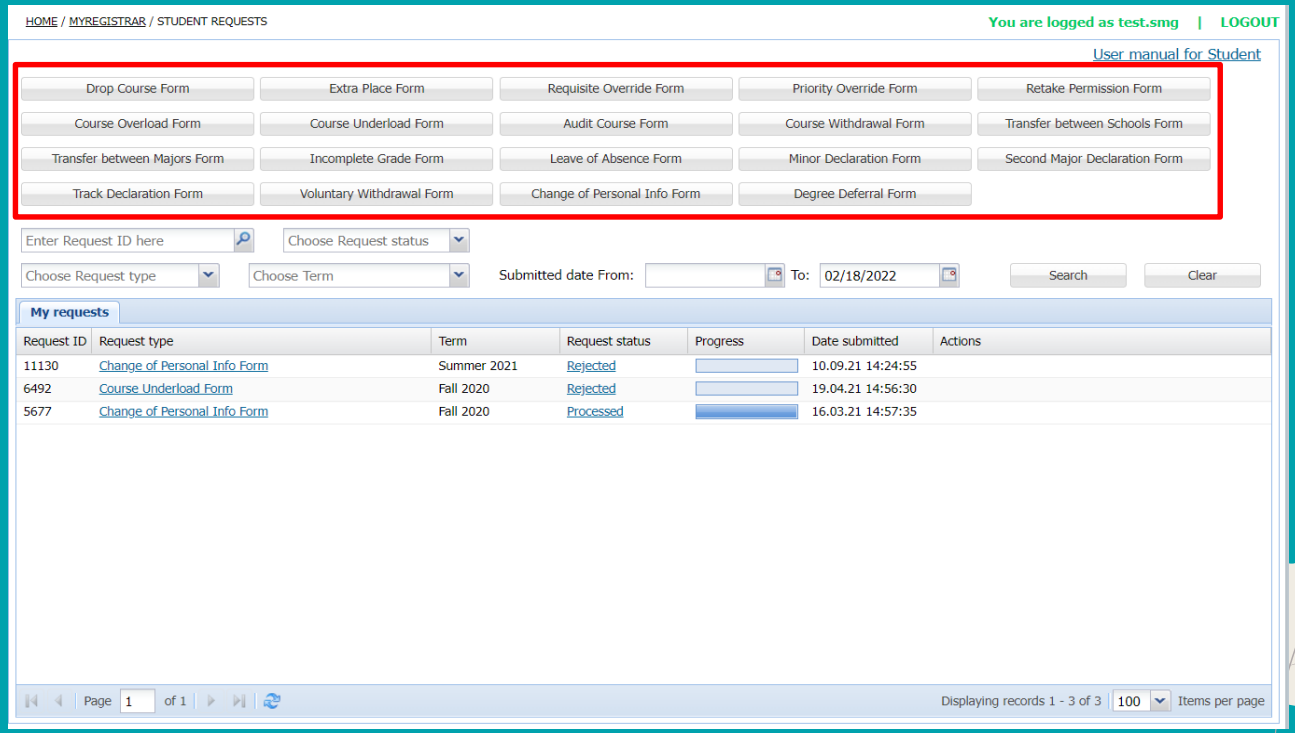
- Отключение интернета
- Возникновение системных ошибок при внедрении других (не связанных) модулей
- Внешняя хакерская угроза

Плюсы оцифрованных форм

- Процесс обработки форм занимает не более 24 часов
- Рекорд – цикл подача/утверждение/обработка формы за 1 минуту
- Ни одна форма не осталась без ответа
- Дополнительные функции как правила формы, доп. данные о студенте/академическом успеваемости
- Единый формат шапки формы
- Исключение лишних бумаг на рабочем столе
- Ведение анализа/подсчетов

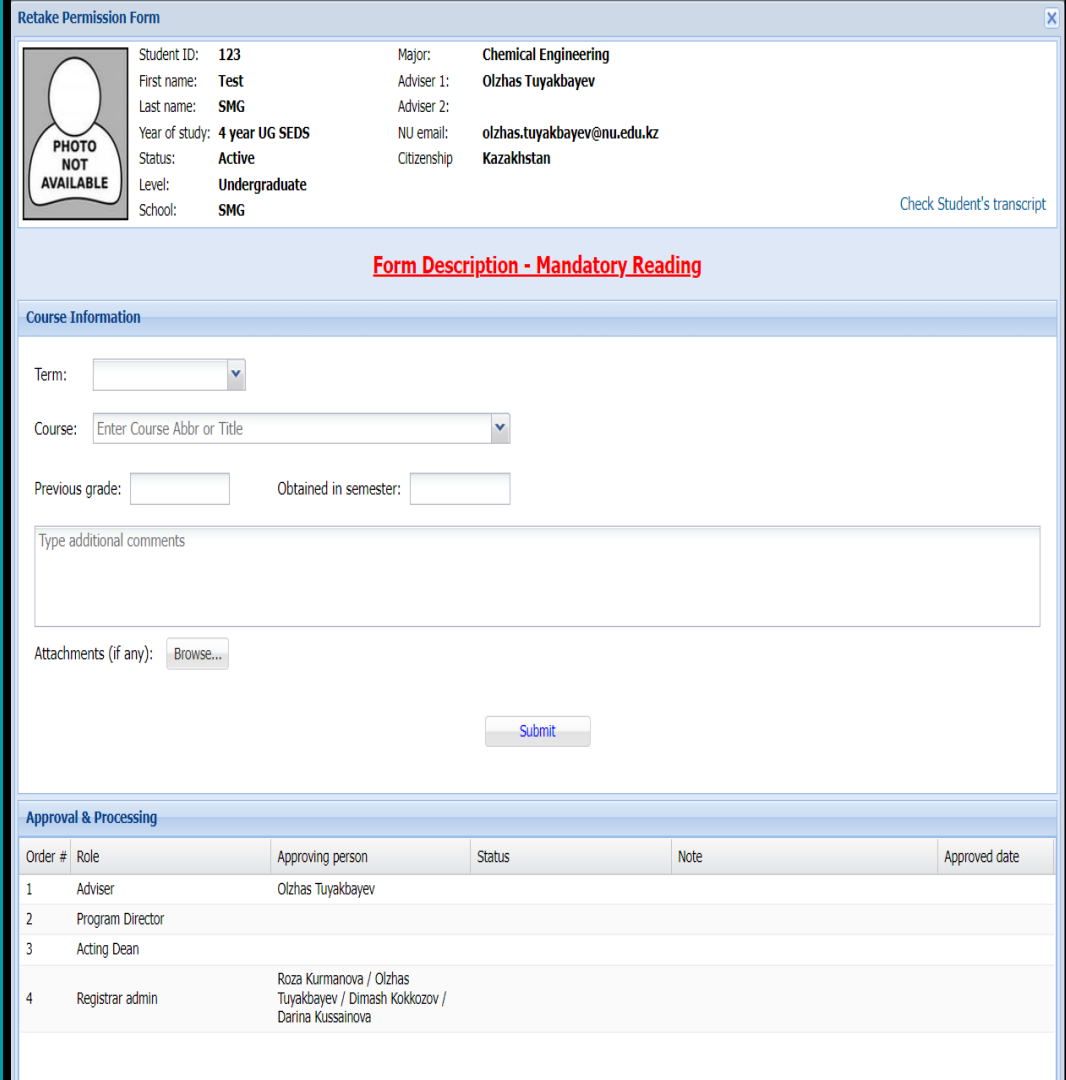


Оцифрованные формы



RETAKE PERMISSION FORM

В данном слайде приведен пример оцифрованной формы



Спасибо за внимание

Вопросы/Ответы

“The man who asks a question is a fool for a minute, the man who does not ask is a fool for life.”

Конфуций