Programme Modifications Proposal Form

This form should be completed for all types of programme modifications. Please NOTE:

* **ALL** modifications must be discussed and approved in the first instance by the appropriate programme management committee (or equivalent body).
* Changes can only be made to future runs of programmes/modules. This process cannot be used for a retrospective change.
* **Initially only Section A should be completed.**  **This must be accompanied by a Programme Modifications Log which should be kept for each programme.** The documentation will be considered by a Faculty Programme Modifications Panel (sub-Panel of Faculty Quality Committee). The Panel will determine the type of modification required and will advise on next steps.
* All modification requests should be submitted in a timely manner and to enable approval to take place by the Faculty Quality Committee at least 6 months prior to the commencement of the stage / level to which the modification applies (unless there are exceptional circumstances).

**SECTION A – PROPOSAL**

**A1 Date of Proposal**

|  |
| --- |
|  |

**A2 Programme Name AND Programme Code**

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**A3 Programmes (names and codes) which will be affected by the change (eg, Programmes which have this module specifically listed as a core or option module)[[1]](#footnote-1)** *Please indicate whether single honours and/or combined honours for GMS programmes*

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**A4 Module(s) for which modification is requested (where appropriate)[[2]](#footnote-2)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| *Module Title* | *Module Code* | *Credit rating* | *Level* | *Core or Option?* |
|  |  |  |  |  |

#### A5 Date from which the modification is to take effect

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#### A6 Cohort to which the modification will first apply

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**A7a Description of Proposed Change and Rationale**

(IF change involves a new module or a change to a module credits, level, or core/option please complete Box A7b as appropriate)

(IF change involves a revision to a module title please complete Box A7c as appropriate)

(IF change involves a revision to assessment please complete Box A7d as appropriate)

(IF change involves a revision to semester in which module is delivered please complete Box A7e as appropriate)

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**A7b Identification of New Module or Change to Existing Module (Value, Level or Compulsory/Option) (Where appropriate)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| *Module Title for New/Revised Module* | *Module Code* | *Credit rating* | *Level* | *Compulsory or Option?* |
|  |  |  |  |  |

**A7c Identification of Revised Module Title(s) (where appropriate)**

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| --- |
| *Revised Module Title* |
|  |

**A7d Identification of Change to Module Assessment(s) (where appropriate)**

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|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Current | | | | New | | | |
| *Mode of Assessment (incl. word count / duration)* | *Weighting* | *Activity Type* | *Activity Descriptor (optional)* | *Mode of Assessment (incl. word count / duration)* | *Weighting* | *Activity Type* | *Activity Descriptor (optional)* |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

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**A7e Identification of Change to Module Semester Delivery (where appropriate)**

*(Please specify exempt, semester 1, semester 2, runs across year or offered twice)*

|  |  |
| --- | --- |
| *Previously Validated Semester of Delivery* | *New Semester of Delivery* |
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#### A8a What will the effect of the change be on the overall programme *(Please specify for both single honours and combined honours programme where relevant)*

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#### A8b How will the modification impact on the delivery of the programme aims and/or level stage intended learning outcomes?

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#### A9 Student Consultation

#### (Please outline how students will be consulted on the proposed modification including communication strategy post-approval of the modification)

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#### A10a Resource Implications (eg, administration, computing, equipment, library, link tutoring, rooming, staffing, teaching hours, travel, etc.)

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#### A10b Resource Implications

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| I confirm that these resource implications have been discussed with the relevant parties including the Head of School/Centre and they can be met within the existing School/Centre budget.  **OR**  These resources cannot be met within the existing School/Centre budget and I have a detailed programme planning form will be submitted for consideration by the Faculty Programme Planning Executive (or equivalent). |

#### A11 Programme Approval for Section A to be considered by the Faculty Programme Modifications Panel (electronic signature acceptable)

Programme Director (or equivalent) Date

|  |  |
| --- | --- |
|  |  |

Head of School/Centre Date

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By signing this form the Head of School/Centre confirms that they approve the rationale for the proposed modification and that any resource and/or organisational implications can be met or will be requested through Faculty Programme Planning Executive (FPPE).

**FOR COMPLETION BY CHAIR OF FACULTY PROGRAMME MODIFICATIONS PANEL**

#### A12 Faculty Programme Modifications Panel (FPMP) consideration

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#### Category of Modification

|  |  |
| --- | --- |
|  | Major modification |
|  | Programme Modification Review Exercise required |
|  | Minor modification |

#### Additional comments

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Faculty Director of Quality (Chair of FPMP) Date

|  |  |
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**SECTION B – CONSULTATION EVIDENCE**

**ONLY TO BE COMPLETED ONCE THE FACULTY PROGRAMME MODIFICATIONS PANEL CONFIRMS THAT THE PROPOSAL CAN PROCEED FOR CONSIDERATION AS A MINOR MODIFICATION AND HAS APPROVED THE STUDENT CONSULTATION ARRANGEMENTS**

Completion of Section B may require updates to be made to Section A with respect to the specific proposal in response to feedback received. Only revisions to proposed modifications initially presented to the FPMP can be made at this stage and new proposed modifications cannot be added at this stage.

#### B1a Evidence of Student Consultation

The following documentation is attached:

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| --- | --- |
|  | Evidence that student consultation has taken place |

#### B1b Summary of Student Consultation and Actions Taken in Response to Student Feedback

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| --- |
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#### B2a Evidence of External Examiner Consultation

The following documentation is attached:

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| --- | --- |
|  | I confirm that the External Examiner has been consulted regarding this change and has confirmed that the change is appropriate and does not affect the achievement of the programme or level/stage learning outcomes (please provide the Appendix completed by the External Examiner). |

#### B2b Summary of Actions Taken in Response to External Examiner Feedback

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#### B3a For GMS programmes only: Evidence of consultation with the GMS Director where the proposed modification relates to a change in the timetabling band only

The following documentation is attached:

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| --- | --- |
|  | For GMS programmes only where the modification relates to a change in the timetabling band: Evidence that the Director of the General Modular Scheme has been consulted |

#### B3b Summary of Actions Taken in Response to feedback from the GMS Director

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#### B4a Where additional resources required only: Evidence of approval of additional resources

The following documentation is attached:

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| --- | --- |
|  | Where additional resources required only: The Detailed Programme Planning Form and an extract of minutes confirming approval by the Faculty Programme Planning Executive (FPPE) or equivalent body |

#### B4b Summary of Actions Taken in Response to consideration of the Detailed Programme Planning Form by FPPE or equivalent body

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#### B5a Updated Programme Specification

The following documentation is attached:

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| --- | --- |
|  | A Word version of the updated Programme Specification (obtained from QSO) with all modifications clearly marked using track changes so that they are immediately apparent to the reader.  The Programme Modification Log should be completed and inserted as the final page of the Programme Specification. |

**FOR COMPLETION BY CHAIR OF FACULTY QUALITY COMMITTEE**

#### B6 Faculty Quality Committee approval

#### Chair of the Panel (electronic signature acceptable) Date

|  |  |
| --- | --- |
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#### Minor Modification Outcome

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| --- | --- |
|  | Approved |
|  | Reject |

#### B7 Follow Up

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| This proposal should be sent electronically by the Faculty Director of Quality to the following:  Data (data.management@canterbury.ac.uk) Planning (planningoffice@canterbury.ac.uk)  QSO (suzanne.collins@canterbury.ac.uk) Marketing (marcomms@canterbury.ac.uk)  Your Faculty Registry Office (see below)  Education - education.registry@canterbury.ac.uk  Health and Wellbeing - health.registry@canterbury.ac.uk  Arts and Humanities / Social and Applied Sciences – abs.registry@canterbury.ac.uk  Professional, Statutory of Regulatory Body (PSRB) (where relevant) |

Appendix 1 - External Examiner’s Endorsement of a Proposed Minor Modification

**Please note that this appendix should be completed by the External Examiner rather than by the Programme Director.**

|  |  |
| --- | --- |
| Programme Title: |  |
| Titles of any modules affected: |  |

|  |  |
| --- | --- |
| I confirm that there is an appropriate rationale for the proposed change | **Yes / No** |
| I confirm that the proposed change will not prevent the programme of study fully supporting the award title, or the titles of any exit award | **Yes / No** |
| I confirm that the proposed change will not prevent the programme of study meeting its stated aims | **Yes / No** |
| I confirm that the proposed change does not alter the existing programme or level/stage learning outcomes | **Yes / No** |
| I confirm that the proposed change will not detrimentally affect students’ ability to meet the stated programme or level/stage learning outcomes | **Yes / No** |
| Where a new module is presented for approval:  I confirm that the learning outcomes for a module are of an appropriate standard  I confirm that the indicative resources for the module are appropriate and current  I confirm that the indicative teaching, learning and assessment methods are appropriate | **Yes / No**  **Yes / No**  **Yes / No** |
| I support this modification to the programme. | **Yes / No** |
| Any additional comments? |  |

|  |  |
| --- | --- |
| Name of External Examiner: |  |
| Date: |  |

1. If you have any questions about this, please contact Data Management ([data.management@canterbury.ac.uk](mailto:data.management@canterbury.ac.uk)) to confirm which programmes would be impacted. [↑](#footnote-ref-1)
2. For related changes to multiple modules you can still use one form. Simply insert rows to list all the modules and attach a separate document outlining the changes. [↑](#footnote-ref-2)