**Exception Request Form to amend the delivery pattern to a module(s)**

This form should be used to apply for exceptional arrangements to deliver modules outside of the agreed semester/trimester of the [main academic calendars approved](https://cccu.canterbury.ac.uk/registry-services/academic-calendars/staff-calendars/know-your-calendars.aspx) by the Academic Board.

This form should only be completed once the [Academic Principles Document](https://cccu.canterbury.ac.uk/registry-services/docs/academic-calendars/Academic-Calendar-Principles-23-24.pdf) has been read.

This form should be completed by the Course Director (or equivalent) in consultation with:

* Head of School
* Senior member of Learning & Teaching (comments required prior to submission)
* Registry

One form can be completed to cover multiple modules with the same rationale within the same School/Faculty, but all associated Course Directors and Heads of School must sign the form.

The completed form should be submitted to your Faculty Director of Quality. Subject to support by the Faculty Portfolio Planning Executive, requests will be considered by the Academic Strategy Committee.

Key issues to note in applying for exceptional arrangements:

* Exceptional arrangements will only be granted where there is a significant academic or Professional, Statutory, Regulatory Body (PSRB) requirement
* Exceptional arrangements will be granted within the timeframes agreed, either until the curriculum can be adapted to operate in line with a calendar, or the next periodic course review, whichever is sooner
* Exceptional arrangements may be sought for all or some elements of the changes. A rationale will need to be provided for each element for which exceptional arrangements are being sought.

**SECTION ONE – COURSE DETAILS**

|  |  |
| --- | --- |
| **Course Award and Title** |  |
| **Route title if applicable** |  |
| **Course/Route Code** |  |
| **Faculty** |  |
| **School / Centre** |  |
| **Collaborative Partner (where relevant)** |  |
| **Course Director (or equivalent)** |  |
| **Other Courses (award/title and codes) which will be affected by the change** |  |
| **Mode of Attendance (please delete those not relevant)** | **Full time / Part time / Distance learning / Blended learning** |
| **UG Courses**  **Please tick to indicate the box(es) relevant to this course** | |  |  | | --- | --- | | **Single honours** |  | | **Single and combined honours** |  | | **Combined honours** |  | | **Apprenticeship** |  | | **Foundation Degree** |  | | **Accelerated Degree** |  | |
| **PG Courses**  **Please tick to indicate the box relevant to this course** | |  |  | | --- | --- | | **Postgraduate Taught** |  | | **Postgraduate Research** |  | |

**SECTION TWO – MODULE DELIVERY EXCEPTION REQUESTS**

Please indicate in this section the elements of the module delivery changes for which exceptional arrangements are being sought. Formodule delivery in a semester / trimester-length pattern with an equal number of credits taken in each semester / trimester:

|  |  |
| --- | --- |
| **Module Title** |  |
| **Module Code** |  |

For courses with professionally regulated placements to meet professional requirements only:

|  |  |
| --- | --- |
| **Category** | **Exception requested:** |
| **Delivery of non-placement modules as semester / trimester length** | **Yes / No** |
| **Equal number of credits taken in each semester / trimester** | **Yes / No** |
| **Delivery of module(s) to commence in the first week of a semester / trimester** | **Yes / No** |

Please also indicate the period for which the exceptional arrangements are sought (please delete as appropriate):

|  |  |  |
| --- | --- | --- |
| **State the academic year from when the calendar exception will start** | **Period for which the calendar exception will apply (select one)** | |
|  | This academic year only | Until the next periodic review (State year) |

**SECTION THREE – RATIONALE AND PROPOSAL**

Please provide a rationale for the exception request(s) and a proposal in terms of how you propose to structure the academic year. Where relevant please attach any documentation in support of your exception request.

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Please outline any alternative proposal(s) that were explored and the rationale for rejecting the alternative proposal(s).

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**INDICATIVE ACADEMIC CALENDAR**

Please also provide an indicative academic calendar for your course. This needs to include the same information as the [approved academic calendars](https://cccu.canterbury.ac.uk/registry-services/academic-calendars/staff-calendars/know-your-calendars.aspx), for comparison:

**SECTION FOUR – CONSIDERATION BY LEARNING AND TEACHING ENHANCEMENT**

Prior to submission, please discuss with a senior member of the Learning and Teaching Enhancement Team (via LTE- ADMIN@canterbury.ac.uk) who should complete this section of the form.

|  |  |  |  |
| --- | --- | --- | --- |
| Comments (*For completion by LTE, please provide a brief summary of the discussions held regarding the proposal and give an indication of whether from a Learning and Teaching perspective the proposal is supported):* | | | |
| LTE signature:  LTE name: |  | Date: |  |

**SECTION FIVE – FACULTY APPROVAL**

By signing below all parties are confirming that the details given on this form are correct, a clear rationale is presented for the elements for which exceptional arrangements are sought and the proposal has been discussed with a senior member of Learning and Teaching Enhancement.

|  |  |  |  |
| --- | --- | --- | --- |
| **Course Directors for all courses (add additional boxes if required)** | | | |
| **Course Director signature:** |  | **Date:** |  |
| **Head of School for all courses (add additional boxes if required):** | | | |
| **Head of School signature:** |  | **Date:** |  |
| **Faculty Registrar signature:** |  | **Date:** |  |

|  |  |
| --- | --- |
| **Date considered by the FPPE**  Please state if this was via Chair’s Action |  |

Please contact [quality@canterbury.ac.uk](mailto:quality@canterbury.ac.uk) with any queries.