

**COURSE MODIFICATION PROPOSAL**

This form should be completed for **all changes** to UEA validated courses or modules **except the following non-notifiable modifications:**

* minor changes to indicative content that do not affect the learning outcomes;
* updates to reading lists and references in order to maintain relevance;
* minor changes to the ratio of contact time attributed to previously stated methods of teaching and learning, assuming no overall change to the total number of contact hours.

**All other changes should not be implemented without approval from the UEA Academic Director of Partnerships via completion of this form.**

*Please ensure that a copy of the relevant course documentation (programme specification and/or module outline) is included with the form, with all modifications highlighted as tracked changes.*

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|  | **Partner Institution** |  |
|  | **Full course name and award**   |  |
|  | **Module Title**(if proposal involves change to module name please state current module title) |  |
|  | **Proposed effective date of modification** |  |
|  | **Key contact (e.g. Course Director or Module Leader completing form)** |  |
|  | **Does the change require regulatory/ professional body approval/notification** |  |

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|  | **Details of proposed change**  |
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|  | **Rationale for proposed change**  |
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|  | **Are there any delivery or resource implications?** *Delete as applicable.**If ‘YES’ please provide details below.* | **YES/NO** |
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|  | **Date of last validation/revalidation event** |  |

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|  | **Changes since last validation/revalidation***Please list all notifiable changes to the course approved since last validation/revalidation event***.** *An extensive degree of change since the previous validation/revalidation event could result in a revalidation event sooner than the usual five yearly interval****.*** |
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|  | **Feedback from Academic Link***If an Academic Link is appointed to this course please include their comments here.* |
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|  | **Details of student consultation** *Consultation with existing students is required when the proposed changes may impact on their experience.**If the change will not impact current students please confirm this in this section.* |
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|  | **Details of consultation with course offer holders** *Any applicants who have been offered a place on the course must be advised of any changes approved since the offer was made.**Please confirm* *offer holders have been notified or that there are no current offer holders.* |
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|  | **Supporting statement from External Examiner***The External Examiner should either sign the form or provide an email statement that can be included with this form.* |
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| **Signed:** | **Date:** |

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|  | **Please tick to confirm supporting course documentation has been included with this form***Attached programme specification or module outline should include all modifications as tracked changes.* |  |

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|  | **Confirmation of support from Partner Institution Head of HE (or equivalent)***Head of HE (or equivalent) to add any comments* *and sign to confirm support for proposal* |
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| **Signed:** | **Date:** |

***FOR COMPLETION BY UEA***

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|  | **Approval by UEA Academic Director of Partnerships** *Delete as applicable.*  | **YES/NO** |
| **Signed:** | **Date:** |
| **Comments***Please add reason for rejection if not approved.* |

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|  | **Course Modification Number** *to be added by Partnerships Office following approval.**Number format should follow template of:**Academic year of implementation/Partner Initials/sequential number e.g.**17-18/CCN/001**17-18/EO/002* |  |