

**CPR QS01\_06 Programme Modification Form**

**Version 24\_01**

**Part 1. General Details**

Programme Code (College):	Programme Code (University Partner):
Programme Title:	Programme Leader:
Semester for Change to Take Place:	Standard / Integrated (amend as appropriate):

**Part 2A: About the Changes**

Modification <input type="checkbox"/>	Suspend <input type="checkbox"/>	Withdraw <input type="checkbox"/>	New <input type="checkbox"/>
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**Part 2B: What is Changing? (skip if new Integrated programme is being requested)**

Module Configuration <input type="checkbox"/>	Assessment Strategy <input type="checkbox"/>	External Examiner <input type="checkbox"/>	Link Tutor <input type="checkbox"/>
Programme Learning Outcomes <input type="checkbox"/>	Programme Aims <input type="checkbox"/>	Programme Leader <input type="checkbox"/>	Local Code <input type="checkbox"/>

**Part 2C: Description of Changes and any Additional Information**

**Part 2D: PSRB and Number Cap Considerations**

**Part 3: Confirmation (amend roles as appropriate)**

The module description document has been sent to the following:

Subject External Examiner (if applicable)

Programme Leader

Academic Services Officer

Head of Education (NVT)

University Faculty/School

Please list any documents attached to this form, including Programme Specification, Module Descriptors and Course Structures (as appropriate)

- *Document A*
- *Document B*
- *Document C*

Please sign and confirm that the College can resource and deliver this programme, and appropriate consultation with stakeholders (incl. other users of this unit) has taken place:

Name:

Role:

Sign:

Date/name:

### OFFICE USE ONLY (Completion by Faculty and Academic Registry)

Key stakeholders sign/date confirming the changes are appropriate and the attached documentation is approved.

Link Tutor (A) Sign:

Date/name:

College/Campus Principal/Director:

Date/name:

Head of Education, UPE:

Date/name:

### Review

This form was last reviewed June 2024 and approved on behalf of the UPE Academic Board.