|  |  |
| --- | --- |
| Professional Doctorates New course approvalsCategory 1 & 2 courses |  |
|  |
| **Final stage form** |

Please fill out all relevant boxes in each of the sections. If you have any questions please email pgresearch@essex.ac.uk

|  |  |
| --- | --- |
| Section | Information gathered |
| **SECTION A: Course details and Consultation** | An outline of the course and consultation undertaken |
| **SECTION B: Academic design** | Course outcomes and course structure  |
| **SECTION C: External consultation** | Consultation with the external academic expert and industry representative  |
| **SECTION D: Additional documentation** | Additional documentation that is required for approval. |
| **SECTION E: Approval** | Approval status of the course. |

**Consultation**

Where a box indicates that you need to consult with another team or attach supporting documentation, please ensure you do this prior to submission of the form to the PGRE Team. This will help to build feedback into course design from an early stage, and avoid possible subsequent delays to the course approval process where feedback is sought later.

### External and student consultation required

|  |  |  |
| --- | --- | --- |
| Input | Category 1 courses | Category 2 courses |
| **External academic input** | Current or recent external examiner required | External academic required(meeting the same criteria for External Examiner nominations)  |
| **Professional input** | Consultation with employer and industry contacts advisable | Consultation with employer and industry contacts required |
| **Student input** | Student consultation is required | Student input should be sought wherever possible |

**Approval process**

The department putting forward the proposal is responsible for ensuring that the submission addresses all relevant issues. **All proposals must be authorised by every Head of Department contributing to the course prior to submission of the form to the PGRE Team**

**Submission**

To return this completed form, or if you have any questions, please email pgresearch@essex.ac.uk

# SECTION A

# Course Details and Consultation

|  |  |
| --- | --- |
| **Full title of Course** |  |
| **Are any exit awards being requested at the same time***(Eg. MPhil and/or Masters by Dissertation)* |  |
| **Modes of study**(*Full time, Part time, Top up)* |  |
| **Proposed date of introduction** |  |
| **Admissions Requirements** |  |
| **Faculty / Partner Institution** |  |
| **Administering Department/School/Centre** |  |

|  |
| --- |
| **What consultation has been undertaken?** *Please include any industry, professional or student consultation and how this has been accounted for**Please provide details of the external academic consultation in Section C.* |
|  |

# SECTION B

# Academic design

*Please note that the information contained within this section will form the programme specification for the course, and will be available for students to view.*

|  |
| --- |
| **Course Aims:***Course aims are intended to provide a clear understanding of the course’s intentions. These should be brief statements of what the course intends to deliver.* |
|  |

|  |
| --- |
| **Course Outcomes:***Please add rows as necessary.**For each section, indicate how teaching, learning and assessment enable outcomes to be achieved and demonstrated.* |
| **A. Knowledge and Understanding** |
| Learning outcomes |
| A1 |  |
| A2 |  |
| A3 |  |
| A4 |  |
| A5 |  |
| Learning methods |
| *Please highlight how learning and teaching methods will be inclusive for all students.* |
| Assessment methods |
| *Please highlight how assessment methods will be inclusive for all students.* |
| **B. Intellectual/cognitive skills** |
| Learning outcomes |
| B1 |  |
| B2 |  |
| B3 |  |
| B4 |  |
| Learning methods |
| *Please highlight how learning and teaching methods will be inclusive for all students.* |
| Assessment methods |
| *Please highlight how assessment methods will be inclusive for all students.* |
| **C. Practical and professional skills** |
| Learning outcomes |
| C1 |  |
| C2 |  |
| C3 |  |
| C4 |  |
| Learning methods |
| *Please highlight how learning and teaching methods will be inclusive for all students.* |
| Assessment methods |
| *Please highlight how assessment methods will be inclusive for all students.* |
| **D. Key Skills** |
| Learning outcomes |
| D1 | Communication |  |
| D2 | Information Technology |  |
| D3 | Numeracy |  |
| D4 | Problem solving |  |
| D5 | Working with others |  |
| D6  | Improving own learning and performance |  |
| Learning methods |
| *Please highlight how learning and teaching methods will be inclusive for all students.* |
| Assessment methods |
| *Please highlight how assessment methods will be inclusive for all students.* |

**Course Structure**

*Please add more years as necessary*

|  |
| --- |
| **Year 1** |
| **Module Code**  | **Module Title** | **FHEQ Level** | **Credits** | **Status****(core/comp/opt)** | **New Module** |
|  |  |  |  | Choose an item. | [ ]  |
|  |  |  |  | Choose an item. | [ ]  |
|  |  |  |  | Choose an item. | [ ]  |
|  |  |  |  | Choose an item. | [ ]  |

|  |
| --- |
| **Year 2** |
| **Module Code**  | **Module Title** | **FHEQ Level** | **Credits** | **Status****(core/comp/opt)** | **New Module** |
|  |  |  |  | Choose an item. | [ ]  |
|  |  |  |  | Choose an item. | [ ]  |
|  |  |  |  | Choose an item. | [ ]  |
|  |  |  |  | Choose an item. | [ ]  |

|  |
| --- |
| **Final Year** |
| **Module Code**  | **Module Title** | **FHEQ Level** | **Credits** | **Status****(core/comp/opt)** | **New Module** |
|  |  |  |  | Choose an item. | [ ]  |
|  |  |  |  | Choose an item. | [ ]  |
|  |  |  |  | Choose an item. | [ ]  |

# SECTION C: External Consultation

**External Academic**

|  |  |
| --- | --- |
| **Name** |  |
| **Current Role** |  |
| **Faculty / Discipline** |  |
| **Institution** |  |
| **Date of Report** |  |

|  |
| --- |
| **Please comment on the curriculum for the award and its currency** |
|  |
| **How does the course compare with similar awards at other UK Higher Education Institutions and national reference points?**  |
| **Does the course correspond to the stated level of the Framework for Higher Education Qualifications?** | [ ]  Yes [ ]  No |
| **If applicable, does the course meet professional, statutory or regulatory body requirements?** | [ ]  Yes [ ]  No [ ]  N/A |
| **Additional comments:** |
|  |
| **Are the learning, teaching and assessment strategies appropriate for the award?** |
|  |
| **Did you identify any examples of practice or potential problems? If yes, please give examples** |
|  |

**External Industry Representative**

|  |  |
| --- | --- |
| **Name** |  |
| **Current Role** |  |
| **Employer** |  |
| **Date of Report** |  |
| **Do you have any comments on the value of the placements provided in the curriculum, the appropriateness of the assessment of those placements, or the standards applied?** |
|  |
| **Please comment on the relevance of the curriculum for the professional area/industry/discipline** |
|  |
| **Will completion of this course enhance career prospects and develop someone to have the potential to be a leader in this sector?** |
|  |
| **Do you have any other comments?** |
|  |

|  |
| --- |
| **Departmental response to the above external reports:** |
| *Please provide a brief response to the external academic report and any issues raised:* |

# SECTION D: Additional information

**Documents attached:**

|  |
| --- |
| **New/Amended Module Documentation** |
| **Module Code** | **Module Outline attached** |
|  | [ ]  |
|  | [ ]  |
|  | [ ]  |

|  |
| --- |
| **Course-Level Documentation** |
| **Module Map** | [ ]  |
| **Work-based/placement learning form** | [ ]  |
| **Other** *Please specify* | [ ]  |

# SECTION E: Approval

**Department Support**

|  |
| --- |
| **Proposal supported by the Head of Administering Department** |
| **Department** |  |
| **Signed** |  | **Date** |  |
| **Proposal supported by the Head of other department(s) contributing to the course** |
| **Department** |  |
| **Signed** |  | **Date** |  |

**PGRE Comments**

|  |
| --- |
| **Any additional consultation/approval(s) required?**  |
| **Partnerships**[ ]  Yes [ ]  No | **Faculty Manager**[ ]  Yes [ ]  No | **International Services Team**[ ]  Yes [ ]  No | **QUAD**[ ]  Yes [ ]  No |
| **Course Records**[ ]  Yes [ ]  No | **RoA Variations**[ ]  Yes [ ]  No | **Fees Group**[ ]  Yes [ ]  No | **Marketing Team**[ ]  Yes [ ]  No |
| **Comments**  |
|  |
| **Signed** |  | **Date** |  |

**Faculty Support**

|  |
| --- |
| **Proposal support: Deputy Dean (PGRE)** |
| **Comments** |  |
| **Signed** |  | **Date** |  |

**Final Approval (Category 1 only)**

|  |
| --- |
| **Executive Dean Approval** |
| **Final Stage approval give**[ ]  | [ ]  Yes (no conditions[ ]  | [ ]  Yes (with conditions)*Please specify conditions below* | [ ]  No |
| **Comments** |  |
| **Deadline for response to conditions and recommendations** | dd/mm/yy |
| **Signed** |  | **Date** |  |

Once complete, please return form to pgresearch@essex.ac.uk