**Proposed Variation to the *[Undergraduate/Postgraduate*] Rules of Assessment**

**Department:**

**Courses Affected:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Course title** | **Course code** | **Delivery of course (eg full/part-time)** | **Is this a new or existing course?** |
|  |  |  |  |
|  |  |  |  |
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|  |  |  |  |

**Modules affected:**

*Please complete this section where the variation applies to specified modules.*

|  |  |
| --- | --- |
| **Module code** | **Details of how the assessment is affected** |
|  |  |
|  |  |
|  |  |

**Date of Introduction of the change, and which cohorts will be affected:**

Academic Year: 2020/21

*[Please explain which cohorts will be affected. For example, if you are proposing a change to stage 2 of a 3-year UG course, make it clear whether you are requesting that the change is applied to students entering stage 2 in 2020/21 or to students entering stage 1 in 2020/2021 (who will not be in stage 2 until 2021/22).]*

**Context and Rationale**

*[Please explain why the change is being requested. Ensure that it meets the criteria set out by Senate at* <http://www.essex.ac.uk/quality/university_policies/Statement_variation.asp>*]*

**Professional, Statutory and Regulatory Body (PSRB) Variations**

Are these variations needed to meet PSRB requirements? (Yes/No)

*[If the variations requested are in order to meet PSRB requirements, please provide a link to the relevant documentation on the PSRB website or provide a text extract from their documentation and an indication of where the extract can be checked.]*

**Details of the proposed wording for the new variation or changes to a variation**

*[Give precise details of the wording of the change being proposed. Where the change is to an existing variation, please include a copy of the existing text with deletions crossed through and any new text underlined. Please contact the Assessment Team if you need a word version of current sets of rules or variations]*

**Name and title of member of staff submitting the proposal:**

*(normally this would be the Director of Education or Head of Department)*

**Date submitted:**

**Document review information**

|  |  |
| --- | --- |
| **Document owner** | Assessment Team |
| **Document author** | Assessment Team |
| **Document last reviewed by** | Assessment Team |
| **Date last reviewed** | November 2020 |
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