# University of Essex Partnerships Team Course Variation Form



*Please submit this form to the Dean / Deputy Dean of Partnerships via* [*partnerships@essex.ac.uk*](mailto:partnerships@essex.ac.uk)*, at least* ***three months*** *prior to the proposed implementation date.*

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| **Partner Institution:** | |
|  | |
| **Course Title(s)1** | |
|  | |
| **Mode of Study** | **Level of Qualification** |
| **FT / PT / Credit Accumulation** | **UG / PGT / PGR** |
| **Module Title(s)** | **Module Weighting(s)** |
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| **Supporting information attached:**  *Updated module outline(s), programme specification and module map should be attached to the form where appropriate, highlighting the proposed variation(s) via tracked changes.* | 1. Programme specification 2. Module outline(s) 2 3. Module map 4. Summary of variations3 |

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| **PART 1: SUMMARY OF THE VARIATION** |
| Changes to indicative module content - *attach (a) & (b) & (d)* |
| Changes to module title – *attach (b) & (d)* |
| Changes to module learning outcomes – *attach (a) & (b) & (c) & (d)* |
| Changes to module assessment methods or weighting – *attach (b) & (d)* |
| Production of new module(s) – *attach (a) & (b) & (c)* |
| Change in mix of core, compulsory and optional modules – *attach (a) & (b) & (d)* |
| Change in course title – *attach (a)* |
| Change in mode of study or introduction of new mode of study – attach *(a) & (b)* |

1 Please ensure all affected courses are listed, including sub-degree awards and named exit awards, and that this form includes the impact on each course.

2 Module outlines provide information needed to approve the module, including the module description, aims, learning outcomes, learning, teaching and assessment details, indicative module content and bibliography.

3 See Appendix A for a template for the summary of variations.

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| Changes to course structure, programme specification and module map – *attach (a) & (c)* |
| Introduction of named exit awards – *attach (a)* |
| Other |

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| **PART 2: RATIONALE FOR THE VARIATION** | |
| **Nature of the proposed variation:** | |
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| **Reason for the proposed variation:** | |
| *If there are PSRB considerations, please make explicit reference whether the course variation request has any effect on this.* | |
| **Proposed implementation date:** |  |
| **Does the proposed variation require a variation to the Rules of Assessment?** | |
| Yes / No  *Please note this is subject to approval by the Rules of Assessment Advisory Group and Senate. We strongly suggest you include your proposed wording and rationale for the variation to the Rules of Assessment with your course variation request.* | |
| **Does the proposed variation involve work-based learning?** | |
| Yes / No  *Where the placement element is core or compulsory, please explain what support will be in place for students to secure a placement.* | |

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| **PROGRAMME AIMS AND OUTCOMES** | |
| **Please confirm that the learning outcomes of the award will continue to be met?** | Yes / No |
| **Will the programme aims or learning outcomes change as a result of the variation?** | Yes / No  *If yes, please attach a revised programme specification and module map, highlighting the*  *proposed variation(s) via tracked changes.* |
| **Will the programme aims demonstrated by the module change as a result of the variation?** | Yes / No  *If yes, please attach a revised programme specification and module map, highlighting the*  *proposed variation(s) via tracked changes.* |

**ARRANGEMENTS FOR TRANSITION (for any students on old structures):**

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| **Please provide details on any delivery and resource implications and how these will**  **be addressed:** |
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| **Will this change affect any other courses delivered at the Partner Institution or the University of Essex?** *(please explain how this will be addressed)* |
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| **Has the External Examiner been consulted?** *(please attach comments)* |
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| **For major modifications4, or those which will impact on current students, how were students consulted?** *(please attach comments)* |
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| **Will the proposed variation present any particular difficulties for students with disabilities?** *(if yes please provide details)* |
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| **Proposed variation supported by the relevant Head of Department / Head of HE at the partner institution:** |
| **Signed:** |
| **Date:** |

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| **Approved by the Dean / Deputy Dean of Partnerships, University of Essex** |
| **Signed:** |
| **Date:** |
| **Comments:** |

4 Please contact the Partnerships Team for guidance on major modifications.

# Appendix A: Summary of variations since last validation or periodic review

**Course Title(s)**

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| **Date approved** | **Summary of the variation(s) to the programme / module (s)** | **Modules affected** |
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**Document review information**

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| **Document owner** | Partnerships Team |
| **Document author** | Rachel Frost, Senior Partnerships Manager |
| **Document last reviewed by** | Clare Alexander, Partnerships Manager |
| **Date last reviewed On** | January 2024 |
| **Review frequency** | Annually |