**School Curriculum Change Form – Course**

*All course change proposals are submitted to the Boards of Study and School Education Committees in October in order to meet timetabling and Prospectus/CMA deadlines.*

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| **Indicate your change request by checking the appropriate box below:** |
| **Major changes to a course or pathway**: Change to the structure of a course; change to the structure of a pathway; change to course title; change to pathway title; course learning outcomes; changes to mode of study (full-time/part-time/distance learning)**(If a School wishes to change a course so substantially that all stages of the course are affected, then the School should submit the revised course to Portfolio Approval Committee as if it were a new course, starting from Stage 1 of the process. This applies even where the title of the award is itself unchanged)** | [ ]  |
| **Change to Course Learning Outcomes:** Complete section 1, 2 and 5Course learning outcomes must be written at the level of the award. Please see the [Learning Outcome Generator](http://www.sussex.ac.uk/adqe/curriculum/learning-outcome-generator) on the ADQE webpage. | [ ]  |
| **Change to Structure of the Course:** Complete section 1, 2, 3 and 5 | [ ]  |

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| **Change to Course Title**Such requests must be submitted to Portfolio Approval Committee for consideration and cannot be approved by School Education Committee. The form can be found at <http://www.sussex.ac.uk/adqe/curriculum/newcourseapproval> |
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| **SECTION 1: COURSE INFORMATION** |
| **Course or Pathway Title and Award (eg BA)** |  |
| **School and Department** |  |
| **Course Code** |  |
| **Effective date of change** |  |
| **Course or Pathway Convenor / Director** |  |

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| **SECTION 2: COURSE LEARNING OUTCOMES** |
| **LO1** |  |
| **LO2** |  |
| **LO3** |  |
| **LO4** |  |
| **LO5** |  |
| **LO6** |  |
| **LO7** |  |
| **LO8** |  |
| **LO9** |  |
| **LO10** |  |
| **Please append an updated Course Learning Outcome map to this form. (This can be run in Cognos10. The report is called Learning Outcome Mapping with Learning Outcome Text. Export to Excel 2007 format and amend accordingly.) If you are unable to access this report, please ask your CAO to run it.** |

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| **SECTION 3: CHANGE TO COURSE STRUCTURE** |
| Please give details of the stage of study as it is currently approved;

|  |  |
| --- | --- |
| Semester 1 | Semester 2 |
| Module title | Credits | Core/Option | FHEQ level | Module title | Credits | Core/Option | FHEQ level |
|  |  |  |  |  |  |  |  |
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|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

Please give details of the stage of study as it will be with the changes incorporated;

|  |  |
| --- | --- |
| Semester 1 | Semester 2 |
| Module title | Credits | Core/Option | FHEQ level | Module title | Credits | Core/Option | FHEQ level |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
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If you are making changes to more than one stage of study for an undergraduate course, please copy the tables above and paste them below.  |
| **Do these changes result in a module being withdrawn?**

|  |  |
| --- | --- |
| Yes | No |
| [ ]  | [ ]  |

If yes, please ensure a withdrawal is completed and submitted**Do these changes need a new module?**

|  |  |
| --- | --- |
| Yes | No |
| [ ]  | [ ]  |

If yes, please ensure a new module proposal is completed and submitted |

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| **SECTION 4; CHANGE TO MODE OF STUDY** |
| Please indicate all the current modes of study for this course

|  |  |  |
| --- | --- | --- |
| Full Time | Part Time | Online Distance Learning |
| [ ]  | [ ]  | [ ]  |

Please indicate if you wish to add a mode of study

|  |  |  |
| --- | --- | --- |
| Full Time | Part Time | Online Distance Learning |
| [ ]  | [ ]  | [ ]  |

Please indicate if you wish to remove a mode of study

|  |  |  |
| --- | --- | --- |
| Full Time | Part Time | Online Distance Learning |
| [ ]  | [ ]  | [ ]  |

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| **SECTION 5: RATIONALE** |
| **Please give a rationale for the change:** |

**School Curriculum Change Form – Sign-Off Sheet**

Course Convenor

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| By signing I confirm that I have consulted the School Director of Recruitment and Admissions (DORA) to discuss the impact of this change on any articulation and progression agreements which might be in place for this course. |
|  |
| **Completed by:** | **Date:** |
| **Signature:** |

Chair of the Board of Study

I confirm I have read the above form and my comments are as below:

|  |  |
| --- | --- |
| Name (Chair of BoS) | Board of Study responsible for the course |
|  |  |
| Comments: (if no comments, please enter No Comments) |
|  |
| Signed: | Date: |

Director of Teaching and Learning

|  |  |
| --- | --- |
| **Approved by:** | **Date:** |
| **Director of Teaching and Learning (as Chair of School Education Committee)** | **Signature:** |