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|  | UHI PROGRAMME APPROVAL (SQA)Academic Partner Programme Approval Report | AP4 |
| Approval Event Information |
| **Co-ordinating approval partner:** |  |
| **Programme title / level:** |  |
| **Programme code:** |  | **Awarding body:** |  |
| **Meeting venue:** |  | **Date of meeting:** |  |
| *An application to offer a group award that is new to UHI or that is already offered at other academic partners will be considered by an approval panel in terms of the approval criteria detailed within section 2. Issues that concern the structure of a national award and/or its units are normally associated with validation criteria and are not currently within the jurisdiction of an Approval panel.**As a result of an approval meeting, the panel may recommend that the programme is:*1. *Approved – the centre(s) are approved to offer the award*
2. *Approval withheld until conditions are met – the centre(s) will be approved to offer the award once certain requirements and/or recommendations have been fulfilled*
3. *Not approved – the centre(s) are not approved to offer the award.*

*Panel recommendations of ii) or iii) must be accompanied with a full explanation within the report. In cases where approval panels reach varied decisions after a ‘multi-site’ approval event, clear details relating to each Academic Partner must be provided.* |
| **Panel recommendation** (please tick)**:** |
|  | **AC** | **HTC** | **IC** | **WHC** | **LCC** | **MC** | **NAFC** | **NHC** | **OC** | **PC** | **SAMS** | **SC** | **SMO** |
| 1. Approved
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| 1. Approval withheld until conditions are met
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| 1. Not approved
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| 1. Conditional approval |
| 1.1 Actions agreed for lifting conditions: |
| 1.2 Date by when conditions are to be completed: |  |

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| **2. Conditions / recommendations** |
| *The report should be completed giving information under the following headings. Additional pages may be used as required.* |
| * 1. Conditions

 *List any requirements that must be met before the award is approved. Each condition should be cross-referenced to the relevant approval criterion.* |
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| * 1. Recommendations

*List any recommendations.* |
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| * 1. Not approved

 *List reasons for withholding approval. Reasons for withholding approval should be cross-referenced to the relevant criterion.*  |
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| **3. Programme specific feedback** |
| 3.1 Rationale |
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| 3.2 Aims of the award |
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| 3.3 Access to the award |
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| 3.4 Programme structure and content |
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| **4. Academic partner based feedback** |
| 4.1 Programme operation and management |
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| 4.2 Staffing and staff development |
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| 4.3 Learning and teaching |
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| 4.4 Assessment |
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| 4.5 Learning and reference material |
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| 4.6 Equipment and accommodation |
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| **5. Panel membership** |
| **Name** | **Position** | **Academic partner** |
|  |  |  |
| **Report drafted by:** |  |
| Chair of panel | Name: |  |
| **Signature:** |  | Date: |  |

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| **Completion of conditions and recommendations** |
| I have read the attached report and I can confirm that to the best of my knowledge the conditions and recommendations set by the panel have been met. |
| **Signed:** |   | **Date:** |   |
| **Name:** |   |
|  | (panel chair) |