**COVID-19 modification request**

This form should be used for any modifications responding to COVID-19 affecting programmes during the 2020-2021 academic session. Once implemented, this change will be reviewed as appropriate by the Development and Review Committee. Any non-COVID related changes should be on the standard CMF.

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| **Form completed by:** |  | **Date completed:** |  |
| **SECTION 1**  | **Curriculum to be Modified** |
| Module code(s) |  | Module title(s) |  |
| Programme code (s) |  | Programme name (s) |  |
| Faculty |  | **PMB/SEB/SAC** |  |
| **Other curricula affected by the change** (indicate other programmes/faculty/campus that utilise the curriculum)**: Ensure cross faculty consultation has taken place if module is shared with other faculties.** |
| **SECTION 2**  | **Details of the Modification/s** |
| **Overview of the amendment(s):** Please check all that apply |
| Assessment methods [ ]  | Assessment volume [ ]  | Assessment weightings [ ]  |
| Other [ ]  |  |  |
| In this section, please detail the change that you are proposing |

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| **Specification(s) (template) submitted highlighting the change(s)**\*Track-changed module/programme specification documents must be submitted with this form\*Ensure the current specification is downloaded from the tile on DMUHUb | **Y / N** |

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| **SECTION 3**  | **Supporting Documentation**  |
| **This section should be completed in full and will not be accepted at DARC until completed** |
| **PMB approval** | PMB Chair name:  | **Date** |  |
| **Evidence of consultation with others impacted by the modification** e.g. other programmes  |  | **Date** |  |
| **External Examiner comment with name of External Examiner** |  | **Date** |  |
| **Consultation or communication with affected students** |  | **Date** |  |
| **Accreditor/PSRB Agreement** |  | **Date** |  |
| **Have you considered the availability of learning resources for students requiring reassessment?** |  |
| **Please click box here to confirm that you have read and agree to adhere to the EDI statement of principle/expectations** |  [ ]  |
| **SECTION 4**  | **Approval**  |
| **Associate Professor (Quality) or Associate Dean (Academic) (name/signature)** |  |
| **OUTCOME** | **DETAILS** |
| **Approved** |  |
| **Approved** (subject to further action)\*\* |  |
| **Rejected** |  |
| **\*\*Final sign off by Associate Professor (Quality)/Associate Dean (Academic)**  |  |

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| **SECTION 5 Administrative processes (to be completed by Associate Professor (Quality)/Faculty Administrator, as per Faulty process)** | **Y / N** |
| **Associate Professor (Quality) (or designate) to inform Module Leader, PMB Chair, PMB Servicing Officer**  |  |
| **Associate Professor (Quality) (or designate) to inform Admissions (where applicants/offer holders/affected continuing students need to be written to)**  |  |
| **Associate Professor (Quality) (or designate) to complete COVID-19 modification spreadsheet held in the DARC Faculty Committee Folder**  |  |
| **Programme Administrator or designate to upload changes to SAP** |  |

* If Learning Outcomes are affected, a map showing Module Learning Outcomes to Programme Learning Outcomes must be provided