**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