### REVALIDATION: OUTLINE PLANNING PERMISSION

**SEC/2014/3/0669**

**THIS FORM IS SPECIFICALLY FOR USE FOR PROGRAMMES REQUIRING REVALIDATION.**

#### A. SUMMARY OF PROPOSAL

<table>
<thead>
<tr>
<th>College</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>School/Division</td>
<td></td>
</tr>
<tr>
<td>Lead Proposer</td>
<td></td>
</tr>
<tr>
<td>Collaborating Divisions/Schools/Faculties</td>
<td></td>
</tr>
<tr>
<td>Other External Collaborative Partners</td>
<td></td>
</tr>
<tr>
<td>Date First Validated</td>
<td>Date of Last Revalidation</td>
</tr>
<tr>
<td>Proposed Start Date</td>
<td>Next Revalidation Due</td>
</tr>
<tr>
<td>College Programme Code</td>
<td></td>
</tr>
</tbody>
</table>

#### A.1 PROPOSED AWARD(S) AND TITLE(S)

<table>
<thead>
<tr>
<th>Academic Award Type (e.g. FdA, FdSc, BA (Hons),)</th>
<th>Academic Award Title (Where an amendment to a title is proposed, please provide both the proposed and the old title)</th>
</tr>
</thead>
<tbody>
<tr>
<td>FHEQ Level</td>
<td>No. of credits</td>
</tr>
</tbody>
</table>

#### A.2 ACADEMIC REGULATIONS

The proposals align with the current Academic Regulations set out in the Undergraduate Assessment Regulations for Associate Colleges (SEC/2014/3/0669) (please tick to confirm statement ✓)

#### A.3 PROFESSIONAL QUALIFICATIONS

Please specify any professional qualifications associated with the programme (or change of programme).

<table>
<thead>
<tr>
<th>Professional Qualification</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Professional Body</td>
<td></td>
</tr>
</tbody>
</table>

#### A.4 PROPOSED LOCATION(S) AND MODES OF DELIVERY

What is the expected mode of delivery? (Face to face; in the employers workplace; block or day release; blended learning; online learning)

<table>
<thead>
<tr>
<th>Location(s)</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Mode of delivery</td>
<td></td>
</tr>
<tr>
<td>Provide additional information where necessary</td>
<td></td>
</tr>
</tbody>
</table>

#### A.5 RECRUITMENT TARGET

| Total Numbers (into first year of prog.) |  |
B. DETAILS OF PROPOSAL

RATIONALE FOR CONTINUING TO OFFER THE PROGRAMME

Provide a brief summary rationale for the proposed Revalidation of the programme, including the following topics:

- benefits for the College and alignment with College strategy
- anticipated market (with reference to students and employers) and evidence (market research/external consultation), to include marketing consultation / strategy
- highlight any significant changes you think may be required to the existing programme

2500 maximum

C. RESOURCES – please list current resources and identify any additional resources required.

C.1. School-based Staffing:
- Academic Staff (list staff against modules)
- Support/Administrative Staff
- Other Staffing

C.2. Library and Media Resources:
- Book and text-based information sources (including 3rd party resources and journal subscriptions)
- Electronic resources (e.g. databases, multimedia)

C.3. ICT Resources:
C.4 Other Equipment Required:
Any other equipment that might be required to assist the delivery of this programme

C.5 Space requirements:
Adequate space requirements for study/practical areas or refurbishment/expansion required

C.6 Other resources:
Specific requirements to support learning in the workplace

---

D. CONSULTATION
Please tick each box to confirm the following have been consulted:

- Lancaster University Programme Consultant *
- External Examiner *
- *E-mail confirmation must be attached to this form
- Student Representatives *
- *The report or meeting minutes must be attached to this form

---

E. AUTHORISATION

**SIGNATURE OF PROGRAMME LEADER**

Name *(please print)*

Title

Signature | Date
---|---

**SIGNATURE OF HEAD(S) OF SCHOOL(S)/DIVISION(S) AND DEAN OF HE/DIRECTOR OF HE**

These signatures confirm institutional endorsement of the programme and a commitment to resource programme development and delivery.

- **Head(s) of School(s)/Division(s)**
  Name *(please print)*: 
  Signature: 
  Date: 

- **Dean of HE/Head of HE**
  Name *(please print)*: 
  Signature: 
  Date: