A close-up of a logo

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**CTMC FORM 3:**  **Temporary Amendments to Assessment of Approved Modules (AAM) (exceptional circumstances)**

For **Temporary Assessment** amendments (exceptional circumstances), please complete the details below and return to your School Quality Administrator and College Director.

With the Course Leader’s assent (see section 7), amendments may be presented by the Module Leader to the relevant CMAS sub-group.

**1. Module Information**

|  |  |
| --- | --- |
| **School/Institute/Department:** |  |

|  |  |
| --- | --- |
| **Course Title:** |  |

|  |  |
| --- | --- |
| **Module Code:** |  |

|  |  |
| --- | --- |
| **Module Author/ Proposer:** |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Status of module in relation to course** |  | Mandatory |  | Optional |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Credits** |  | 15 |  | 30 |

|  |  |
| --- | --- |
| **Date change to take effect from:** |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Which students will be affected:** |  | New |  | Existing |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **2. Is the module shared by any other course?** |  | Yes |  | No |
| Where the module is shared by another course or courses, the proposer must ensure that the course leader/s have been consulted in order to consider implications of the proposed change for students on the other course/s. Where there is a significant practice element, changes must be discussed with relevant partners/placement providers. | | | | |
| **Shared by Course/s:** |  | | | |
| **Status of module in relation to these courses** (i.e.: Mandatory or Optional) |  | | | |
| **Has the course leader been consulted? Give details** e.g., name, course, date of discussion etc. |  | | | |

**3. Rationale**

This should include reference to the learning outcomes of the module and course assessment strategy as appropriate. How do the new arrangements support the Course aims? Is the proposed change a response to student, staff or External Examiner evaluation?

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| --- | --- |
| **Give details:** |  |

**4. Changes to Assessment pattern**: include assessment type, word/time, limits, weightings, etc.

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| --- | --- |
| **Original Assessment Pattern:** |  |
| **New Assessment Pattern:** |  |

**5. Other considerations**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Does the module map against any professional accreditation?** |  | Yes | |  | | No |
| If yes, give details: |  | | | | | |
| Will the change impact upon PSRB accreditation? |  | | Yes | |  | No |
| If yes, give details: |  | | | | | |
| Has the PSRB been contacted in relation to the proposed change? |  | | Yes | |  | No |
| If yes, give details: |  | | | | | |

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| **Does this module have work based learning/placements?** |  | Yes |  | No |
| If yes, give details: |  | | | |

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| --- | --- | --- | --- | --- |
| **Have placement providers been consulted?** |  | Yes |  | No |
| If yes, give details: |  | | | |

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| **Is the module delivered by a partner?** |  | Yes |  | No |
| If yes, give details: |  | | | |

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| **Has the partner been consulted?** |  | Yes |  | No |
| If yes, give details: |  | | | |

**6. Any other changes not listed above**

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| **Give details:** |  |

**7. Course Leader consultation**

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| --- | --- | --- | --- | --- |
| **Has the Course Leader been consulted about the proposed change?** |  | Yes |  | No |
| Give details e.g., name, date of discussion etc. |  | | | |
| Give details of discussion including any discussion of cumulative change that might lead to significant revision of the originally approved course: | | | | |
|  | | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Who is to present the proposal at CMAS?** |  | Module leader |  | Course leader |
| If Module Leader, Course Leader to give consent: | Signed: | | | |

**Signatures**

|  |  |  |  |
| --- | --- | --- | --- |
| **Course Leader** | | | |
| Signed: |  | Date: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Head of School/Institute and/or Head of Department** | | | |
| Signed: |  | Date: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Agreed by Link Tutor** (Collaborative only) | | | |
| Signed: |  | Date: |  |

Please send completed form to the School/Institute Quality Administrator and College Director LTQE.

## **Checklist for consideration prior to proposal sign off:**

*Module Leaders and Course Leaders should note that a proposal to CMAS is comparable to final course approval and that final documentation submitted should be of the same high standard. Module Leaders and Course Leaders need to give themselves sufficient time to look critically at the proposed changes which are to be accurately presented on the correct template.*

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| --- | --- | --- | --- | --- |
| Has the QC advised on category and appropriate CTMC form? | Yes |  | No |  |
| Has the most up to date [Module Specification](https://www2.worc.ac.uk/aqu/documents/ModuleSpecificationTemplate.docx) been used. Has it been completed appropriately and been checked for typos and grammatical errors? | Yes |  | No |  |
| Have both the original module specification and revised version been submitted to CMAS? | Yes |  | No |  |
| Has the proposal been checked against the Programme Specification? | Yes |  | No |  |
| Do the proposed changes impact the Award Map? | Yes |  | No |  |
| If ‘Yes’ has the Award Map (and Programme Spec) been amended? | Yes |  | No |  |
| Are the original and revised module specifications, award map and programme specification, where applicable, attached with changes highlighted? | Yes |  | No |  |
| Has the cumulative change spreadsheet been checked to consider previous changes and whether the cumulative changes are likely to trigger a course reapproval? | Yes |  | No |  |
| Have any revised learning outcomes been reviewed against the **grade descriptors**? (See [Assessment Practice page](https://www2.worc.ac.uk/aqu/668.htm)) | Yes |  | No |  |
| Have the principles of assessment set out in the **Assessment Policy (Appendix 1)** been considered (See [Assessment Practice page](https://www2.worc.ac.uk/aqu/668.htm)). For example (not exhaustive): | Yes |  | No |  |
| * is assessment appropriate: does it align with course aims and learning outcomes (will it enable students to demonstrate meeting learning outcomes)? | Yes |  | No |  |
| * is the weighting appropriate as set out in the Assessment Policy? | Yes |  | No |  |
| * does the loading of assessment across modules at each level and for the course remain appropriate? | Yes |  | No |  |
| * has consideration been given to group work? | Yes |  | No |  |
| Does the module map against any professional accreditation? | Yes |  | No |  |
| Has the PSRB been contacted in relation to the changes? | Yes |  | No |  |
| Has the response from the PSRB been considered and recorded? | Yes |  | No |  |
| Do the proposed changes, including those of the learning outcomes, impact on professional accreditation? | Yes |  | No |  |
| Are you sure that changes will not invalidate professional accreditation? | Yes |  | No |  |
| Has compensation been considered/noted on the module specification? | Yes |  | No |  |
| Have you considered whether changes impact the academic level and the overall course and how this module sits with other modules in the course)? | Yes |  | No |  |