

**Programme Suspension and/or Closure Form**

**General Information**

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| 1**. Basic programme details** |
| **Programme Title(s):** | **Programme Code(s):** |
| **Host School:** | **Location(s) of delivery please provide details of on campus/off campus/online delivery****arrangements:** |
| **Is the programme to be replaced by another programme eg via the Programme Review and Re-approval process – if yes please provide****details of replacement programme codes.** |  |
| **Is the form being used to provide notification of a Partner Closure?** **If yes, please provide the following details:** |  **YES/NO** |
| **Partner:** | **Date of SPRDC approving closure:** |
| **Expected date of closure:** |  |

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| **2**. **Details of suspension of intake** |
| **Date intake suspended from:** |  |
| **Type of suspension:***(please tick)* | One intake only |  |
| Indefinite, may run in future |  |
| Indefinite, leading to closure (please give details intended closure date) |  |
| **Notes:** |

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| **3. Supporting information** |
| **Applicants to programme:***Consideration needs to be made to the Competition and Markets Authority guidance and the students’ consumer rights* |
| If the programme has applicants please indicate numbers of: |
| Offers made: |  | Offersaccepted: |  |
| **Will applicants be offered a place on an alternative UoB programme?***If yes, please note details**Please note, if you are withdrawing a programme and not offering applicants an alternative programme of study,* ***this may be a reportable event to the Office for Students****.* |
| **Applicants on other programmes:****Please indicate if applicants on other programmes will be affected (for example by withdrawal of modules on the suspended programme) and how this will be handled.***Where module choices are affected, it is important that student communication and consultation organised by the School/Programme Team happens early and you may wish to seek advice from**SEO.* |

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| **Off Campus Division**To ensure any prospective partner institutions are full considered as part of a programme suspension/closure, please consult with the Dean of the Off Campus Division at the earliest stage of the proposal. The Assistant Registrar may also need to be consulted if the suspension/closure impacts on the agreement with a partner.*Please indicate details of partner organisations and how any impact on them resulting from the suspension/closure is to be handled.* |
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| **Students’ Union***Please provide details of consultation with members of the Students’ Union, if the suspension/closure will affect existing students.* |
| **Rationale for suspension/closure***What is the rationale for suspension/closure of the programme(s)**Reference can be made to the Finance department, the Academic Portfolio Review, the Periodic Review* |

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| **4. Endorsement** |
| **Signature of Dean of Faculty**Name: |
| Signature: |  | Date: |  |
| **Signature of Dean of Off Campus Division (for programmes which are also delivered by partner organisations, and where notification is of Partner Closure following SPRDC approval)**Name: |
| Signature: |  | Date: |  |
| **Signature of Chair of Programmes Committee (or nominee)**Name: |
| Signature: |  | Date: |  |
| **Confirmation of date of Programmes Committee meeting at which suspension/closure was endorsed.** |

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| **5. Responsibilities for communicating suspension of intake/programme/partner closure** |
| **Stakeholder** | **To be informed by** |
| Faculty staff | Dean of Faculty |
| Current students | Dean of Faculty/Head of School/AcademicCoordinator SELE |
| Applicants | Dean of Faculty/Head of School/AcademicCoordinator R&R |
| Marketing/Admissions/International Office | Programme Leader/ Academic Coordinator R&R |
| UCAS/other clearing house | Marketing and admissions staff |
| Partner institutions | Off Campus Division |
| Standards and Enhancement | Head of School/Academic Coordinator SELE |
| Timetabling | Head of School/Academic Coordinator SELE |
| Students’ Union | Head of School/Academic Coordinator SELE |



**ANNEX B**

**Programme Suspension and/or Closure Form 2022-23**

Implementation Plan

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| **1. Basic details** |
| **Programme Title:** | **Programme Code:** |
| **Host School:** | **Location(s) of delivery:** |
| **Partner (where applicable):** |  |
| **Type of suspension:**One intake only ☐ | Indefinite, may run in future ☐ | Indefinite, leading to closure | ☐ |

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| **2. Endorsement for Programme close/suspension** |
| Dean of Faculty |
| Name: |  | Signature: |  | Date: |  |
| Date endorsed by School Board: |  |
| Date communicated to ProgrammesCommittee |  |

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| **3. Endorsement for Partner Closure** |
| Dean of Off Campus Division |
| Name: |  | Signature: |  | Date: |  |
| Date endorsed by by SPDRC and School Board (if needed):  |  |
| Date communicated to ProgrammesCommittee |  |

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| **4. Implementation Plan** |
| **Stakeholder** | **Faculty/OfCD Action** | **Timescale/Dates** | **Responsibility** | **Progress** |
| Faculty Staff |  |  |  |  |
| Applicants |  |  |  |  |
| Current students |  |  |  |  |
| Partner institution/s |  |  |  |  |
| International Office |  |  |  |  |
| Marketing/Admissions |  |  |  |  |
| Student DataManagement/Timetabling |  |  |  |  |
| Academic Support Services |  |  |  |  |
| Other (Finance and Legal, for Partner Closure) |  |  |  |  |

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| **4. Re-instatement of programme** |
| **Signature of Dean of Faculty** (for all reinstated programmes whether delivered on campus, off campus, remotely) |
| Signature: |  | Date: |  |
| **Signature of Dean of Off Campus Division** (for programmes delivered at partner institutions)Name: |
| Signature: |  | Date: |  |
| **Signature of Chair of Programmes Committee (or nominee)** ( for all reinstated programmes whether delivered on campus, off campus, remotely )Name: |
| Signature: |  | Date: |  |

Following the reinstatement of a programme by Programmes Committee, notification should be sent to Admissions, Marketing, Student Data Management, Academic Support Services, Off Campus Division