RE-ACCREDITATION PROPOSAL ASSESSMENT FORM

Please refer to the Reaccreditation Proposal submitted as well as supporting information to inform your assessment of the proposal in the areas listed below.

Please note this form should be completed by the Accreditation Link Tutor.

|  |  |
| --- | --- |
| 1. ***Client organisation***
 |  |
| 1. ***Title of external course or other activity to be reaccredited***
 |  |
| 1. ***Specific or general credit proposed***
 |  |
| 1. ***Appropriateness of admission criteria and procedures***
 |  |
| 1. ***Appropriateness of learning opportunities provided***
 |  |
| 1. ***Appropriateness of the human and physical resources to support learning***
 |  |
| 1. ***Appropriateness of the specified learning outcomes***
 |  |
| 1. ***Appropriateness of the specified assessment requirements***
 |  |
| 1. ***Appropriateness of the evaluation of the provision since last accreditation including annual monitoring***
 |  |
| 1. ***Overall approval, referral or rejection recommendation***
 |  |

*If overall approval is recommended in section 10 complete sections 11 – 16, otherwise go to section 17.*

|  |  |
| --- | --- |
| 1. ***Recommended credit rating including number and level of credits***
 |  |
| 1. ***If specific credit is recommended specify Middlesex University course level and/or module exemptions***
 |  |
| 1. ***Proposed conditions of approval***
 |  |
| 1. ***Recommendations related to approval***
 |  |
| 1. ***Other matters for the attention of the Faculty committee***
 |  |
| 1. ***Suggested commendations where appropriate***
 |  |

*Section 17 – Approval Information*

|  |  |
| --- | --- |
| ***Accreditation Proposal Assessor*** |  |
| ***University Faculty/School*** |  |
| ***Signed*** |  |
| ***Date*** |  |

***Please return to the Officer of the Faculty committee***