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| **NEW PARTNER COLLABORATIVE MODULES FORM** |
| 1. **Name of Proposed Partner** *(please indicate whether institution wide or department/subject specific)*: |
| 1. **Address of Proposed Partner:** |
| 1. **Type of institution** (please tick):  |  |  |  | | --- | --- | --- | |  | **UK- based** | **International** | | **HEI with degree awarding powers** |  |  | | **HEI without degree awarding powers** |  |  | | **FE College** |  |  | | **Private sector organisation** |  |  | | **Other** *(please give details*) |  |  | |
| 1. **Rationale for wanting to establish link:** |
| 1. **A description of how the partnership fits with the College’s Strategy, Education & Student Strategy and, if applicable the International Strategy:** |
| 1. **Is the learning environment appropriate for students and will students have access to appropriate learning resources?** |
| 1. **Is the standard of teaching provided by partner staff appropriate? How has this been verified? Are the teaching staff appropriately qualified? Will there be appropriate academic supervision?** |
| 1. **What provision will be made for the welfare and support of students?** |
| 1. **Is the partner financially viable?** |
| 1. **Are there any cost implications to the partnership and if so how will these be met?** |