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Description automatically generated with low confidence updated 15 Jan 2025

**EDUCATIONAL PARTNERSHIP AGREEMENTS**

**Approval to Proceed (new/amended)/Renewal (incl renewal with extension) Articulation Arrangements**

*University Policy on Collaborative Provision and information on approval procedures, including a typology of collaborative arrangements and brief details of existing arrangements, can be found on:*

<http://www.qub.ac.uk/directorates/AcademicStudentAffairs/AcademicAffairs/CollaborativeArrangements/>

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **1** | **QUEEN’S UNIVERSITY LEAD** | | | | |
| **1.1** | **Faculty/School proposing this agreement** | | Proposer Name:  Position:  Faculty/School:  Email:  Phone: | | |
| **2** | **GENERAL INFORMATION** | | | | |
| **2.1** | **School(s)/Faculty(ies) involved in this arrangement** | |  | | |
| **2.2** | **Outcome of discussion with other Faculties** | |  | | |
| **2.3** | **Queen’s award which student will receive** | |  | | |
| **2.4** | **Has an initial review/curriculum alignment been carried out which supports the articulation?**  Detailed curriculum mapping to be carried out in support of the Business case. | |  | | |
| **2.5** | **Status of proposed agreement** | | New agreement or activity  Renewal of an existing agreement  Renewal of an existing agreement with expanded new activity/activities, e.g. articulation to a new QUB programme  Addendum to accommodate change to existing agreement in term. Please outline : | | |
| **2.6** | **Anticipated Term of Activity**  **(five year maximum)** | | Start date:  date\_\_/\_\_/\_\_  End date if less than 5 years:  date\_\_/\_\_/\_\_ | | |
| **2.7** | **Please indicate the Articulation model of this proposal** | | Part A  1+2  2+2 or 2+3  2+1 or 3+1  Any Other model not listed above | | |
| Part B  Intra-Faculty Arrangement  Cross Faculty Arrangements  Double Award  Dual Award  Any Other model not listed above – Please provide rationale | | |
| **2.8** | **Are there any other collaborative models to be included in the MOA in addition to Articulation Arrangements?** | | Progression Agreement  Study Abroad/Student Exchange  Any Other model  Research Collaboration  PhD Student Training | | |
| **3. PROPOSED PARTNER INSTITUTION** | | | | | |
| Name: | | | | | |
| Address: | | | | | |
| Institutional URL: | | | | | |
| Institutional Status:  *(Public or Private university / college, charity, registered company, government body/agency)* | | | | | |
| **4. INSTITUTIONAL CONTEXT / ENVIRONMENT – on the basis of publicly available/known information** | | | | | |
| *LEGAL CONSIDERATIONS* | | | | | |
| Has the proposed partner the legal authority to contract as an institution in its own right? | | | | | |
| *FINANCIAL CONSIDERATIONS* | | | | | |
| Does the proposed partner have the financial resources to support international collaboration? | | | | | |
| *ACADEMIC CONSIDERATIONS* | | | | | |
| Please provide the institution’s THE or QS rankings? | | | | | |
| What Is the principal language of delivery / assessment at the proposed partner institution? *English or other.* | | | | | |
| Does the proposed partner have previous experience of collaboration with Queen’s or any other international HEI? | | | | | |
| If yes, has any institution withdrawn from an arrangement with the proposed partner? | | | | | |
| Does the proposed partner operate within an established/national framework of quality assurance / accreditation? | | | | | |
| Does the proposed partner Institution have a sound understanding of UK HEI practices? | | | | | |
| **5. STRATEGIC FIT / ALIGNMENT** | | | | | |
| University  (*link to Strategy 2030)* | | | | | |
| Faculty  (*link to Faculty Plan*) | | | | | |
| School  *(link to School Plan)* | | | | | |
| **6. DETAILS OF THE COLLABORATION** | | | | | |
| **Has there been or are there plans for any engagement (visit, online meeting, MOU) to or from the partner institution prior to approval?** | | | | | No  Yes. Please provide details/report |
| **Please describe any previous or current collaborations between Queen’s and this institution.** | | | |  | |
| **Please describe any previous or current collaborations between this institution and any other UK institutions.** | | | |  | |
| **7. DUE DILIGENCE** | | | | | |
| Attach the completed Due Diligence template. | | | | | |
| **8. STUDENT OUTCOMES** | | | | | |
| **New Arrangement – Indicate projected student numbers** | | | | | |
| **Renewal of Existing Arrangement – Also provide student outcomes for the previous Articulation arrangement period.**   |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | | **Student Numbers projected for previous approval period** | **Year 1** | **Year 2** | **Year 3** | **Year 4** | **Year 5** | **Total** | | *[Degree]* |  |  |  |  |  |  | | *[Degree]* |  |  |  |  |  |  | | **Actual Student Numbers** | **Year 1** | **Year 2** | **Year 3** | **Year 4** | **Year 5** | **Total** | | *[Degree]* |  |  |  |  |  |  | | *[Degree]* |  |  |  |  |  |  | | **Total Students** |  |  |  |  |  |  | | **Projected Student Numbers for next approval period** | **Year 1** | **Year 2** | **Year 3** | **Year 4** | **Year 5** | **Total** | | *[Degree]* |  |  |  |  |  |  | | *[Degree]* |  |  |  |  |  |  | | **Total Students** |  |  |  |  |  |  |   **Evaluation/Action for improvement:** | | | | | |
| **Renewal of Existing Arrangement – Provide student outcomes in terms of academic achievement?**   |  |  |  |  |  | | --- | --- | --- | --- | --- | |  | **Year 1** | **Year 2** | **Year 3** | **Totals** | | **Total No Students** |  |  |  |  | | **Withdrawals** |  |  |  |  | | **Leave of Absence** |  |  |  |  | | **1st** |  |  |  |  | | **2:1** |  |  |  |  | | **2:2** |  |  |  |  | | **3rd** |  |  |  |  |   **Evaluation/Action for improvement:** | | | | | |
|  | | | | | |
| **9. POTENTIAL RESOURCE REQUIREMENTS / INVESTMENT** | | | | | |
| 9.1 Are there any initial resource / investment requirements for the School/Faculty to progress further discussion? E.g. Staffing (admin / teaching / assessment / pastoral support), travel/accommodation, facilities, library access If so, please detail. | | | | | |
| 9.2 What would be the likely costs/resources involved for QUB in delivering an arrangement with the proposed partner? | | | | | |
|  | | | | | |
| **ENDORSEMENTS AND APPROVAL** | | | | | |
| **Proposer** | | **Name:**  **Role:**  **Date:** | | | |
| **Academic Affairs** | | ***Comments on potential level of risk and appropriate approval authority*** | | | |
| **Name:**  **Role:**  **Date:** | | | |
| **School Management/Executive Board** | | **Name:**  **Role:**  **Date of meeting**  **Minutes attached** | | | |
| **Faculty Executive Board** | | **Name:**  **Role:**  **Date of meeting**  **Minutes attached** | | | |

**Typology of Risk**

|  |  |  |  |
| --- | --- | --- | --- |
|  | Type of arrangement √ as many as appropriate | √ | Approval Authority |
| Category 1 | 1+2, 2+2, 2+3 (stage 2 entry) |  |  |
|  | Individual School/Intra Faculty no impact on PSRB |  | Faculty  (Proposals can also be referred to ECQS as appropriate) |
| Renewal (non-substantive changes) Student outcomes in line QUB thresholds |  |
| Current partner – add new discipline |  |
| Renewal of 2+1 and 3+1 (non-substantive changes) and student outcomes in line with QUB thresholds |  |
| Category 2 | 2+2 and 2+3 |  | ECQS |
|  | New cross Faculty arrangement |  |
| Existing partner being expanded to include additional School from another Faculty |  |
| Implications for PSRB |  |
| Cross Faculty renewal of existing arrangements |  |
| Renewal of existing School/Intra Faculty arrangement - student outcomes not in line with QUB thresholds |  |
| All 2+1 and 3+1 arrangements |  |

**Outcome**

|  |  |  |
| --- | --- | --- |
| Faculty Decision | Approved |  |
|  | **Decision Options** |
| Approved to Proceed with Full Business Case (including curriculum mapping) for School and Faculty consideration/endorsement/approval in line with Typology of Risk |  |
| Not yet approved – Discuss with other Faculties |  |
| Not yet approved – Refer back to School |  |
| Not approved – Do not proceed |  |
| Comment on Decision options above |  |  |

**Update Decision following resubmission**

|  |  |  |
| --- | --- | --- |
| Faculty Decision | Approved |  |
|  | **Decision Options** |
| Approved to Proceed with Full Business Case (including curriculum mapping) for School and Faculty consideration/endorsement/approval in line with Typology of Risk |  |
| Not approved – Do not proceed |  |
| Comment on Decision |  |  |

|  |  |
| --- | --- |
| **Faculty Executive Board** | **Name:**  **Role:**  **Date of meeting**  **Minutes attached** |

|  |  |
| --- | --- |
| **Attached Documentation** | **√** |
| Report of engagement visits if appropriate |  |
| Due Diligence report |  |
| School Executive Board Minute |  |