A**PPROVAL TO PROCEED FOR ARTICULATION AGREEMENTS (UK/EU)**

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| 1. **School/Institute/Faculty:**
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| 1. **Partner Institution:**
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| 1. **Proposed Type of Arrangement**

*For example, 2+2, 2+1* |  |
| * 1. **Partner Programme(s):**
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| * 1. **QUB Programme(s):**
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| 1. **Curriculum matching/mapping and Entry Criteria**

*Please indicate if partner and QUB curricula have been reviewed and assessed for academic compatibility to support the proposed articulation of students from the partner institution to Queen’s.***YES/NO***Please provide evidence that you have consulted with the Admissions and Access Service and that they have confirmed that the entry requirements are appropriate.* |
| 1. **Fee rate:**

*Please indicate below the appropriate assigned fee rate as outlined in the Tuition Fee Schedule which can be found at* <http://www.qub.ac.uk/directorates/sgc/finance/TuitionFees/>*.*  ***Undergraduate: Fee Rate 1*  *Fee Rate 2* *Fee Rate* 3 *Fee Rate 4****If a discounted fee is being proposed, please include the proposed fee level and justification for the discounted fee. (300 words max.)***Where a discounted fee is being proposed, please attach confirmation that it has been discussed and agreed with Finance** **and attach a business plan drafted in conjunction with the Faculty Business Partner.**   |
| 1. **Visa Requirements**

*Please provide evidence that you have consulted with Immigration Support Service and they have confirmed whether or not it is possible for international students requiring a visa to undertake this course.* |
| **6. Proposed start date for arrangement:** |  |
| **7. State how the arrangement meets the priorities of Vision 2030.** |
| **8. Projected target market and projected recruitment in first five years of programme.** *(300 words max.) Please attach a Marketing Intelligence Report and use it as the basis for benchmarking, identifying and justifying your key target markets (nationally and/or internationally).*  |
| **9. Does the University have a current MOU/MOA with the proposed partner?** **YES/NO****If not, please state existing links with the proposed partner.** |
| **10. State how the proposed partner meets the requirements of the University Collaborative Provision Policy** [***http://www.qub.ac.uk/directorates/AcademicAffairs/CollaborativeArrangements/UniversityPolicyandKeyPrinciplesforCollaborativeProvision/***](http://www.qub.ac.uk/directorates/AcademicAffairs/CollaborativeArrangements/UniversityPolicyandKeyPrinciplesforCollaborativeProvision/) |
| **Head of School/Director of Institute (or nominee):****Signature and date:**  |
| **Confirmation for Approval to Proceed:****I confirm that the above details are correct. I have considered the academic and resource implications of this collaborative arrangement. The proposal has the Faculty Executive Board’s support.****Chair of Faculty Executive Board (or nominee):****Signature and date:**Additional Comments (if required)http://www.qub.ac.uk/directorates/AcademicAffairs/CollaborativeArrangements/TypesofCollaboration/ |
| **Next Steps*** **Inform Academic Affairs of Approval to Proceed**
* **Academic Affairs will draft an Articulation Agreement and arrange for final approval and signature**

**\*where a proposal is for a dual/double degree, Academic Affairs must be contacted in the first instance.** |