Collaborative Partner Proposal

**The completion of this form is the responsibility of the Lead Partner Proposer with support from the SMT Lead for the Partnership, in order to make a request to proceed with the development of a collaborative partnership arrangement.**

**The information provided will form part of the due diligence activity.**

This form should be used for the following arrangements:

* Validation – the University approves the course developed by the partner
* Franchise – where existing University provision is delivered by a collaborative partner, leading to the award of credit by the University
* Articulation – a collaborative agreement with an organisation to allow students to enter a University course with advanced standing
* Joint Degree – where the University works with one or more degree awarding bodies for the purposes of course design, approval, delivery and assessment. Courses are jointly awarded to students by all degree awarding bodies.
* Dual Degree – where the University works with one or more degree awarding bodies for jointly conceived courses, however the student does not need to satisfy the requirements of all partners to receive an award.

Completed forms must be submitted to the Faculty Quality Office with the Planning Stage 1 form (PS1), which sets out the proposed course arrangements for the partnership.

**Part One: Information about the Partner**

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| **Registered name and address of organisation**  |  |
| **Main contact name and role at organisation** |  |
| **Country of delivery (if different to the above)** |  |
| **Organisations Web address** |  |
| **UK Provider Reference Number (For UK Partnerships)** [**https://www.ukrlp.co.uk**](https://www.ukrlp.co.uk) |  |

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| **Intended Partnership Arrangement** |
| Please tick as appropriate:

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| **MoA / Agreement** |  |
| **Service Contract** |  |

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| **Does the partner have the capacity to contract with the University** Please consult with Governance and Legal Services if unsure of the proposed partner’s legal status | YES/NO |
| **Status of the partner:** Further information on the legal status of the organisation, eg articles of governance and association will be required for the full due diligence activity. |
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| **Type:** | **Tick all that apply** |
| **Registered Company** |  |
| **Higher Education Institution** |  |
| **Charitable Trust** |  |
| **Public Body** |  |
| **Other Educational Institutional**  |  |
| **Other – please specify** |  |

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| **Funding arrangements for the organisation**Further information on funding, including audited accounts, management accounts or equivalent records will be required for the full due diligence activity. |
| Please tick as appropriate:

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| --- | --- |
| **Government Funded**  |  |
|  **Privately Funded** |  |

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| **Please confirm the organisation’s accredited or recognised status accorded by the relevant authorising bodies.** |
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**Part Two: Summary of Academic Collaboration Plans**

**The Planning Stage 1 form (PS1) will detail the proposed course arrangements. Please complete one PS1 for each course.**

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| **Course Arrangements** |
| 1. **Please indicate the type of arrangement proposed:**

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| **Type of arrangement:** | **Tick all that apply** |
| **Validation** |  |
| **Franchise** |  |
| **Articulation** |  |
| **Joint Degree** |  |
| **Dual Degree** |  |
| **Other – please specify:** |  |
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1. **Summarise the proposed academic arrangements (including identified deliverables and objectives):**
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| **Course development and approval timescales:** |
| **Indicative Activity** Requirements may vary depending on the nature of the partnership arrangements | **Course Title** | **Anticipated Date of activity** |
| **FPPE approval of Planning Stage 1 (PS1)**  |  |  |
| **ASC Approval of Planning Stage 1** |  |  |
| **FPPE approval of Planning Stage 2 (PS2) with appendices**  |  |  |
| **Course arrangements approved in Faculty (Course development, Faculty Scrutiny, FQC approval etc)** |  |  |
| **Course validation event – where applicable** |  |  |
| **ASC Scrutiny Group (approval of partnership and franchise arrangements)** |  |  |
| **Education and Student Experience Committee Approval** |  |  |
| **Academic Board Approval** |  |  |
| **Signing of the Collaborative Agreement**  |  |  |

**Part Three: Rationale and Strategic Fit of the Partner Organisation**

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| **Summarise the strategic objectives and mission statement of proposed partner and how these align with the University.** |
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| **Please provide a summary of the academic portfolio currently offered by the proposed partner.** |
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| **Summarise the proposed partner’s previous and current experience of collaborative provision.**Include whether the proposal includes the delivery of courses previously delivered by another collaborative partner of the organisation. |
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| **Will the proposed partnership be a short-term or a long-term collaboration and is it likely to lead to additional outcomes, such as research and knowledge transfer, and staff and student exchange?** |
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| **Will the proposed partnership enhance widening participation; in what ways will the contribution of the partner enhance the University’s strategic reach?** |
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| **How will the proposed collaboration build on the academic strengths of the School/Centre or Faculty concerned; is there appropriate internal academic expertise to support the collaboration?**  |
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| **How will the proposed partnership link to the relevant School/Centre and faculty business plans, including availability of resource and whether the proposal is similar to current collaborative offers with other partners?** |
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| **How will the partnership enhance the University’s position, locally, regionally or nationally; how will it contribute to the University’s Internationalisation Strategy; how will the partnership contribute to educational capacity building?** |
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**Part Four: Resource**

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| **Please confirm that the University’s Standard Operating Model for Collaborative Partnerships has been consulted, and state which model will be adopted for the proposed partnership** |
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| **Model** | **Please Tick** |
| **Model A – standard** |  |
| **Model B – non standard** |  |
| **Model C – exception** |  |

**The University would expect partnership arrangements to follow the University’s Standard Operating Model A. Where an exceptional model is required (model B or C) this will require additional development time and potentially increased resource, cost and carry increased risk.** |
| **Please consult with the appropriate professional service department to provide details of:** |
| a) potential income from the partnershipb) the type of resource and likely costs which may include: learning resources, teaching space, residential accommodation and staffing costsc) any exceptional costs that may be incurred in pursuing this partnership. This section should take account of costs of overseas venue checking and validation, external examiners travelling abroad, exceptional Board of Examiners expenses, and exceptional staffing costsd) the likely financial sustainability of the proposed partnership |
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| **Please confirm the rationale and business case for courses where delivery and assessment will be undertaken in a language other than English:**  |
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**Part Five: Risk Considerations**

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| **Other Parties to the Partnership**Please advise if the proposed collaboration involves a third party or multiple parties. Please provide details of all parties and the nature of their involvement in this collaboration |
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| **Indicators of Esteem**Please identify any identified evidence of the reputational standing of the proposed partner |
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| **Risk Assessment** |
|  | **Identified Risk** | **Risk level descriptors** | **Score****(1, 2 or 3)** |
| **Risk level: 1** | **Risk level: 2** | **Risk level: 3** |
| **1** | **Geographical location of proposed partner** | UK | European / Commonwealth | Other |  |
| **2** | **Proposed partner’s capacity to contract** | Publicly funded HE / FE (UK) | Privately funded HE / FE (UK) | Other |  |
| **3** | **Proposed partner’s educational context** | UK based HE system | European / Commonwealth based HE system | Other / developed HE system |  |
| **4** | **Student language at the proposed partner** | UK or overseas – English first language | UK based – English second language | Overseas – English second language |  |
| **5** | **Anticipated language of delivery of collaborative activity** | English |  | Other / Combination of English and other |  |
| **6** | **Proposed partner’s resource capacity to support the partnership** | Large, well resourced | Small, well resourced | Limited resources |  |
| **7** | **Role of proposed partner** | Provision of student support / other resource / Articulation | Franchise arrangement | Validation arrangement |  |
| **8** | **Proposed partner’s academic expertise** | Programmes at this level | Programmes at a lower level | No experience in this field |  |
| **9** | **Proposed partner’s previous experience with UK HEIs** | At this level | At a lower level | None |  |
| **10** | **Proposed partner’s quality assurance system or agency** | UK QAA | Equivalent to the UK QAA | Not defined |  |
| **11** | **Proposed partner’s capacity to provide appropriate datasets which align with the University’s data management system** | Alignment with the University’s data management system |  | Not defined |  |
| **Total Risk Score:****11-15 low risk****16-20 medium risk****21-33 high risk** |  |

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| **Summary of Risk Considerations** |
| Please identify any risks or issues that will need further investigation as part of preparing a full submission to the Academic Strategy Committee and the development of the contractual agreement.Risks should also identify whether the proposal for a new or existing partner and / or country and confirm liaison with Governance and Legal, identifying any areas of due diligence at this stage. |
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**Part Six: Authorisation for the proposal to proceed**

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| Faculty Registrar |  | Date |  |
| If Postgraduate:Dean of the Graduate College  |  | Date |  |
| Dean of International:and/orUK Partnerships Nominee: |  | Date |  |

**Faculty Approval**

Recommendation for approval from the Faculty Portfolio Planning Executive (or alternative Faculty body performing this function) to forward this proposal to the Academic Strategy Committee for institutional consideration and in-principle approval.

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| Date considered by the FPPE: |  |
| Comments (*Please provide a brief summary of the discussions held at the Executive regarding the proposal and in particular any risks identified and proposed mitigating action):*  |
| Signature of Chair *(signing to confirm that due consideration has been given by the FPPE to the portfolio implications of the proposal with any risks identified outlined above)*  |
| Chair’s signature: |  | Date:Indicate whether this was via Chair’s Action |  |

Once approved at the Faculty Portfolio Planning Executive, the form should then be submitted to the Academic Strategy Committee for institutional approval. Please submit the completed form to QSOCommittees@canterbury.ac.uk