Collaborative Provision: Initial Proposal Form for UK Partners

This form is to be used at the beginning of the process for setting up a new collaborative provision arrangement with a UK partner(s) and should be completed by the Collaboration Sponsor. It allows the Collaboration Sponsor to give a brief overview of the proposal and will inform which approval process is required. Where possible, all questions should be answered. If details about the proposal change, these will be discussed at the final approval stage.

Once the form has been completed, the Collaboration Sponsor must also complete the risk assessment form and arrange for the Head of Faculty Finance to prepare the business case. Once all three documents are complete, the Collaboration Sponsor passes these to the Faculty Board for consideration.

Where setting up the arrangement will also involve programme approval and review, Faculty Board should also consider the Programme Proposal at the same time as the completed Collaborative Provision: Initial Proposal form. Questions which feature on both forms should be completed on the Programme Proposal Template only: for those questions the Collaborative Provision Initial Proposal Form should refer to the Programme Proposal Template.

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| **School:** |  |
| **Name of Collaboration Sponsor and email address** |  |

**Proposed Partner institution/organisation(s)**

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| --- | --- |
| Name and address of Partner(s): |  |
| Details of any existing relationships between the University of Southampton and the proposed partner(s): | |
|  | |
| Brief description of the proposed partner(s) - type of institution/organisation, publicly/privately funded, number of students, types of programmes taught and level. | |
|  | |
| Named contact at the partner |  |

**Details of Proposed Collaboration**

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| --- | --- |
| Describe the proposed collaboration (use the typology in the Collaborative Provision Policy) | |
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| When do you envisage the collaboration will start? |  |
| What language(s) will teaching be delivered in? |  |
| In what language(s) will assessment take place? |  |
| How many students do you expect to enrol in the collaboration each year? What is the basis for this assumption? |  |
| In steady state, how many students do you expect to be involved in the collaboration each year? |  |
| How many years to you expect the collaboration to run? |  |

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| Roughly, what ratio of teaching of the entire programme is anticipated to be delivered: | |
| a) at an existing UoS campus (specify which one) |  |
| b) by UoS staff at a non UoS location (including online). Legal Services should be consulted at an early stage when considering such arrangements. |  |
| c) by non UoS staff |  |

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|  | **Yes** | **No** |
| Will this collaboration result in a Single Award (made by the University of Southampton)? | ☐ | ☐ |
| Will this collaboration result in a Joint Award (a single certificate, awarded by multiple parties including the University of Southampton)? | ☐ | ☐ |
| Will this collaboration result in a Dual or Multiple award (certificates awarded by each partner institution)? | ☐ | ☐ |

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|  | **Yes** | **No** |
| Will student support be provided by the partner organisation? | ☐ | ☐ |
| Will IT facilities be provided by the partner organisation? | ☐ | ☐ |
| Will library facilities be provided by the partner organisation? | ☐ | ☐ |

**Strategic information**

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| In brief, describe how the proposal for this collaboration has come about. Provide brief details (with dates and locations) of any meetings held, who was involved and what was discussed. |
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| What advantages does this proposal bring for the University of Southampton and how does the proposal support the University Strategy? |
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| Does the proposal pose any significant risks to the University? |
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**Other**

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| Any other comments: |
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| For arrangements which will not be going through the full programme approval and reveiw process (e.g. articulations) and which will not therefore have an internal stakeholder consultation as part of the programme approval process, please indicate whether the following have been consulted before completing this form. | | |
|  | **Yes** | **No** |
| Admissions | ☐ | ☐ |
| Recruitment | ☐ | ☐ |
| Communications and Marketing | ☐ | ☐ |
| Quality Standards and Accreditation Team | ☐ | ☐ |
| Student Services | ☐ | ☐ |

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| Signature of Collaboration Sponsor: |  | Date: |  |
| Signature of Deputy Head of School (Education): |  | Date: |  |
| Faculty Board decision (proceed/do not proceed) and date: |  | Date: |  |