Closure or Suspension of a Minor Pathway

|  |  |
| --- | --- |
| Faculty: |  |

|  |
| --- |
| This form should be completed for proposed Minor Pathway closures or suspensions. |

**Stage 1: Proposal to close or suspend a Minor Pathway**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Are there students enrolled on this Minor Pathway? | | | **Yes/No** |
|  | *If the answer to 1a is no, then this question is not applicable*  Is the intention to ‘teach out’ all students currently enrolled on this Minor Pathway? | | | **Yes/No** |
|  | *If No, please complete Stages 1, 2a and 3 of this form.*  *If Yes, please complete Stages 1, 2b and 3 of this form.*  *If there are no students enrolled on this pathway, please complete Stages 1, 2b and 3 of this form.* | | | |
|  | Minor Pathway Title | |  | |
|  | Minor Pathway Code | |  | |
|  | Is this a proposal to **close** or **suspend** a Minor Pathway? | | **Close/Suspend** | |
|  | In which Faculties is the Minor Pathway offered as part of a Major programme? Please provide a list of all affected programmes as an appendix | |  | |
|  | Date of last registration to the Minor Pathway | |  | |
|  | Date of most recent Minor Pathway specification approval | |  | |
|  | Proposed date of closure/suspension (assuming progression and completion within normal timescales) | |  | |
|  | Proposed date of closure/suspension (assuming progression and completion delayed by repeating students) | |  | |
|  | Is this Minor Pathway being replaced? *(If Yes, provide further details)* | |  | |
|  | Proposed date when recruitment will be resumed (for suspensions) | |  | |
|  | Number of students currently registered on the Minor Pathway (by each part/year). List number of students not FTE. | |  | |
|  | Are there any applicants, offer holders or deferred offer holders for the intake affected by this proposal? If yes, how many? | | **Yes/No** | |
|  | Are other faculties are involved in delivering the Minor (e.g. shared teaching)? | | **Yes/No** | |
| *If YES, please provide further details here* | | | | |
|  | | Is there any external impact – e.g. collaborative provision, accreditation, comments from external examiners – from the closure of this Minor Pathway? | **Yes/No** | |
| *If YES, please provide further details here* | | | | |
|  | | What are the key reasons why the University of Southampton should close or suspend the Minor Pathway? |  | |

**Stage 2 (a): Consultation and Recommendations**

|  |
| --- |
| Stage 2 (a) is to be used only when a Minor Pathway is not being ‘taught out’ and registered students will be affected. |

1. **Consultation with other Programmes & Faculties**

|  |
| --- |
| **Please provide details of the consultation process that has been conducted (include date of discussion, name and position of those in attendance from other Programmes/Faculties).**  **Outline the impact that the Minor Pathway closure or suspension will have on the provision to other students within the University of Southampton.** |
|  |

1. **Consultation with students**

|  |
| --- |
| **What consultation has taken place with students who will be affected by the closure of the Minor Pathway?**  *Please include the date of meetings, numbers of students present and details of any course/ Academic Unit /Faculty student representatives who attended the meeting. Do not identify the students attending by name. Append anonymised notes from the meeting/s to this form. Students attending meetings should be informed that their comments will not be attributed.* |
|  |
| **Confirm that the issues raised at these meetings have been formally discussed at SSLC meetings (include date) and insert the extract of the minutes(s).** |
|  |

1. **Consultation with internal stakeholders**

|  |
| --- |
| **Have you consulted/notified internal stakeholders about the proposed closure or suspension? What feedback has been given by those consulted?**  *The Director of Minor Pathways (or person leading on Stage 2 of this process) should decide which of the following need to be consulted or notified about the proposal: iSolutions, ILIaD (including licences) and local learning and teaching staff (where applicable), Library, Student Services, Student and Academic Administration (timetabling/visas), Strategy and Planning, Communications and Marketing, International Office, Human Resources.* |
|  |

1. **Advice from Legal Services**

|  |
| --- |
| **If students will be unable to complete the Minor Pathway on which they are enrolled, advice from Legal Services must be obtained. What advice has been given? What is the mitigation for the impact on current students?** |
|  |

1. **Support to students**

|  |
| --- |
| **What are the plans to support students currently enrolled on the Minor Pathway?** |
|  |

**Stage 2 (b): Notification**

|  |
| --- |
| Stage 2 (b) is to be used only when a Minor Pathway is being ‘taught out’ and no registered students are affected. |

**Confirm that you have notified the following stakeholders of the Faculty’s intention to close the Minor Pathway.**

|  |  |  |
| --- | --- | --- |
| a | All affected Faculties (through the Faculty Academic Registrar) |  |
| b | Admissions Office (SAA) |  |
| c | Communications and Marketing |  |

**Stage 3: Approval of closure or suspension of a Minor Pathway**

1. **Consideration by Faculty Programmes Committee**

|  |  |  |
| --- | --- | --- |
| Date of consideration by Faculty Programme Committee | |  |
| File reference of relevant minute: | |  |
| Confirmation that that all stages of the closure or suspension of a Minor Pathway process have been completed appropriately | | **Yes/No** |
| Confirmation that approval has been received from other faculties | | **Yes/No** |
| Confirmation that a clear plan for teaching out the minor has been agreed | | **Yes/No** |
| Confirmation that that any conditions set and/or amendments required by the Faculty Executive Group (or equivalent) have been met | | **Yes/No** |
| Decision: (delete as appropriate) | **Approve closure/suspension of Minor Pathway**  **Reject closure/suspension of Minor Pathway**  **Revise proposal and resubmit to FPC** | |

1. **Consideration by Faculty Executive Group (if required)**

|  |  |
| --- | --- |
| Confirmation that FEG endorses FPC’s decision | **Yes/No** |

1. **Signature**

|  |  |
| --- | --- |
| Signature of Associate Dean (Education and the Student Experience) from the Lead Faculty |  |

**The CQA Team Leader must now inform AQSC of the decision by emailing** [**qsa@soton.ac.uk**](mailto:qsa@soton.ac.uk)**.**

1. **Internal Communications**

|  |  |
| --- | --- |
| Once approval to close or suspend a Minor Pathway has been granted, the Lead Faculty’s Faculty Academic Registrar should notify the following people about the decision. Confirm below that this notification has taken place | |
| Relevant teams within the Faculty | **Yes/No** |
| The relevant PSRB/s (where applicable). | **Yes/No** |
| The Lead Faculty’s CQA Team Leader should update the Curriculum Manager system. | |
| Curriculum Manager System updated | **Yes/No** |

If FPC approves the proposed closure and once internal communications have been completed, the CQA Team Leader must email the completed form to [qsa@soton.ac.uk](mailto:qsa@soton.ac.uk) with the subject heading *Minor Pathway Closure* and with a request that the closure be noted by AQSC.