Scientist Training Programme: change notification

*A separate form must be completed for each NSHCS accredited programme*

|  |  |
| --- | --- |
| **Section 1**  **The Programme** | |
| **Name of education provider** |  |
| **Programme title** |  |
| **Contact details** | |
| **Name** |  |
| **Job title** |  |
| **Telephone number** |  |
| **Email address** |  |

|  |
| --- |
| **Section 2**  **Proposed change(s)**  **Indicate which aspects of your programme will be affected by the change(s).** |
| 1. Academic Content 2. Teaching Method(s) 3. Admissions 4. Programme management 5. Programme resources 6. Curriculum 7. Assessment 8. Other (please state) |
| **Provide a detailed description of proposed change(s). Please relate these to the accreditation standards for STP.** |
|  |

|  |
| --- |
| **Section 3**  **HEI internal process** |

**Details of university approval process including dates of meetings.**

|  |
| --- |
|  |

When do you wish to introduce any change(s)? (specify academic year)

|  |
| --- |
|  |

**Documentation: provide electronic copies of the change documentation and list here the documents you have attached.**

|  |
| --- |
|  |

|  |
| --- |
| **Section 4**  **Discussion with Stakeholders** |

Provide details of your discussions with stakeholders

|  |
| --- |
|  |

|  |  |
| --- | --- |
| **Submitted by** | |
| Name |  |
| Job title |  |
| Date |  |