**Articulation Proposal Form (Internal Use Only)**

**Stage 1**

**Part 1 Articulation Proposal Form** must be completed by, or in consultation with the Vice-Dean International (VDI). Part 1 of the form provides an overview of the proposed partner. It is designed to gather sufficient information to support an evaluation of the articulation arrangement proposed. Part 1 should be submitted with Non-Academic Articulation Risk Assessment Form and sent to **partnerships@brunel.ac.uk**:

**Stage 2**

**Part 2 Outcome of Preliminary Evaluation** is completed by the Vice-Provost International and Academic Partnerships. The evaluation outcome may include a request for further information and/or a request to complete a Due Diligence Form. The Proposer is invited to comment on the evaluation outcome.

**Stage 3**

Subject to a successful Stage 2 outcome, **Part 3 College Approval Form – Curriculum Mapping Forms(s)** and the Academic Risk Assessment Form is completed by the VDI and/or academic department representative with reference to the University’s [Exemption Policy](https://students.brunel.ac.uk/documents/Policies/Exemptions-Policy.pdf) (Pp-1-8). Part 3 is designed to: **(1)** map the credit equivalence and the leaning outcomes of the external programme(s) against the requirements of the proposed BUL programme(s); **(2)** record the College’s approval of the articulation; and, **(3)** carry out an academic risk assessment on the basis of the mapping carried out and set out any mitigations needed to support students. The College Approval Form, Curriculum Mapping Form(s), and the Academic Risk Assessment Form and copies of the curriculum used should be submitted to: **partnerships@brunel.ac.uk**

|  |  |  |
| --- | --- | --- |
| **Part 1** Articulation Proposal FormNon-Academic Risk Assessment Form | Submitted by (Name) |  |
|  | Date of Proposal | Click or tap to enter a date. |
|  | Date Received (GEO) | Click or tap to enter a date. |
|  | Reviewed by (Name): |  |
| **Part 2**Outcome of Preliminary Evaluation | Completed by |  |
|  | Date Completed | Click or tap to enter a date. |
|  | Proposal Outcome | Choose an item. |
| **Part 3** College Approval FormAcademic Risk Assessment FormCredit Mapping FormLearning Outcomes FormCurriculum Documentation  | Completed by |  |
|  | Date Submitted | Click or tap to enter a date. |
|  |  |
| **GEO use only** | Date Received (GEO) | Click or tap to enter a date. |
|  | Partner Details Form |[ ]  Click or tap to enter a date. |
|  | Recorded on MoveOn |[ ]  Click or tap to enter a date. |

**Part 1 Articulation Proposal Form**

|  |
| --- |
| **BUL Contact Details** |
| College | Select College. |
| College Vice-Dean International | **Name:****Title:****Email:** |  |
| Select Directorate and Department | Select Directorate. | Choose an item. |
| Professional Department Proposer (if applicable) e.g. ISR, UK Recruitment | **Name:****Title:****Email:** |  |
| Global Engagement Partnership Lead (if applicable) | **Name:****Title:****Email:** |  |
| **Proposed Partner Details** |
| Provider Name |  |
| Provider Details | **Name:****Address L1:****Address L2:****Address L3:****Post Code****Country****URL** |  |
| Provider Contact Details (please include professional designation, e.g. Prof or Dr) | **Name****Title****Job Title****Department****Email** |  |
| **Proposed Partner Information** |
| **Type of Provider** | **Educational Oversight (or recognition overseas – See**[enic.org.uk)](https://www.enic.org.uk/) | **Company Number: UK/International**[GOV.UK Company Register](https://find-and-update.company-information.service.gov.uk/) |
| Choose an item. | Choose an item. | Click or tap here to enter text. |
| Please provide summary details of other educational oversight and accreditation as appropriate  | Attached [ ]  |
| United Kingdom Visa and Immigration (UKVI) [**UK Sponsor Register of Student Sponsors**](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1034421/2021-11-18_-_Student_and_Child_Student.csv/preview) |
| UKVI Sponsor (Yes/No) | **UKVI Sponsor Type** | **UKVI Sponsor Status** |
| Choose an item. | Choose an item. | Choose an item. |
| Please provide ranking, and/or national league table position (overall and subject-specific ranking if available) |  |
| Please provide information about any intermediaries *(e.g. agent)* and their role (if applicable) |  |
| Previous Connection with BUL *(e.g., existing agreement and/or alumni in senior positions; joint publications; etc)* | Choose an item. |  |
| **Proposed Partner Details** |
| Partnership Type | Agreement Type *e.g. progression is for Year 1 Only, Advanced Entry is for Year 2 or 3.* **Please complete a Progression Proposal Form for Year 1 Admission** | Proposed Entry Level |
| Choose an item. | Choose an item. | Choose an item. |
| How does the proposed partnership align to the objectives of the University’s International Strategy  |  |
| Please provide indicative enrolment numbers (recruitment rationale) and a summary of the key benefits | Choose an item. |  |
| Please comment on any proposed risk mitigation and measures that may be required |  |
| **Programme Information** |
| Please provide a summary of the external course(s) and outline the academic rationale for the proposed BUL level of entry. Please attach a copy of the curriculum to be mapped. | Attached [ ]  |
| Please indicate the admissions requirements for the external course(s) at the External Provider, and confirm that they meet admission requirements for BUL FHEQ Level 4 Programme [Admissions Requirements](https://www.brunel.ac.uk/international/yourcountry) |  |
| Please indicate the suggested BUL Programme(s)s for Advanced Entry  |  |
| Please indicate what preparation students will receive for study in the UK and at BUL |  |

**Part 2 Outcome of Preliminary Evaluation - Articulation**

|  |
| --- |
| **Recommendations** |
| Approval | Partnership Type (Confirmation) | Assessed Risk Level |
| Choose an item. | Choose an item. | Choose an item. |
| Reason for Rejection |  |
| Evaluation Comments |  |
| Approval by the Vice Provost - International and Academic Partnerships |  | Click or tap to enter a date. |
| Response to Evaluation Comments (to be completed by proposing College) |  |
| College/Department Representative | **Name:****Title:****Email:** | Click or tap to enter a date. |

**Part 3 College Approval Form – Curriculum Mapping**

|  |
| --- |
| **Mapping and Mapping Approval** |
| Please complete the Credit and Learning Outcome Mapping tables below for each BUL programme, setting out the credit equivalence and learning outcome to be recognised with reference to the University’s [Exemption Policy](https://students.brunel.ac.uk/documents/Policies/Exemptions-Policy.pdf) pages 3-8. |
| **Summary of BUL Programmes**  |
| Please provide any additional comments regarding the proposed BUL programmes and the mapping of learning outcomes and/or credit equivalencies. |  |
| Please provide an indication of academic achievement required for admission to BUL (summary) e.g. grade achievement, EFL Proficiency |  |
| **Risk Assessment and Mitigation** |
| Please indicate the key academic risks associate with the proposed articulation and any risks mitigations/measures to be taken if the risk profile is greater than 15 (HIGH) ***Please complete the Academic Risk Assessment Form*** |  |
| **Additional Comments**  |
| Please provide any additional information or comments in support of this proposal |  |
| **College Approval** |
| **Title** | **Signature** | **Dates** |
| College Vice-Dean International |  | Click or tap to enter a date. |
| College Education Manager |  | Click or tap to enter a date. |

**Curriculum Mapping Form - Credit Equivalency Mapping**

|  |  |
| --- | --- |
| **External Institution/Provider Name** |  |
| **External Institution/Provider Course** |  |
| **Date of Completion** | Click or tap to enter a date. |
| **Module title** | **Module Credits** | **Brunel Credit Equivalency** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| **Total Credits** |  |  |

**Curriculum Mapping Form – Learning Outcomes Mapping**

|  |  |
| --- | --- |
| **Date of Completion** | Click or tap to enter a date. |
| **Brunel University London** | *Add Institution/Provider Name* |
| *Add BUL Programme Title* | *Add Institution/Provider Programme Title* |
| **Level** | **Programme Learning Outcomes** | **Module/s where learning outcomes is assessed (including module title and specific learning outcomes)** |
| Choose an item. |  |  |
| Choose an item. |  |  |
| Choose an item. |  |  |
| Choose an item. |  |  |
| Choose an item. |  |  |
| Choose an item. |  |  |
| Choose an item. |  |  |
| Choose an item. |  |  |