

Thank you for enquiring about institutional approval and programme approval by the University of Chichester. We will use this form to assess whether or not to progress your enquiry, so please make sure you give us all the relevant information and return the form by email to Chris Dancer, Head of Academic Partnerships at [c.dancer@chi.ac.uk](mailto:c.dancer@chi.ac.uk)

For more information about the institutional approval and programme approval processes, please visit <https://www.chi.ac.uk/collaborate/partnerships-and-services/academic-partnerships/>

This document is intended to be filled out electronically. Please type in the boxes provided – they will expand to accommodate your text.

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| **Your Contact Details** | |
| Name of enquirer: |  |
| Title: |  |
| Tel (and country code): |  |
| Email: |  |
| **Details of Institution to be Approved** | |
| Name of institution: |  |
| Full address of institution: |  |
| Website: |  |
| When founded: |  |
| Professional Standing and Recognition | Accrediting bodies: |
| Any additional Information |  |
| **For overseas institutions only:** | |
| Is the institution recognised by your Government? |  |
| What, if any, are the specific in country requirements or restrictions associated with operating with a partner in your particular geographical area |  |

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| **Type of Institution to be Approved** | | |
| **Type of institution (please tick):** | | **Subject Specialism(s) if any:** |
| Higher education institution/ University (please specify) |  |  |
| College |  |  |
| Professional body |  |  |
| Corporate organisation |  |  |
| Other |  |  |
| **Any additional details about the type of institution:** | | |
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| **Institution Status and Management** | | |
| Status (private, public, etc.) |  | |
| Legal status  (with any company or charity registration number) |  | |
| Governance and management structure  (shareholders/  promoters) |  | |
| **Sources of Funding** | | |
| **Providers in England:** | | |
| **Is your institution registered with the Office for Students? If not, do you plan to register with the Office for Students? Please provide details as appropriate.** | | |
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| **All providers:**  **What is the main source of funding for the institution?**  **If privately funded, what are the main sources (students’ fees, donations, endowments, corporate funding, etc.)? please advise if the institution is profit-making** | | |
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| **Student Profile** | | | |
| Total number of students in the institution |  | | |
| Total number of students on HE programmes |  | | |
| Home students |  | | |
| International students |  | | |
| FT (Numbers or %) |  | | |
| PT (Numbers or %) |  | | |
| International Recruitment Regions/Countries |  | | |
| If you are based in the UK and recruit international students do you currently hold a UKVI Licence? If you no longer hold your Licence, when did you surrender it? |  | | |
| Please provide details of your Student Recruitment Strategy  (use of recruitment agents, contacts, institutional links) |  | | |
| **Staff Profile** | | | |
| What is the total number of academic staff in the institution? |  | | |
| What is the general level of qualifications of the academic staff? |  | | |
| What is the ratio of full-time and part-time staff? |  | | |
| If most academic staff are part-time, is this their main employment? |  | | |
| **Current Higher Education Programmes** | | | |
| Approximately how many current HE programmes does the institution provide? |  | | |
| What are the main subject areas of these HE programmes? |  | | |
| Which awards do these HE programmes lead to? |  | | |
| **Facilities – please provide a brief overview** | | | |
| Teaching space |  | | |
| IT facilities |  | | |
| Staff resources |  | | |
| Student resources |  | | |
| Library and learning resources |  | | |
| Additional |  | | |
| **Current or Previous Partnership Arrangements** | | | |
| Is the institution currently approved/validated by a UK university? If so, which? |  | | |
| Does the institution have any other validation arrangements? If so, please give details |  | | |
| If there are current validation arrangements, is it intended to maintain validation through the existing university(s) or to bring all HE programmes into University of Chichester approval? |  | | |
| Does the institution have any other Higher Education Partnership arrangements (e.g. Franchising, Articulation Agreements)? If so, please give details |  | | |
| As part of the approval process we will seek references from previous partnering Institutions /Universities.  Please provide the contact details for any previous or current partners that we can contact for a reference.  This information will be used as part of the decision-making criteria for your application  Please indicate when we may approach your referees (satisfactory references are a condition of approval) | Contact name:  Contact number/email address:  Name of Partner institution:  Type of partnership arrangement: | Contact name:  Contact number/email address:  Name of Partner institution:  Type of partnership arrangement: | Contact name:  Contact number/email address:  Name of Partner institution:  Type of partnership arrangement: |
| **Safeguarding** | | | |
| Does anyone associated with the institution in any capacity (e.g. staff, student, governor, trustee, volunteer) currently or in the past, have any investigation or allegation against them (substantiated or otherwise) of abuse or neglect against a child or vulnerable adult?  Yes/ No | Choose an item. | | |
| If Yes, please note that a separate confidential discussion will need to take place |  | | |
| **Legal Proceedings** | | | |
| Is the institution currently involved in any legal proceedings? |  | | |
| **Reasons for Seeking Institutional Approval/Validation** | | | |
| What are your reasons for seeking institutional approval with the University of Chichester? |  | | |
| Do you have any current links with the University of Chichester? If so, which faculty/unit/region and in what capacity? |  | | |
| How did you hear about the University of Chichester? |  | | |
| Expansion plans (including academic, infrastructure and resource related developments) |  | | |

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| **Please use this section to provide information as to how the partnership might be seen to align**  **with the University’s** [**‘Guiding Principles’ as they relate to new partnerships from the University website**](https://www.chi.ac.uk/collaborate/partnerships-and-services/academic-partnerships/)**.** |
| **Institutional Reputation:** |
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| **Visibility & Impact** |
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| **Growth and Sustainability** |
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| **Enhancement** |
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| **Diversification and Innovation** |
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| **Proposed Programmes** | | | | | | | | | | |
| **Please give details of all proposed programmes you wish to be validated below.**  **Please consult the** [**Quality and Standards Handbook section E**](https://www.chi.ac.uk/app/uploads/2021/11/QSHB-Section-E-Academic-Partnerships-21-22.pdf) **with particular reference to Page 5-6 for Programmes we are able to validate before completing this form.**  **Please indicate in the “Location” column if the course will be delivered at more than one site/campus and the location of sites/campuses.** | | | | | | | | | | |
| **Programme Title** | **Leading to Award(s)** | **Mode of Study\*** | **Mode of teaching\*\*** | **Duration** | **Location** | **Proposed**  **Start Date** | **Language of teaching** | **Language of assessment** | **Number of intakes per year** | **Projected number of student registrations per intake** |
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\*possible options can include part-time (PT) or full-time studies (FT), accelerated.

\*\*possible options can include classroom based face-to-face teaching, blended or on-line delivery.

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| **Submission** | |
| **Please confirm that all the information provided on your enquiry and application is true and correct** | **Yes / No** |
| **Submission date for your application:** |  |

Please return all completed forms by email to  
Chris Dancer, Head of Academic Partnerships at [c.dancer@chi.ac.uk](mailto:c.dancer@chi.ac.uk)