

**CPD Form 1: Request for Credit-bearing module as CPD**

To be read in conjunction with the *Guide to CPD* to be completed by the School/Institute making the request.

**A.** For **existing credit-bearing module to be considered as part of the** [**Postgraduate Professional Development award**](https://www.worcester.ac.uk/courses/postgraduate-professional-development?option=19067d51-fb14-5432-ad01-e4ce65d779ca)**,** please complete the details below and having been signed by your Head of School and reviewed by the Postgraduate Professional Development award Course Leader submit to the School of Nursing and Midwifery Quality Administrator for consideration at the next available SN&M CMAS\*. Please also provide a completed *CPD Form 2: Website – module information form* for each module.

**B/C.** For **new standalone credit-bearing module or change to existing module to be considered as part of CPD offer:** please complete the details below and having been signed by your Head of School and reviewed by the Postgraduate Professional Development award Course Leader (where relevant) submit to your College Executive. Please also provide a completed *CPD Form 2: Website – module information form* for each module, which provides relevant detail to inform College Executive decision to proceed with proposal.

Once approved to proceed by your College Executive, this completed form, the CPD Form 2 Website – module information form, new or amended Module Specification and APPG Costings Form (available from, and completed in conjunction with, Finance), should be submitted to your School CMAS or Extra Ordinary School Sub-Group (where earlier meeting is required to respond to market demand).

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| **1. School/Institute** |  |

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| --- | --- |
| **2.** **Module code/title** |  |

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| --- | --- |
| **3. Lead Contact** |  |

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| --- | --- |
| **4. Module Leader** |  |

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| **5. Proposal Summary** | **Select one category:** |
| **A. No change proposed to an existing approved module** | [ ]  Yes (go to Q.5) |
| **B. Change to existing, approved module to run module as separate cohort** | [ ]  Yes (complete below) |
| **If Yes to B, provide details of proposed change** (eg. delivery pattern)**:** |  |
| **C. New standalone module** | [ ]  Yes (complete below) |
| **If Yes to C, provide rationale for suitability as standalone module and employer market:** |  |

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| **5. Is this module for inclusion in the Postgraduate Professional Development award?** | [ ]  Yes (complete below) | [ ]  No (got to Q.6) |
| **If Yes, confirm which Postgraduate Professional Development award LOs the module meets:** |  |
| **If Yes, supporting statement by** **Postgraduate Professional Development award Course Leader****:** |  |
| Signature: |  | Date: |  |

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| **6. A** **CPD Form 2: Website – module information has been completed and provided for each module** | [ ]  Yes |

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| **7. All Categories (A,B,C): Head of School sign-off** |
| **Name of Head of School:** |  |
| **Signature:** |  |
| **Date:** |  |
| **8. Category B/C: College Executive sign off** |
| **Name of PVC (academic):** |  |
| **Signature:** |  |
| **Date:** |  |

**Next steps (see flowchart in Annex A of Guide to CPD):**

1. Where existing module with no change proposed, School of Nursing and Midwifery Quality Administrator informs Module Leader & PD award CL of decision.

B/C. Where new standalone module or change proposed to existing module once approved by College Executive, report to next relevant School/Institute CMAS for consideration. Provide: this CPD 1 form, CPD Website – module information form, Module Specification and APPG Costings Form (available from, and completed in conjunction with, Finance)

\* The Postgraduate Professional Development award sits across the University but is located in the School of Nursing and Midwifery for operational management and management of quality assurance, hence where an existing approved module with no change is proposed as an optional module for the award the proposal should be submitted to the School of N&M CMAS.