# Collaborative Additional Site Business Case

This form should be completed by the Partner with support from the Head of Academic Partnerships and Short courses and / or the School Head of Collaborative Partnerships or their nominee in the following scenarios:

1. When an existing collaborative academic partner moves to a new site
2. When an existing collaborative academic partner wishes to deliver London Met provision at an additional site.

Once all necessary sign-offs are recorded on the form, please submit the form to the AQD Partnerships Team –[aqdpartnerships@londonmet.ac.uk](mailto:aqdpartnerships@londonmet.ac.uk).

## Section A – Collaborative Academic Partner Details

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| 1. **Name of Collaborative Academic Partner** |  |
| 1. **Registered address of Partner** |  |
| 1. **Website address** |  |
| 1. **Collaborative Academic Partner Representative details** | Name:  Telephone:  Email: |
| 1. **Institutional approval date** |  |

## Section B – Details on Current Provision

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| 1. **School(s) currently in partnership with the Collaborative Academic Partner e.g. Guildhall School of Business and Law** | 1.  2.  3.  4. |

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| 1. **Teaching location address** | **University site approval date** | **Course Title** |
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## Section C – Proposed new or additional teaching site(s) or campus

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| 1. **Please provide a rationale for delivering London Met courses at the new or additional site/ campus** |  |

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| 1. **Teaching location address** | **Course(s) to be delivered at the proposed new site or campus** | **Proposed start date** |
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| 1. **Legal status and ownership of the new site or campus** |  |
| 1. **Arrangements for lease of the new site or campus (if not owned by the collaborative academic partner)** |  |
| 1. **Insurance arrangements which will be in place in respect of the delivery centre’s responsibilities and liabilities towards students (i.e. public liability and professional indemnity insurance)** |  |
| 1. **Details of the management and organisational structure of the new site or campus and relationship with other site(s)** |  |
| 1. **Description of the physical and human resources available at the new site or campus, including student support services** |  |

## Section D – Quality assurance

Please explain the quality assurance arrangements that will be in place at the proposed new or additional teaching site/ campus.

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| 1. **Curriculum development, where applicable** |  |
| 1. **Teaching, learning and assessment methods** |  |
| 1. **Feedback to students on assessed work** |  |
| 1. **Tracking student progression and achievement** |  |
| 1. **Monitoring and review of courses** |  |
| 1. **Collection and evaluation of student feedback** |  |
| 1. **Management and administration of the assessment process** |  |
| 1. **Student complaints and academic misconduct** |  |
| 1. **Student engagement** |  |
| 1. **Maintenance of student records** |  |
| 1. **Staff appointment, monitoring and development** |  |

## Section E – Financial impact on London Metropolitan University

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| **Please explain any additional financial impact on the University and/or School(s) if the additional or new site was to be approved.** |
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## Section F – Sign off

By signing the document you are confirming that all sections have been fully completed, resources fully considered and impacted departments have been consulted.

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| Partner Representative: | Name:  Signature and date: |
| Head/Dean of School Name: | Name:  Signature and date: |
| School SMT/SLTQC | Meeting Date: |
| Partnerships Office Representative | Name:  Signature and date: |
| Finance Department: | Name:  Signature and date: |
| Academic Registry (Academic Quality and Development): | Name:  Signature and date: |
| School Head of Collaborative Partnerships Name: | Name:  Signature and date: |