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**Cluster Annual Narrative**

*NB: Please delete any guidance text in blue before submitting the form*

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| **Section A: Cluster Details** | |
| **Cluster** |  |
| **Courses in Cluster:** |  |
| **School(s)** | CASS  GSBL  SCDM  SHSC  SSPR  SSSC |
| **Head of Subject (or nominee** |  |

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| **Section B: Cluster Annual Narrative Statement** |
| *Please use this box to comment on the following themes:*   * *Course and Student Context* * *Progressing Through a Positive Learning Environment* * *Positive Student Outcomes* |

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| **Section C: Cluster Development** |
| *Please use this box to provide a commentary on the development of the cluster area as a whole throughout the period in question.* |

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| **Section D: Progress against Key Metrics** |
| *Please use the three years of data available in the Continuous Monitoring Report in Business Objects to provide a commentary on key metrics.* |

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| **Section E: Sign Off** | |
| By signing this document Heads of Subject are confirming that the all sections have been fully completed. | |
| Head of Subject name: | Signature and Date: |

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