

COURSE DETAILS

Course code:

Year:

- Semester: Semester One Semester Two
 Double Semester Summer School
- Mode: Internal Distance Learning
- Campus: Auckland Manawatū
 Wellington

STUDENT DETAILS

Surname: _____

Forename: _____

Student ID: (if known)

Programme: _____

Major: _____

Minor: _____

1. Special Topic title

- a. Special Topic title (fully descriptive):

or

- b. **AN EXISTING COURSE:**

Title: _____

Is there an exam? Yes No. If 'Yes', is the exam substantially similar to other offerings? Yes No. If 'No' – please, explain:

or

- c. **A MODIFIED VERSION OF AN EXISTING COURSE**

Title: _____

Is there an exam? Yes No. If 'Yes', is the exam substantially similar to other offerings? Yes No. If 'No' – please, explain:

2. Assessment details and learning outcomes

- a. Learning Outcomes and Assessment match existing course number and title as listed above:

or

- b. **1. LEARNING OUTCOMES (LOs)**

1: _____

2: _____

3: _____

4: _____

5: _____

6: _____

7: _____

8: _____

9: _____

2. ASSESSMENT	LO assessed	Week Due	Weighting
1:			
2:			
3:			
4:			
5:			
6:			
7:			

Staff member responsible: _____

Teaching workload splits: _____

What course or requirement will this course replace (ie in Qualification Schedule): _____

3. Justification for use of Special Topic

4. Student acceptance

PLEASE ADD THE ABOVE COURSE TO MY CURRENT ENROLMENT. I CONFIRM I HAVE READ AND ACCEPT THE ABOVE LEARNING OUTCOMES AND ASSESSMENT FOR THIS SPECIAL TOPIC:

SIGNATURE OF STUDENT

Date:

Day	Month	Year

5. Academic approval

STAFF MEMBER RESPONSIBLE

Name: _____

Signed: _____

Date:

Day	Month	Year

MAJOR LEADER

Name: _____

Signed: _____

Date:

Day	Month	Year

PROGRAMME DIRECTOR

Name: _____

Signed: _____

Date:

Day	Month	Year

PLEASE RETURN THIS COMPLETED FORM TO 3StudentProgression@massey.ac.nz