***This form must be submitted to the relevant Associate Head Teaching & Learning (AHT&L) before being emailed to the Quality Team:*** [***health-quality@plymouth.ac.uk***](mailto:health-quality@plymouth.ac.uk)

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| --- | --- | --- | --- |
| **Change Proposed**  **by:** | **Name:** | **School:** | |
| **Module Code and Title or Programme Title** (if applicable) please include if there are multiple versions i.e multiple sites and Z distance learning: | | | |
| **Current Module/Programme Leader:** | | | |
| **New Module/Programme Leader:** | | | |
| **Please confirm implementation date of the module/programme leader change:** | | | |
| **Please confirm if this is a permanent change? If Not please indicate when the change will end.** | | | |
|  | | | |
| **Signed (proposer):** | | | **Date:** |
|  | | |  |
| **For completion by the Associate Head Teaching & Learning (AHT&L):**   * I confirm my approval of the proposed change(s) | | | |
| **Signed (AHT&L):** | | | **Date:** |

**Additional Notes:**

1. This form is for changes to **Module Leads and Programme Leads** only.
2. Any other minor changes should be considered by members of the Programme Committee in the **Autumn term** of the academic year *prior to* the year the changes will be implemented and be submitted by minor change form.