



## Significant Curriculum Change Proposal (SCCP)

### Section 1. Course Details

Date of SCCP:

Author of SCCP:

Course Code/Course Name:

Last Significant Change Date:

*(if less than two years, approval required from Chair AC)*

Course introduction date:

*(if less than two years, approval required from Chair AC)*

### Section 2. Overview of Proposed Changes

 Attach marked up course report to indicate proposed changes

Tick: the amendment type/s below

Addition of a unit cluster to a course.

Removal of a unit cluster from a course.

Changes to core units in a course or unit cluster.

Changes to the requirements for an award.

Removing an approved delivery mode or location.

Other

Provide a rationale for the SCCP

### Section 3. Detailed Changes


Proposed implementation date:


Is proposed implementation date within Normal University Timelines?

Yes *(complete form to end of section 5)*

No *(if no, section 6 must also be completed)*

Provide the proposed final teaching period into which the University will admit students into the existing (or existing version) course/unit cluster/offering location or mode:

 Attach current data\* on offered, admitted and enrolled student cohorts (by residency status) and the likely impact on them (\*data to be requested and provided by CIP)

 **How will the SCCP impact other courses and unit clusters at the University?**  
*(attach a course connections and links analysis report)*

**Provide any other stakeholder impacts (internal / external):**

#### Section 4. Issues and Risks

**CIP Comments (including VPSR Risk Assessment):**

**BIQ Comments (including provider default issues arising):**

#### Section 5. Recommendations and approvals

**a) Recommended by:**

|                    |      |      |
|--------------------|------|------|
| Course Coordinator | Name | Date |
| Discipline Chair   | Name | Date |
| Faculty ADE        | Name | Date |
| Faculty Exec Dean  | Name | Date |

**b) PVCAI/APG Review Comments and Outcome (including indicating support/not support of exemptions at Section 5c or Section 6 if required):**

PVCAI Date

**c) Where SCCP is < 2 years since previous SCCP/Course Accreditation:**

Chair AC Date

## Section 6. Timeline Exemptions

### Proposed Committee Dates

Faculty Board

Accreditation Committee:

Provide a rationale for the timeline exemption:

|  |
|--|
|  |
|--|

VPSR

Date

CC:

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