###### University of Essex

**Partnerships Team**

**Request for Variation(s) to the University’s Rules of Assessment**

*Please submit the completed form to the Partnerships Team (**partnerships@essex.ac.uk**) for onward submission to Partnership Education Committee for approval.*

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| **Partner Institution** |  |
| **Course Title(s)** |  |
| **Module(s) affected**Please provide module name, module code and level of study |  |
| **Date** |  |

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| **Brief description of the proposed variation(s) to the rules**For example, at Level 6 module XX 333 must be passed |  |
| **Rationale for the proposed variation**If the variation request arises from proposed changes to an existing course, please attach this form to the Course Variation Form |  |
| **Does this variation supersede a previous variation to the rules?** |  |

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| **Proposed variation supported by the relevant Head of Department / Head of HE at the partner institution** |
| **Signed**  |
| **Date**  |