

**Template for the Withdrawal of an Existing Articulation Route from XJTLU to Undergraduate Programmes at UoL**

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| **PART A: PROGRAMME/ARTICULATION ROUTE DETAILS** | | |
| 1. **Title of UoL programme:** | | e.g. BSc …. |
| 1. **Level 1 Department/School:** | |  |
| 1. **Level 2 School/Institute:** | |  |
| 1. **Other contributors from within the University of Liverpool:** | |  |
| 1. **Director of Studies:** | |  |
| 1. **Title of XJTLU programme affected by the articulation route withdrawal:** | |  |
| 1. **Academic year from which the transfer of XJTLU 2+2 students to UoL will cease** | |  |
| 1. **Rationale for withdrawal of the articulation route, including (if applicable) a ‘teach out’ strategy for remaining students on the withdrawn articulation route:** | |  |
| 1. **XJTLU agreement & approval**   Confirm that the corresponding department/school at XJTLU has been notified of the withdrawal of this articulation route? | | Yes\*  ***\**Please appendcopy of correspondence with the XJTLU academic department***.*  *This can be in the form of an email.* |
| **PART B: ENDORSEMENT/APPROVAL** | | |
| 1. **Curriculum Board endorsement** | **Chair of CB:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Signature (Chair of CB):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| 1. **Level 1 endorsement**   (for completion by the Head of Department/School) | I confirm that this proposal has been discussed with the Director of Studies and that agreement has been reached on the withdrawal of the articulation route from XJTLU.  **Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Signature**  **(Head of Department/School):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_  Second signature (if appropriate)  **Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Signature**  **(Head of Department/School):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| 1. **Faculty Scrutiny Panel approval** | **Chair of FSP:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Signature (Chair of FSP):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| 1. **Level 2 endorsement**   (for completion by the Dean of School/Institute) | I confirm that this proposal has been discussed with the Dean of School/Institute and that agreement has been reached on the withdrawal of the articulation route from XJTLU.  **Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Signature**  **(Dean of School/Institute):**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_  Second signature (if appropriate)  **Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Signature**  **(Dean of School/Institute):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_ | |