Tertiary Education Quality and Standards Agency

Registrations and Courses Group

### Application for accreditation of course or courses of study

On behalf of provider legal name, I submit an application for accreditation for the following course or courses of study under the *Tertiary Education Quality and Standards Agency Act 2011*:

* Name of proposed course
* Name of proposed course

The required information and evidence for each course included in this application is attached.

I hereby attest that, to the best of my knowledge, the information and evidence contained in this application for accreditation of the abovenamed course or courses is complete and accurate as at the date stipulated below. I understand that giving false or misleading information is a serious offence.

**SIGNED for and on behalf of** **provider legal name:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name** | **Signature** | **Position** | **Date** |
| Name | Signature | Chief Executive Officer | Click or tap to enter a date. |
| Name | Signature | Chair of the Academic Board | Click or tap to enter a date. |

**Attachments:** **(complete as applicable)**

* Attachment 1: Application evidence for Name of proposed course
* Attachment 2: Application evidence for Name of proposed course

### Attachment 1: Application evidence for provider legal name

#### TEQSA short course expedited application and assessment

|  |  |
| --- | --- |
| **Name of proposed course** |  |
| **Name and details of TEQSA accredited course and units that the proposed course is drawn from.** | *Follow the following format in your response:*1. *PROPOSED COURSE*
	* *Name of accredited source course (Course ID) and AQF level*
		+ *Name of unit 1*
		+ *Name of unit 2 etc.*
	* *Name of accredited source course (Course ID) and AQF level (as applicable, that is, if drawn from more than one accredited course)*
		+ *Name of unit 1*
		+ *Name of unit 2 etc.*
2. *PROPOSED COURSE (if application is for more than one proposed course)*
	* *Name of accredited source course (Course ID) and AQF level*
		+ *Name of unit 1*
		+ *Name of unit 2 etc.*
 |

#### Details of proposed course

|  |  |
| --- | --- |
| **Structure**Course progression | *For each proposed course, list all units in the order in which they will be delivered, and specify pre- or co-requisites and whether all units will be delivered concurrently.* |
| **Duration** |  |
| **Mode of delivery** |  |
| **Indicative AQF equivalence** | *Indicate the AQF equivalence of overall level of learning achieved.* |

|  |  |
| --- | --- |
| **Course learning outcomes** | ***Supporting attachments*** |
| *List all course learning outcomes**Include information specifying how the course learning outcomes for the proposed course are differentiated from that of the source course.* |  |
| **Details of how course learning outcomes will be assessed** | ***Supporting attachments*** |
|  |  |
| **Details of pathways to further learning or possible graduate (employment) outcomes** | ***Supporting attachments*** |
| ***Note:*** *The Undergraduate Certificate qualifies individuals with knowledge and skills for further study (in awards from AQF levels 5 to 7), professional upskilling, employment and participation in lifelong learning.* |  |
| **Provide copies of the course information that will be made available to prospective students, and detail an explanation as to how the above employment outcomes are consistent with that information** | ***Supporting attachments*** |
|  | ***Note:*** *You* ***must*** *submit draft course-specific marketing materials.* |

|  |  |  |
| --- | --- | --- |
| **Question** | **Response** | ***Supporting attachments*** |
| **Details of academic leaders with oversight for course delivery (e.g. course coordinator)** | *Name, title, position (also provide qualifications and experience if not previously provided to TEQSA).* | ***Note:*** *Optional template for abbreviated CV is available.* |
| **Do all teaching staff have experience in online delivery?** | [ ]  Yes [ ]  No |  |
| **If ‘no’, detail what support will be provided for teaching staff and students in the online delivery context.** |  |  |
| **Quality assurance: Course approval and accreditation**Has the proposed course been subject to your institutional academic oversight, approval and quality assurance controls and processes? |  | ***Note:*** *You* ***must*** *submit relevant documentation to demonstrate the internal course approval processes that the proposed course has undergone (for example, relevant meeting minutes).* |

|  |  |
| --- | --- |
| **Course admission requirements (English language proficiency)** | ***Supporting attachments*** |
| I assure TEQSA that the proposed course will be subject to appropriate admission requirements for English language proficiency consistent with the accredited course from which the units for the proposed course are drawn. |  |

|  |  |  |
| --- | --- | --- |
| **Will part or all of the proposed course be delivered by a new third-party arrangement?** | [ ]  Yes[ ]  No*If yes, confirm that a copy of the contract between the provider and the other party is provided.*  | ***Supporting attachments (if applicable)******Note:*** *Upload in Provider Portal application form section B.5.* |