**Notice of Intent – VE program approvals**

1. This form is to be completed when a College/School intends to deliver any new program or skill set.
2. The submission of this form to the AGQ (Academic Governance and Quality team) will trigger the creation of an RMIT program code and program shell in the Program Guide System (PGS). It will also trigger the setup of an ASQA delegation panel (unless an equivalent replacement program).

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| **1. Program details** | |
| **School Name:** |  |
| **Head of School or delegate:** |  |
| **National Code:** | *[insert code as listed on training.gov.au] [Not required for \*RMIT Skill Set]* |
| **National/Program Title: (For Qualification/Skill Set)** | *[insert full name of nationally recognised qualification/accredited course/skill set from Training Package or accreditation documentation]* |
| **Type of program change:** | ▢ Addition of new qualification/accredited course  ▢ Addition of new Skill Set  ▢ Non-equivalent replacement training package qualification  ▢ Equivalent replacement training package qualification  *[If equivalent replacement program this form only needs to be sent to* [*CPA@rmit.edu.au*](mailto:CPA@rmit.edu.au)*]* |
| **Delivery location:** | *[List all intended campus locations for each program plan]* |
| **Career:** | Vocational Education |
| **Delivery Type :** | Nested ▢ Sequenced ▢ or Stand alone ▢ |
| **Source of applicants** | VTAC ▢ AND/OR Non VTAC ▢ [*tick one or both boxes as applicable]* |
| **Available to International Students:** | YES ▢ NO ▢  *Information for CRICOS registration:* |
| **Eligible for VET Student Loans (VSL)** | YES ▢ NO ▢  *[Contact The Office of Vocational Education for further details* [*vocational.education@rmit.edu.au*](mailto:vocational.education@rmit.edu.au) *]* |
| **Commencement Date:** | *[Provide the semester/year of implementation i.e. when the program/plan will be first offered to students].* |
| **Program Manager:** | *[Provide the name of the staff member who will be responsible for the new program/plan].* |
| **Program Manager Contact Details:** | *[Provide telephone, email and office location].* |

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| **2. Approval** | |
| **2.1 Approval by Head of School/delegate** | |
| **Name :** |  |
| **Signature :** |  |
| **Date :** | \_ \_ / \_ \_ / 20 |
|  | |
| **2.2 Approval by Deputy PVC Learning and Teaching/delegate** | |
| **Name:** |  |
| **Signature:** |  |
| **Date:** | \_ \_ / \_ \_ / 20 |
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| **After the Notice of Intent has been approved, please email to the Academic Governance and Quality teams’ CPA and Academic Governance and Review Units at:** [**cpa@rmit.edu.au**](mailto:cpa@rmit.edu.au) **and** [**program.quality@rmit.edu.au**](mailto:program.quality@rmit.edu.au)  *[Please be aware the minimum notice period is 4 weeks]* |