Curriculum Modification Exceptions Form

Name of person co	ompleting				
form Data completed					
Date completed					
applicants/offer holders/current students					
Due sue se es el e e de	- DMD Chair	an Culaia at	T		
Programme Leader, PMB Chair or Subject Group Leader*, as appropriate (agreeing to					
change)					
Date					
By signing the form, the Programme Leader/PMB Chair/Subject Group Leader is agreeing to endorse the curriculum modification outside of the standard university timescales. Please note, this form should have been reviewed by the Development and Review Committee, alongside the Curriculum Modification Form (this may be virtual, depending on the time of year) as per the standard curriculum modification process, before being presented to the Faculty PVC Dean.					
Academic review of	comments fron	n Developme	ent and Review	Committee	
Faculty PVC Dean	<u>agreement</u>				
Name of Dean Signature					
Oignature					
The change to the curriculum is:					
Approved					
Rejected					