**ANNUAL COURSE REVIEW REPORT**

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| **COURSE INFORMATION:** | | | |
| Course code | Course Title | | Course Co-ordinator |
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| Period of review**:**  **(***1st / 2nd half session (or summer term for PGT) and academic year*) | |  | |
| No. students registering: | |  | |
| No. students withdrawing: | |  | |
| Pass Rate (%) based on first attempt and excluding any C7, NP, GC or MC: | |  | |

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| **COURSE APPRAISAL:** |
| 1. **PASS RATE:** Please provide a reflective commentary on the **pass rate** |
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| 1. **STRENGTHS**: What worked well in the course (e.g. with respect to assessment, feedback on assessment, teaching methods, opportunity to develop graduate attributes)? You should use student feedback gathered by any method, which could include the Course Feedback Form, SSLC meetings, informal feedback during classes, mid-term evaluations, as well as feedback from external examiners, Programme Advisory Boards, Professional and Statutory Bodies and the teaching team if available. |
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| 1. **WEAKNESSES**: What did not work well in the course (e.g. with respect to assessment, feedback on assessment, teaching methods, opportunity to develop graduate attributes)? You should use student feedback gathered by any method, which could include the Course Feedback Form, SSLC meetings, informal feedback during classes, mid-term evaluations, as well as feedback from external examiners, Programme Advisory Boards, Professional and Statutory Bodies and the teaching team if available |
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| 1. **IDENTIFIED GOOD PRACTICE**: Reflect on any new/innovative or particularly effective teaching or assessment methods. Indicate whether this good practice has been disseminated more widely within the School, University or outside of the University |
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| **COURSE DEVELOPMENT:** | | |
| 1. **EVALUATION OF CHANGES MADE THIS YEAR**: Evaluate any changes implemented during this year as a result of feedback from previous years. Changes made that were not successful are just as important as changes that have been successful. | | |
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| 1. **PROPOSED CHANGES FOR NEXT YEAR**: Summarise changes planned in the light of this review | | |
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| 1. **APPROVAL**: | | |
| Will approval be needed to make changes to the course using the Curriculum Management System? | YES | NO |

Signed: ..............................................................…………….. Date: ........................................

(Course Co-ordinator)

COPIES OF THIS FORM SHOULD BE:

1. uploaded to the [Quality and Planning SharePoint site](https://365abdn.sharepoint.com/projects/qacPlanning/SitePages/Home.aspx) as soon as possible following completion of the course. deadlines will be determined by the school, with an overall central deadline of **31 august** (UG) and **30 November** (PG)
2. published to students and staff via MyAberdeen
3. contribute to the Annual programme review

\* Phase Co-ordinator for the MBChB curriculum; Interdisciplinary Degree Programme Co-ordinator, or Vice-Principal (Education) where appropriate.