



New Programme Proposal Pro-forma

Institutional or applicant details

Name of Institution (and Faculty) or individual applicant:

Address:

Name of Head of Institution (Principal, Dean etc.) where relevant

Name:

Role:

Phone:

E-mail:

Name of Key Person for liaison (if different from above)

Name:

Role:

Phone:

E-mail:

Institutional or individual applicant background

Please give brief details of the context of this notification, including relevant background information on the institution: such as its history, location, facilities, related programmes where relevant or the relevant background of the individual applicant



Current Acupuncture Programme (if applicable)

Please give a brief outline of your **current** programme in acupuncture if you have one (attach additional outline curriculum information via e-mail or CD by post)

Planned Acupuncture Programme Development (please continue on additional sheets if necessary)

Please indicate:

- what is likely to be the title of the acupuncture programme
- what is likely to be the mode of study (full time, part time etc.) over what period of time
- a brief outline of the likely syllabus, or what you intend to change and develop in your current syllabus
- how many intakes do you plan per year
- how many students are you planning to take per intake.
- what is the likely location of the programme, what physical resources are you planning to have in place including the teaching clinic, size and location
- who will be involved in the development, what qualifications do they have, are you planning to make additional appointments
- when do you think you will be ready to submit documentation for provisional accreditation
- for what intake (month and year) would you hope to achieve provisional accreditation

Planned financial resources to support the course development

Please indicate how you intend to fund the planned development and at what stage you have reached in developing a business plan?

Key Issues

What do you see as the key issues for you in planning for provisional accreditation?



Commitment to Development

I confirm that, in completing this proposal, I have read and understood the Board's requirements for accreditation, including the Board's Standards for the Education and Training for Acupuncture Programmes, and that I am committed to developing the acupuncture programme with a staff team to meet these requirements.

I also confirm that I agree, on behalf of the named institution, to follow the Board's processes, including the payment of institutional fees to the Board.

Signed:

Date:

Print Name:

Role:

For Board Use:

Received:

Acknowledged by:

Date:

AC Recommendation: