**Specific Course Designation Application Form**

**Part A. Full details of higher education provider (Paragraphs 27-29)**

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| **Provider name:** |  |
| **Any other names under which the applicant operates:** |  |
| **Principal address and legal address where different:** |  |
| **UK provider registration number:** |  |
| **Is the provider registered with the Charity Commission?:** | **Yes** / **No**  (Delete as appropriate) |
| **Charity Commission number:**  (if applicable) |  |
| **Charity type:**  (where relevant) |  |
| **Is the provider under investigation?:** | **Yes** / **No**  (Delete as appropriate)  **If the provider is under investigation, it must provide a separate document providing the details of the investigation(s) including the organisation undertaking the investigation(s) and the reasons for the investigation(s).** |

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|  | **Lead institutional contact** | **Additional institutional contact** |
| **Contact name:** |  |  |
| **Job title:** | We expect this individual to be a member of the senior management team that is responsible to the governing body of equivalent for submitting the monitoring information.  All correspondence will be sent to this contact. | This contact will be copied into all correspondence and may have some delegated responsibilities for submitting the monitoring information. |
| **Telephone number:** |  |  |
| **Email address:** |  |  |

Providers must note the following when completing **Parts B and C**:

* Medr will expect the provider to have staff available to discuss the application;
* Providers may be required to submit further evidence to supplement the application information, which may result in delays to the application. Medr officers will support providers through this process;
* Once designated, providers are required to notify Welsh Government and Medr of changes to their position during their period of designation, including governance issues and serious incidents (i.e. incidents relating to quality, finance and governance) that have been raised with their primary regulator, the authorities or awarding body;
* Providers need to be aware that we do not have access to or retain information that has been submitted to other regulatory or public bodies. Any relevant information submitted to other organisations may be submitted to us as evidence for this process.

**Part B. List of courses to be designated for students support including relevant information (*Paragraphs 30-46*)**

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| **Course list:** | All necessary course information should be completed in the excel table attached at **Annex C**.  This course list should include all courses that the provider wishes to have designated.  Courses must be listed separately for each location. |
| **Control of the course:** | The provider should submit documentation that evidences it is in control of the courses it wishes to have designated for student support. This evidence should either be in the form of confirmation that the provider continues to have degree awarding powers, has courses validated by a recognised body or delivers courses approved by either Pearson or the Scottish Qualifications Authority.  We expect the documentation to evidence that the awarding body will award the qualification up to the end of the first complete academic year that the course will designated. If the documentation does not evidence this then an explanation must be provided in this section of the application form. |

**Part C. The provision offered by the provider is of an adequate quality   
(*Paragraphs 47-55*)**

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| **The provider must include a statement confirming that it has got internal quality assurance procedures in place for all its education:** | **The statement should be set out in this section of the form.**  It will assure us that the provider has effective internal quality assurance procedures in place for all its education. |
| **The provider must provide a link to its most recent external quality assurance review and any recent monitoring reports, preferably a QAA review and associated monitoring reports:** | **Links to its most recent higher education review by the Quality Assurance Agency for Higher Education (QAA) and any recent monitoring reports by the QAA should be included in this section of the form.**  In order for Medr to have assurance that the requirements of the Quality Assessment Framework are met, we will require all providers to have undertaken an external quality assurance review. The preferred method for this is a review by the Quality Assurance Agency for Higher Education (QAA). Higher education providers applying for their courses to become specifically designated, should have had at least one successful external quality assurance review by the QAA in the last four years; our expectation is that this would be the Gateway Quality Review: Wales method.  Where this is not possible, providers should discuss with Medr how to demonstrate the quality of the course (evidence of other QAA reviews may be accepted, for example). For example for English providers, this could include meeting the ongoing conditions of registration with the Office for Students. |
| **The provider must include a statement confirming that the governing body, or equivalent, has:**   * **received a report taking account of the external quality assurance review, and** * **assurances that an action plan has been put in place and implemented as appropriate, in partnership with the student body.** | **The statement should be set out in this section of the form and explicitly reference the role of the governing body and the partnership with the student body.** |
| **The provider must have published an appropriate high-level statement on how the students’ interests are protected:** | We expect a link to be provided in this section of the form to where this has been published. |
| **Have any of the courses included in part B of the application been accredited by a Professional Statutory and Regulatory Body?:** | **Please confirm if the course is not accredited by a Professional Statutory and Regulatory Body.**  The provider must include all relevant links in this section of the form. |

**Part D. The provider is financially viable (*Paragraphs 56-69*)**

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| **The institution’s corporate group structure, including details of all group companies or organisations (including subsidiaries, parent/holding companies and associate or joint ventures).** | **Any narrative to support the documentation should be completed in this section.**  Reference should be made to the title of the documents submitted**.** |
| **Last 3 years’ audited financial statements.** | **Any narrative to support the documentation should be completed in this section.**  Reference should be made to the title of the documents submitted. |
| **Financial forecasts that cover the estimated current year, together with at least three year forecasts (with the support of a parent company guarantee, if necessary).** | The forecasts should comprise a profit and loss / income and expenditure statement, a balance sheet and a cash flow statement and be supported by student number assumptions.  Where estimates and forecasts have been prepared for other purposes and, for example, the estimated year end has now ended, or the first forecast year is now the current year, we would in addition request management accounts indicating the updated position. Please ensure that three forecast years remain in order that we can assess financial sustainability over the three year undergraduate cycle.  Forecasts should also be supported by a commentary on assumptions made in the forecast and how financial risks are managed. In the current circumstances, this should set out clearly the underlying assumptions affecting student numbers, aligning with the current economic situation and a rationale for any growth.  Where the provider submits forecasts to Welsh Government or the Office for Students, this information can be submitted to us in the same format. |
| **Financial strategy and narrative.** | **Separately, we require an explanation of the assumptions under-pinning the forecast and how the provider plans to achieve the significant forecast movements, along with an explanation of significant changes from the most recent audited statements. This will allow us to assess the reasonableness of the “strategy”.**  **Any narrative to support the documentation should be completed in this section.**  The strategy should include how the institution assesses and reviews its sustainability, including the use of sustainability assessments.  Reference should be made to the title of the documents submitted. |
| **Where available, the last 3 years’ internal audit annual reports and/or audit committee annual reports. Alternatively any external reports that provide assurance over core financial controls, risk management processes and give an opinion on overall internal control:** | **Any narrative to support the documentation should be completed in this section, along with an explanation of how they successfully implemented the actions identified in the report.**  Reference should be made to the title of the documents submitted.  The information submitted should demonstrate that the provider has:   * has financial management processes that are well governed and controlled adequately and effectively, * has robust and comprehensive systems of risk management and internal control, * reports information regularly, comprehensively and correctly to appropriate senior management and those charged with governance. |
| **Last 3 years’ external audit management letters or reports:** | **Any narrative to support the documentation should be completed in this section, along with an explanation of how they successfully implemented identified actions.**  Reference should be made to the title of the documents submitted. |
| **Information on the institution’s budget setting and monitoring process, and the process for the production, distribution and monitoring of management accounts:** | **Any narrative to support the documentation should be completed in this section.**  This will enable to understand how the provider plans and manages activities to remain viable.  Reference should be made to the title of the documents submitted. |
| **Where available, the last 3 years’ internal audit reports of HE data systems and processes and the latest external data audit:** | **The provider should evidence that they have effective arrangements for the management and quality of data and for the assurance of data used for internal decision making.**  **Any narrative to support the documentation should be completed in this section, along with an explanation of how they successfully implemented identified actions.**  Reference should be made to the title of the documents submitted. |
| **A brief overview of the information typically contained within their management accounts, how often these are produced and with whom they are shared. If the institution does not prepare management accounts, describe any other relevant processes:** | **Any narrative to support the documentation should be completed in this section.**  This will demonstrate whether the institution has regular, reliable, timely and adequate management accounts or equally robust information to monitor operational and financial performance.  Reference should be made to the title of the documents submitted |
| **Where available, the last external governance effectiveness review:** | **Any narrative to support the documentation should be completed in this section, along with an explanation of how they successfully implemented the actions identified in the review and details of plans for the next review.**  Reference should be made to the title of the documents submitted |
| **Where not included in the financial strategy narrative above, an estates strategy or equivalent, as well as information on the monitoring of estates performance:** | **Any narrative to support the documentation should be completed in this section.**  A strategy would help to provide evidence of managing the estate in a sustainable way.  Reference should be made to the title of the documents submitted. |
| **Confirmation that the provider demonstrates good governance:** | **Please amend / delete** **the following statements and provide additional information, under (iii) below, where appropriate**:   1. The institution confirms that it complies/does not comply with the principles of the Higher Education Code of Governance (Committee of University Chairs (2020). 2. The institution confirms that it complies/does not comply with the principles of the Association of Colleges Code of Good Governance (2024). 3. The institution adheres to alternative, equally robust governance arrangements and the following information sets out these arrangements (please provide details). 4. The institution cannot demonstrate adherence to robust governance arrangements. If the provider has not adhered to the recognised standards, can you explain the reason(s) for the departure(s) and detail the alternative arrangements that are in place. |
| **Information on key shareholders/ governors/ trustees to allow searches to be made of Companies House, where applicable this could include lists of disqualified directors:** | **Any narrative to support the documentation should be completed in this section.**  This information should include details of their skills and experience along with confirmation in this section that they are eligible to act as either directors or trustees and have not been disqualified from acting as directors or trustees,  This will allow Medr to assess whether the provider is owned, managed and run by ‘fit and proper persons’  Reference should be made to the title of the documents submitted. |

**Part E. Contribution to the public good (*Paragraphs 70-86*)**

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| **Public Good Statement** | | |
| **Provider name and address** | Public good statements should be stand-alone documents and the provider name and address should be clearly set out. | |
| **Student Partnership** | | |
| **The provider must set out how it collaborates with the students, as partners, on the courses it wishes to be designated.**  When assessing this section of the application we will expect to understand:   * how the provider identifies the priorities of its diverse range of students and how those priorities have informed the provider’s objectives, and the activities and services the provider is delivering. * how the provider feeds back to its students how it has responded to the priorities identified by its diverse range of students. | | |
| **Under-represented groups** | | |
| **List the under-represented groups the provider has identified that it is specifically supporting in order to improve equality of opportunity for its students.** | | |
| **Explanation for the provider’s focus on the under-represented groups identified above** | | |
| **In this section, Medr expects the provider to set out the data and evidence to explain why the provider is supporting each of the under-represented groups identified in its public good statement.** | | |
| **Objectives, underpinning activities and targets as they relate to supporting equality of opportunity and the promotion of higher education** | | |
| **Equality of Opportunity** | | |
| **Objective** | | **Target(s) for 2025/26** |
| **The provider should set out each objective to improve equality of opportunity for its students.**  We expect the provider to have objectives to attract students and retain students from the under-represented groups it has identified. | | **The provider should include targets for 2025/26 to demonstrate intended progress towards, and ambition in, improving equality of opportunity.**  We expect the targets to:   * be SMART, * include a baseline and figures and percentages to measure the objectives, * be focused on outcomes rather than outputs, and * demonstrate how the provider intends to improve from its baseline. |
| **Activities and services being delivered to improve equality of opportunity in 2025/26** | | |
| **List all of the activities and services the provider plans to deliver in 2025/2026 to improve equality of opportunity**  In our assessment of the list of activities and services we will want to understand how the provider will:   * contribute to meeting the objective and related target(s) * support the under-represented groups identified by the provider * support students at all locations courses are being delivered by the provider * take account of best practice   **We would expect the activities and services to be set out in the following way:**  **In 2025/26 we will:** | | |
| **Promotion of higher education** | | |
| **Objective** | | **Target(s) for 2025/26** |
| **The provider should set out each objective to promote higher education.** | | **The provider should include targets for 2025/26 to demonstrate intended progress towards, and ambition in, promoting higher education.**  Targets should enable the provider to measure its progress and performance.  We expect the targets to:   * be SMART, * include a baseline, * be focused on outcomes rather than outputs, and * demonstrate how the provider intends to improve from its baseline. |
| **Activities and services being delivered to promote higher education in 2025/26** | | |
| **List all of the activities and services the provider plans to deliver in 2025/26 to promote higher education**  In our assessment of the list of activities and services we will want to understand how activities and services will:   * contribute to meeting the objective and related target(s) * support students at all locations where courses are being delivered by the provider * take account of best practice   Where this information is not evident we will discuss this with the provider.  **We would expect the activities and services to be set out in the following way:**  **In 2025/26 we will:** | | |
| **Investment to support public good** | | |
| **We expect the provider to set out the total amount being invested to deliver the provider’s contribution to the public good, and that investment as a proportion of the total fee income received.** | | |
| **Explanation for the provider’s objectives, targets and activities** | | |
| **We require the provider to provide a brief explanation of**   * **how each objective and target, aligns with the provider’s key strategic documents, including its corporate planning documents and any related strategies including, where relevant, its strategic equality plan, and** * **how the provider will review its objectives, targets and activities to improve its contribution to the public good.** | | |

**Part F: Authorisation of the application**

**In authorising the submission the governing body, board or equivalent confirms that:**

1. the information provided in this submission is accurate and current, at the time of writing, and is based on verifiable data.
2. it has seen and considered appropriate evidence to support the declarations being made in this application.
3. the provider is at a low risk of failure on financial grounds over the medium to long-term.
4. It will be classified as a relevant higher education body and will immediately need to comply with Prevent Duty legislation should it receive designation of its courses.
5. the provider complies with Competition and Markets Authority (CMA) guidelines for higher education.
6. Welsh Government and Medr will be promptly notified of any changes to the provider’s position during the period of designation including governance issues and serious incidents that have been raised with its primary regulator, the authorities or awarding body.
7. it will not advertise the availability of student support for Welsh domiciled students until designation has been confirmed.

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| **Application to Medr** | |
| Date of approval: |  |
| Authorised signature: |  |
| Print name: |  |
| Date: |  |