

Faculty Course Review Report

(To be filled by each Teacher)



For completion by the course instructor and transmission to Head of Department of his/her nominee (Dept. Quality Officer) together with copies of the Course Syllabus outline

Department:		Faculty:			
Course Code:		Title:			
Session:		Semester:	Autumn <input type="checkbox"/>	Spring <input type="checkbox"/>	Summer <input type="checkbox"/>
Credit Value:		Level:		Prerequisites:	
Name of Course Instructor:		No. of Students Contact Hours:	Lectures	Other (Please State)	
			Seminars		
Assessment Methods: give precise details (no & length of assignments, exams weightings etc)					

Distribution of Grade/Marks and other Outcomes: (adopt the grading system as required)

Undergraduate	Originally Registered	% Grade A	% Grade B	% Grade C	D	E	F	No Grade	Withdrawal	Total
No. of Students										
Post-Graduate	Originally Registered	% Grade A	% Grade B	% Grade C	D	E	No Grade	Withdrawal	Total	
No. of Students										

Overview / Evaluation (Course Co-coordinator's Comments)

Feedback: first summarize, then comment on feedback received from:

1) Student (Course Evaluation) Questionnaires

2) External Examiners or Moderators (if any)

3) Student / staff Consultative Committee (SSCC) or equivalent, (if any)

4) Curriculum: comment on the continuing appropriateness of the Course curriculum in relation to the intended learning outcomes (course objectives) and its compliance with the HEC approved / Revised National Curriculum Guidelines.

5) Assessment: comment on the continuing effectiveness of method(s) of assessment in relation to the intended learning outcomes (Course objectives).

6) Enhancement: comment on the implementation of changes proposed in earlier Faculty Course Review Reports.

7) Outline any changes in the future delivery or structure of the Course that this semester/term's experience may prompt.

Name: _____ Date: _____
(Course Instructor)

Name: _____ Date: _____
(Head of Department)