**Templates for Course Specifications**

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| **Course name: code:** |
| **Programme(s) on which the course is given:** |
| **Semester:** |
| **Credit hours**  |
| **Department offering the course** |
| **Academic year / Level** |
| **Date of specification approval** |
| **Instructor name:****Office:****Telephone:****Email:**  |

1. **Basic Information**

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|  Course components (total contact hours and credits per semester):  |
|  | Lecture1=1 | Tutorial1=2 | Seminars1=3 | Labor Studio1=3 | Practical/DR1=2 | Clinical skills1=3 | TBL1=2 | Total |
| Contact Hours |  |  |  |  |  |  |  |  |
| Credit |  |  |  |  |  |  |  |  |

1. **Professional Information**

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| **1 – Overall aims of course** |

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| **Code****#** | **2. Intended learning outcomes of course (ILOs)** | **Course Teaching****Strategies** | **Course Assessment****Methods** |
| **1.0** | **Knowledge**  |
| 1.1 |  |  |  |
| 1.2 |  |  |  |
| **2.0** | **Attitudes**  |
| 2.1 |  |  |  |
| 2.2 |  |  |  |
| **3.0** | **Professional and practical skills** |
| 3.1 |  |  |  |
| 3.2 |  |  |  |
|  |  |
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| **3. content**  |
|  **week** | **Units and topics** | **lectures** | **Small group/tutorial** | **Practical/lab** | **DR** | **assignment** | **seminars** | **TBL NO** | **Credit hours** |
| 1 |  |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |  |  |
| 8 |  |  |  |  |  |  |  |  |
| 9 |  |  |  |  |  |  |  |  |
| 10 |  |  |  |  |  |  |  |  |
| 11 |  |  |  |  |  |  |  |  |
| 12 |  |  |  |  |  |  |  |  |
| 13 |  |  |  |  |  |  |  |  |
| 14 |  |  |  |  |  |  |  |  |
| 15 |  |  |  |  |  |  |  |  |
| 16 |  |  |  |  |  |  |  |  |
| Total  |  |  |  |  |  |  |  |  |

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| 3. Student assessment : Schedule of Assessment Tasks for Students During the Semester |
|  | Assessment task  | Week Due | Proportion of TotalAssessment(Weighting) |
| **A** | **Continuous assessment** |  |  |
| 1.1 | TBL 1 |  |  |
| 1.2 | TBL 2 |  |  |
| 1.3 | TBL 3 |  |  |
| 1.4 | TBL 4 |  |  |
| 1.5 | Others  |  |  |
| **B** | **End of course assessment** |  |  |
| **2** | **Final theoretic exam** |  |  |
| 2.1 | MCQs |  |  |
| 2.2 | SAQs |  |  |
| 2.3 | SPOTs |  |  |
| 2.4 | Others  |  |  |
| **3** | **Final practical exam** |  |  |
| 3.1 | Clinical OSCE |  |  |
| 3.2 | Lab  |  |  |
| 3.3 | OSPE |  |  |
| 3.4 | others  |  |  |
| 4 | Total |  | 100 |

5. Student Academic Counseling and Support

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 1. Arrangements for availability of faculty and teaching staff for individual student consultations and academic advice. (include amount of time teaching staff are expected to be available each week or month)

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| --- | --- | --- | --- | --- | --- |
|  Instructor name | Date  | Days  | Locate  | Time  | Month  |
| 1. |  |  |  |  |  |
| 2. |  |  |  |  |  |
| 3. |  |  |  |  |  |
| 4. |  |  |  |  |  |

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6. Learning Resources

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| 1. List Required Textbooks and Essential References Materials (Journals, Reports, etc.) |

7. Facilities Required

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| Indicate requirements for the course including size of classrooms and laboratories (i.e. number of seats in classrooms and laboratories, extent of computer access etc.) |
| 1. Accommodation (Classrooms, laboratories, demonstration rooms/labs, etc.) |
| 2. Computing resources (AV, data show, Smart Board, software, etc.) |
| 3. Other resources (specify, e.g. if specific laboratory equipment is required, list requirements or attach list)  |

8. Course Evaluation and Improvement Processes

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| 1 Strategies for Obtaining Student Feedback on Effectiveness of Teaching. eg. Questionnaire  |
| 2 Other Strategies for Evaluation of Teaching by the Instructor or by the Department. eg. Questionnaire, result |
| 3 Processes for Improvement of Teaching |
| 4. Processes for Verifying Standards of Student Achievement (e.g. check marking by an independent member teaching staff of a sample of student work, periodic exchange and remarking of tests or a sample of assignments with staff at another institution) |
| 5 Describe the planning arrangements for periodically reviewing course effectiveness and planning for improvement. |

Name of Instructor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date Report Completed:\_\_\_\_\_\_\_\_\_\_\_\_

Name of Coursecoordinatprr\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_signature----------------

Program Coordinator:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Received:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_