

# Site Visit Assessment Form for New Student Exchange Partner

This form is intended to provide a quality assessment checklist regarding the facilities at partner institutions, and to identify any changes and/or potential problems.

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| --- | --- |
| 1. Name of institution
 |  |
| 1. Name and position of UoG staff member conducting visit
 |  |
| 1. Date of visit
 |  |
| 1. Contact Details of International Office for incoming students
 |  |
| 1. Have you met with the contacts detailed above? If not, give details of who you have met with.
 |  |
| 1. Visit Arrangements
 | *Please detail programme of visit.* |

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| 1. **STUDENT SUPPORT SERVICES**
 | Please tick if these services are available | Please tick if you met with a representative from these services | Comments*Are these centralised or department/faculty specific? Where are they located?* |
| * Disability Services
 | [ ]  | [ ]  |  |
| * Counselling/Psychological Services
 | [ ]  | [ ]  |  |
| 1. Additional Learning Support Services
 | [ ]  | [ ]  |  |
| * Student Representative Services
 | [ ]  | [ ]  |  |
| * International Student Support Team
 | [ ]  | [ ]  |  |
| * Visa/Immigration Advice
 | [ ]  | [ ]  |  |
| * Orientation/Induction
 | [ ]  | [ ]  |  |
| * On-site Medical Services

Please also comment on what is required in terms of Health Insurance. (Obtained through partner? Mandatory/not?) | [ ]  | [ ]  |  |
| 1. **RESOURCES**
 | ***Please comment on the quality of:*** |
| * Library Facilities
 |  |
| * IT Facilities
 |  |
| * Sports Facilities
 |  |
|  |  |
| 1. **POLICIES & PROCEDURES**

Please provide a link/links to the following policies, where available:* Equality and Diversity Policy
* Student Code of Conduct
* Data Protection Information

If no policy appears to be available, please add a comment to this effect. |  |
| 1. **LEARNING & TEACHING**
 | ***Please comment on:*** |
| * Credit Requirements for incoming students
 | *Eg, what is the required number of credits per semester/year for a full time course load?* |
| * Is the Language of Teaching English?

If the answer is no, please indicate the minimum language requirement (eg B2 CEFR) | *Yes* [ ]  No [ ]   |
| * What is the Resit Policy – ie are resit examinations offered and if so where?
 | *Please comment* |

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| 1. **ACCOMMODATION**
* Is university accommodation available?
* If no university accommodation available is there support to find alternative accommodation

 Please provide further details |  Yes [ ]  No [ ] Yes [ ]  No [ ]  |
| **Please provide further information if possible on the following:***Single or shared rooms?**Self-catering or meal-plan?**Specialised accommodation options for students registered with disability services (i.e. wheelchair users/limited physical mobility/24-hour care)?**Secure entry?**On-site wardens/staff?**Specialised campus night bus service?* | **Comments** |
| 1. **LOGISTICS**
 | ***Please comment on the following:*** |
| * If more than one University campus, which campus will incoming students be based at?
 |  |
| * Is the University campus rural or urban-based?
 |  |
| * Cost of Living
 |  |
| * Is a high level of language other than English required for daily living?
 |  |
| 1. **SAFETY & SECURITY**
 | Please tick if these services are available [ ] Please tick if you met with a representative of these services and give contact details [ ]  |
| *Is there an on-campus safety protocol?**Is there a 24-hour emergency/security telephone number?**Is there a Crisis Management Team?**Do any aspects of the physical layout of campus give cause for concern? (e.g. geographic location within the city / any campus areas which are remote or not well lit etc.)* | Comments |
| 1. **OTHER CommentS (If applicable)**
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| --- |
| Signed by (Please print name):  |
| Title:  | Signature: |
| Date:  |