



QUEEN'S
UNIVERSITY
BELFAST



THE QUEEN'S PARTNERSHIP PROJECT

Project Template
Form

SECTION 1: PROJECT PLANNING

Faculty/School(s):

Partnership Project Title:

Brief description of Project background and scope:

Does the Project apply to?
(Please tick all that apply)

UG

PGT

PGR

Which Partnership key theme(s) does your Project come under? (Please tick all that apply)

Student Voice

Communication

Academic Enhancement
(Assessment & Feedback)

Student Representation

Partners involved:

Student Lead:

Staff Lead:

Project aim and objectives:

(This should include expected outcomes/benefits.)

How will you measure the project's success?

(Please provide at least one measurable performance indicator.)

Expected timeline:

(Duration & expected date of completion.)

*Please note some of the Project detail may be included in case studies for sharing of best practice and which may be published on the University Website or reported to University Governance Committees, for example, Project Scope and Aims.

ACTION PLAN

ACTIONS	OWNERS	TIMESCALE

Sign-off by Lead Partners:

Student Lead: _____ Staff Lead: _____ Date: _____

Sent to Academic Affairs:

Sent to Students' Union Education Officer and/or Postgraduate Officer:

SECTION 2: PROJECT REVIEW AND EVALUATION

Did the project achieve its aim and objectives?

What outcomes/benefits were achieved?

(Please include any measured performance indicators or additional unexpected benefits/outcomes.)

What went particularly well?

What could be improved/done differently?

Was the project completed within the expected timeline? If not, why not?

Resources Used:

(Examples include staff/student time, monetary costs and technological development costs.)

Overall, was the Project a success and what has been the impact?

(Consider benefits/ impact achieved in the context of resources expended.)

Next steps (if appropriate. This might include the project being rolled out to other areas or shared across the University as a best practice example.):

Sign-off by Lead Partners:

Student Lead: _____ Staff Lead: _____ Date: _____

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