



Graduate Research and Scholarships Office
Hackett Hall – M358

APPLICATION FOR VARIATION OF TERMS OF CANDIDATURE OF RESEARCH HIGHER DEGREE CANDIDATURE (TC)

IMPORTANT – Please read

This form is to be used for application to VARY THE APPROVED TERMS of research higher degree candidature.

It is for use by scholarship and non-scholarship holders. **Scholarship holders intending to vary their enrolment MUST FIRST DISCUSS THIS WITH THE RELEVANT SCHOLARSHIPS OFFICER.**

The Graduate Research and Scholarships Office contact list is at www.postgraduate.uwa.edu.au/home/contacts/staff.

A. STUDENT DETAILS

Student ID: _____

Family Name: _____ Other Names: _____

Address: _____

Postcode: _____

Telephone contact: Home _____ Mobile _____ Other _____

School/s and/or Centre in which you are enrolled: _____

Degree: _____ Attendance Type (eg FT/PT) _____

Name of Scholarship/s: (if applicable)	Expiry date of Scholarship/s:
1.	
2.	

B. REQUEST

B.1 CHANGE OF ENROLMENT

<input type="checkbox"/> Change of Enrolment Type to <i>Please indicate the effective date of the change next to the appropriate box..</i>	<input type="checkbox"/> Part-time/...../.....	<input type="checkbox"/> Full-time/...../.....
	<input type="checkbox"/> Part-time (external)/...../.....	<input type="checkbox"/> Full-time (external)/...../.....

Applications to change enrolment status (from full to part-time or part to full-time) must be forwarded to the Graduate Research and Scholarships Office, with the Graduate Research Coordinator's endorsement. Students wishing to change to external enrolment must read the conditions for external enrolment. Students in receipt of a scholarship **must discuss any application for a change in enrolment type with the relevant Scholarships Officer.**

B.2 SUPERVISION

<input type="checkbox"/> Change existing Supervisor(s)	from: _____	to: _____
<input type="checkbox"/> Add new Supervisor <i>If not a UWA staff member please attach a CV and provide address details</i>	Full Title _____	
	School/Address _____	
	<input type="checkbox"/> Coordinating	<input type="checkbox"/> Co-supervisor % _____
<input type="checkbox"/> Delete current supervisor	Name _____	Signature _____
Revised Supervision Percentages	Name: _____ %:	Name: _____ %:
	Name: _____ %:	Name: _____ %:
	Name: _____ %:	Name: _____ %:

Change of Supervisor(s) must be approved by the Graduate Research Coordinator and should be discussed with all parties concerned before an application to change is submitted. A change of supervisor from another school **does not constitute a change of school or a joint enrolment**. No alteration in funding will take place as a result of a change in supervisor. A request to add an external supervisor must be accompanied by a CV, full title and contact details.

Coordinating: Is responsible for ensuring that all administrating and reporting requirements of the supervisors are met. This supervisor will receive all correspondence from the Graduate Research and Scholarships staff relating to the student, and is responsible for communication with and between other supervisors. The Coordinating supervisor must be a member of UWA staff.

Co-supervisor: Works with the coordinating supervisor in providing research advice in the Discipline.

External: Does not hold a UWA appointment eg Industry, other university.

COMPULSORY. - %: Please estimate each supervisor's contribution to the supervision

B.3 COURSEWORK UNIT/S

<input type="checkbox"/> Addition of coursework unit/s <i>If more than one unit, please attach a list</i>	Unit Code
	Name of unit
Addition of coursework units to a research higher degree enrolment will ONLY be approved if the units taken are necessary to a student's research. A case must be made by the student and endorsed by the Head of School/Graduate Research Coordinator and supervisor(s).	

B.4 OTHER

<input type="checkbox"/> Other (please specify)	
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C. REASONS FOR REQUEST

To be completed by student -

D. STUDENT SIGNATURE

_____ Date _____

International Students Only: I have discussed this application and its implications with the UWA International Centre. (Please tick)

_____ (International Student Officer Postgraduate Signature) _____ (Print name)

E. COORDINATING SUPERVISOR AND GRADUATE RESEARCH COORDINATOR - APPROVAL AND COMMENT

To be completed by coordinating supervisor – please comment on the reasons for this request, indicating approval or otherwise.

Coordinating Supervisor(s) Signature:	Date:
Coordinating Supervisor(s) Name: (please print):	Date:
Proposed new supervisor(s) Signature	Date:
Proposed new supervisor(s) Name: (please print):	Date:
Graduate Research Coordinator Signature:	Date:

Graduate Research Coordinator Name: (please print):

Date:

F. SCHOOL MANAGERS (ONLY REQUIRED FOR STUDENTS JOINTLY ENROLLED)

The current agreed split of completion funds for this student is as follows:

School _____ % School _____ %

School Manager Signature-----School Manager Signature-----

G. GRSO USE ONLY

Approved

Not Approved

Associate Director, Graduate Research and Scholarships

Date

CALLISTA updated _____ (date/init)

INTERNATIONAL CENTRE notified _____ (date/init)

SCHOLARSHIP adjusted (if applicable) _____ (date/init)

SCHOLARSHIP FINANCE checked _____ (date/init)