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| Transfer Form | | | | | | | | |
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| ***PLEASE NOTE*** | * ***Doctoral and MPhil students will be enrolled in one of four intakes throughout the year (1st February, 1st May, 1st July or 1st October).*** * ***Confirmation of Candidature: Students are normally expected to submit their Confirmation of Candidature (Full research proposal) within 12 months from the date of first enrolment.*** | | | | | | | |
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| **Student ID No** | |  | | **Name** | |  | | |
| **Faculty** | | **Choose a Faculty** | | **School/Dept** | |  | | |
| **Current Programme:** | |  | | | | | | |
| **Thesis Title:** | |  | | | | | | |
| **Proposed start date to align with an intake date:** | | **Choose an intake** | | **Expected Submission Date:** | |  | | |
| **Will this research involve working with children?**  If yes, see additional information below | | | | **Yes** | | **No** | | |
| **Do you hold any scholarships/awards/sponsorship by an external organisation that will transfer with the student?** | | | | **Yes** | | **No** | | |
| **If yes, provide details:** | |  | | | | | | |
| **Please indicate where you will be based during your studies:** | | | |  | | | | |
| **Campus:**  If based in Auckland | | **Choose a Campus** | | **City:** |  | **Country:** |  | |
| **The University supports theses written in English or Te Reo Māori. While Sign language is also an official language of New Zealand, theses must be written. Will your research be presented in:** | | | | | | | | |
|  | | | | | | **English** | |  |
|  | | | | | | **Te Reo Māori** | |  |
| **Research Component** | | **Choose an item.** |  | **Research Format** | | **Choose an item.** | | |
| **Select transfer option:** | | **Choose an item.** | | | | | | |
| *Complete the appropriate section below corresponding to your transfer choice.* | | | | | | | | |
|  | | | | | | | | |

*Select option below to move to the section of the form:*

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# [Transfer from an External Institution to an AUT Doctoral Programme](#Transfer_from_external_to_AUT)

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# [Transfer from an AUT Doctoral Programme to an AUT Masters Programme](#Transfer_from_AUTDoc_to_Masters)

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# [Transfer from an AUT Masters Programme to an AUT Doctoral Programme](#Transfer_from_AUTMasters_to_Doc)

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# Transfer from an AUT Professional Doctorate to an AUT PhD Programme

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# [Approvals and Sign Off (Required)](#Approvals_and_Signoff)

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# Transfer from an External Institution to an AUT Doctoral Programme

***Please note:***

* ***This report is to be completed by a student transferring doctoral candidature to AUT from another institution and must be forwarded through the appropriate faculty postgraduate committee to the University Postgraduate Research Board. If supervisors from the previous institution and AUT are different, further information may be required.***

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Enrolment Status** | **Provisional** | | |  | | **Confirmed/Completed Confirmation of Candidature** | |  |
| **Please supply a copy of the AUT equivalent of these approved by your institution** | | | | | | | | |
| Previous Institution Information | | | | | | | | |
| **Name of programme** | |  | | | **Institution** | |  | |
| **Period of Candidature** | | **From** |  | | **To** | |  | |
| **Mode of Study** | | **Full Time** |  | | **Part-time** | |  | |
| **Primary/Co-Supervisor** | |  | | | **Secondary/Co-Supervisor** | |  | |
| **Reason for Transfer:** | |  | | | | | | |

Sections to complete

Resources and Budget

*Identify any resources that you anticipate you will need over and above those provided by AUT. Examples are: access to libraries in overseas locations, air travel, accommodation, special equipment. Provide details.*

Progress to Date

*Outline any progress to date. Attach any progress reports provided to your previous institution plus a succinct one-page summary of what the research is about.*

Proposed Timetable for Next Six Months

Supervisors Comments and Support Statements

*Comments including any issues to be addressed:*

**Please comment on the feasibility of this project as a doctorate:**

**Please comment on the student’s ability to complete a Doctorate within the normal timeframes. (normally 3 years):**

**Please identify the potential resources and budget implications for this project:**

Declaration by Applicant

|  |  |  |  |
| --- | --- | --- | --- |
| I declare that the information provided by me in this application is true and complete. I recognise that it is my responsibility to provide all necessary documentation to support my application and I authorise Auckland University of Technology, where necessary, to obtain further relevant documentation and to verify my qualifications as detailed in this application. I acknowledge that AUT reserves the right to vary or reverse any decision regarding admission to candidature on the basis of this application. I have read and understand the conditions of candidature outlined in the current Postgraduate Handbook and am prepared to accept them in full. | | | |
| **Applicant’s signature**: |  | **Date** |  |

Entry Criteria (Office Use Only)

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Admitting Qualification** |  | **Institution** | |  | | | **Country** |  | |
| **Length (years)** |  | **Year Granted** | |  | | **NARIC** |  | | |
| **Honours (equivalent)** |  | **Research Methods** | | | | **Yes** | **No** | Points |  |
| **Research Component:** | **Choose an item.** | | | | | **Yes** | **No** | Points |  |
| **Is the Research Component of the admitting qualification equivalent to 30 points in a bachelor with honours programme or 45 points in a master’s programme? (If unsure, please refer to CRM entry criteria assessment or your faculty Postgraduate Office for guidance).** | | | | | | **Yes** | **No** |  |  |
| If it is not, please indicate that the primary supervisor/ Co-supervisor (admin lead) has read/reviewed the research undertaken in the admitting qualification and deems that it is of suitable standard, and shows equivalence to advanced standing in research for entry to the AUT Doctoral programme: | | | | | | | | **Yes** | |
| **Other Qualifications** |  | | | | | | | | |
| **Additional**  **Info/Consideration** |  | | | | | | | | |
|  | | | | | | | | | |
| **English Language** | Is English the applicant’s first language | | | | | **Yes** | **No** | | |
| **Evidence of English Language** | IELTS | | TOEFL | | | Previous PG Study in English | | | |
|  | Other (Supply Evidence/Justification) | | | |  | | | | |

# [Click to move to Approvals and Sign Off section (Required)](#Approvals_and_Signoff)

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# Transfer from an AUT Doctoral Programme to an AUT Masters Programme

**Please note:**

* ***A withdrawn (W) grade will be recorded against the Doctor of Philosophy qualification if you transfer prior to 3 completing year’s study in the Doctoral Programme. Transfers after these timeframes will be recorded as Did Not Complete (DNC)***

|  |  |  |  |
| --- | --- | --- | --- |
| Transfer Information | | | |
| **Current Programme** | **Choose an item.** | **Programme Transferring to:** |  |
| **Points of Master’s Research Component** |  | **Mode of Study for Masters programme** | **Choose an item.** |

*Provide additional details using the following headings (select arrow to expand section)*

Rationale for transfer

Information from primary/co-supervisor with a detailed justification and support for the transfer

Outline any actual or proposed major alterations to the original proposal

*Detail the work completed to date and the work remaining to complete the master’s research component (alternatively append a progress report with this information included).*

Proposed timeline to completion of the master’s programme

Any other comments or recommendations

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|  | **Append a progress report showing the work completed to date and the work remaining to complete the masters research component** |

# [Click to move to Approvals and Sign Off section (Required)](#Approvals_and_Signoff)

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# Transfer from an AUT Masters Programme to an AUT Doctoral Programme

*Note:*

* *It is expected that students transfer with the same project and changes of topic are not permitted.*
* *A confirmation of candidature form should accompany this form and be forwarded through the appropriate faculty postgraduate committee to the University Postgraduate Research Board. Supporting documents as indicated should also be provided.*
* *PhD students will be enrolled in one of four intakes throughout the year (1st February, 1st May, 1st July or 1st October).*
* *A withdrawn (W) grade will be recorded against the masters qualification once the transfer to the doctoral programme is approved.*

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| --- | --- | --- | --- |
| Transfer Information | | | |
| **Current Masters Programme** |  | **Points of Master’s Research Component** |  |
| **Programme Transferring to** |  | **Admission Date of Masters Programme** |  |
| **Choose a start date for the Doctoral Programme** | **Choose a start date** | **Expected Submission date** |  |
|  | | | |
| **NOTE: Students transferring from an AUT master’s programme to the PhD programme are expected to submit a confirmation of candidature form and transfer with a confirmed status.** | | | |

*Provide additional details using the following headings*

Rationale for transfer

Information from primary/co-supervisor with a detailed justification and support for the transfer

Proposed timeline to completion of the Doctoral programme

*Please provide a timetable for activity to be undertaken over the next six months. Indicate whether an extension of time* might be required (if yes please complete “Variations to Candidature” section of this form, variation of record)

**Extension required Yes**  **No**

Any other comments or recommendations

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| Checklist | |
| Please attach the appropriate documentation that demonstrates how your research skills and achievements  substantiate the case for a transfer: | |
|  | **Completed and approved Confirmation of Candidature form** |
|  | **Evidence of significant progress with literature review** |
|  | **Evidence of significant progress with data collection and analysis** |
|  | **Provision of a brief summary of the results to date.**  This should indicate the potential for the thesis to progress to a larger body of work, such as a doctoral thesis and include a thesis draft or other form of research (for example, performance or film) |
|  | **Evidence of presentation of research results at faculty seminars** |
|  | **Evidence of presentation of research results at national or international conferences or symposia** |
|  | **A brief outline of future work to be undertaken** |
|  | **Academic Record** |

# [Click to move to Approvals and Sign Off section (Required)](#Approvals_and_Signoff)

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# Transfer from an AUT Professional Doctorate to an AUT PhD Programme

*Note:*

* *If transferring as a confirmed candidate a confirmation of candidature form should accompany this form and be forwarded through the appropriate faculty postgraduate committee to the University Postgraduate Research Board. Supporting documents should also be provided where applicable.*
* *PhD students will be enrolled in one of four intakes throughout the year (1st February, 1st May, 1st July or 1st October).*
* *A withdrawn (W) grade will be recorded against the professional doctorate qualification once the transfer to the PhD programme is approved.*

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| Transfer Information | | | | | | | |
| **Current Programme** | **Choose an item.** | | | **Expected Submission date** |  | | |
| **Admission Date of Professional Doctorate** |  | | |  |  | | |
| **Will there be changes to the supervisory team?** | **Yes** | **No** | If yes, please provide details of the new supervisory team below: | | | | |
| **Supervisor Type (select option)** |  | | | **Supervised Doctorate to Completion?** | | **Yes** | **No** |
| **Supervisor Type (select option)** [**i**](#Sturcture) |  | | | **Supervised Doctorate to Completion?** | | **Yes** | **No** |
| **Supervisor Type (select option)** |  | | | **Supervised Doctorate to Completion?** | | **Yes** | **No** |
| **Supervisor Type (select option)** |  | | | **Supervised Doctorate to Completion?** | | **Yes** | **No** |
| **Supervisory Mentor** |  | | |  | | | |
|  | | | | | | | |

*Provide additional details using the following headings (select arrow to expand section)*

Rationale for transfer

Information from primary/co- supervisor with a detailed justification and support for the transfer

Proposed timeline to completion of the Doctoral programme

*Please provide a timetable for activity to be undertaken over the next six months. Indicate whether an extension of time* might be required (if yes please complete “Variations to Candidature” section of this form, variation of record)

**Extension required Yes**  **No**

Any other comments or recommendations

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# Approvals and Sign Off (Required)

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| school and faculty approvals | | | | | | | | | | | |
|  | | | | | | | | | | | |
| **Student** | |  | | | **Signature** |  | | | **Date** | |  |
| **Supervisor Type (select option)** | |  | | | **Supervised Doctorate to Completion?** | | | | **Yes** | | **No** |
| **Signature** | |  | | |  | | **Date** | |  | | |
| **Supervisor Type (select option)** [**i**](#Sturcture) | |  | | | **Supervised Doctorate to Completion?** | | | | **Yes** | | **No** |
| **Signature** | |  | | |  | | **Date** | |  | | |
| **Supervisor Type (select option)** | |  | | | **Supervised Doctorate to Completion?** | | | | **Yes** | | **No** |
| **Signature** | |  | | |  | | **Date** | |  | | |
| **Supervisor Type (select option)** | |  | | | **Supervised Doctorate to Completion?** | | | | **Yes** | | **No** |
| **Signature** | |  | | |  | | **Date** | |  | | |
| **Supervisory Mentor** |  | | **Signature** | |  | | **Date** | |  | | |
| Details of external supervisor (Where Applicable) | | | | | | | | | | | |
|  | | | | | | | | | | | |
| **External Supervisor** |  | | | **Supervised to Completion** | | | | **Yes** | | **No** | |
| **Contact Email Address** |  | | | **An approval email has been received from line manager?** | | | | | | **Yes** | |
| **Signature** |  | | | **Date** | | | |  | | | |
| resource Sign Off | | | | | | | | | | | |
| **Head of School Name** |  | | **Confirm Resources Available for this Project** | | | | **Yes** | | **No** | | |
| **Signature** |  | | | | | | **Date** | |  | | |
| **Head of School of Secondary/ Co-supervisor**  **(when supervisor is located in a different department/ school/faculty)** |  | | **Confirm Resources Available for this Project** | | | | **Yes** | | **No** | | |
| **Signature** |  | | | | | | **Date** | |  | | |
|  | | | | | | | | | | | |
| **Associate Dean (Postgraduate)** |  | | **Signature** | |  | | **Faculty**  **Approval Date** | |  | | |
| **Dean GRS** |  | | **Signature** | |  | | **Date** | |  | | |

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