

Division of Student Administration

Application for Change of Research Program

1. Personal Details				
Family name:	University ID:	U		
Given names:	Current Scholarship(s):			
Student Type: Domestic International Australia Awards				
2. Information about this application				
 This application is to be submitted to your College or School administration office. Scholarship holders applying for change of program must consult their conditions of award as the scholarship may not be transferable. Program change requests (changing school or college) may only be made effective from the start date of a term: 1 January, 1 April, 1 July or 1 October. If requesting a program change please select the date closest to the date the change is being made. Program transfer requests (changing degree eg. PhD to Master of Philosophy) can be made effective from any date. 				
3. Change Request				
Type of Change: Transfer Date Change is to take effect:				
Program Change (eg department/College) Date Change is to take effect: (please circle one)	1 January 1 A	oril	1 July	1 October
I wish to Change from:				
Current PhD Professional Master of Philosophy	New PhD Program Level:		essional octorate	Master of Philosophy
Current Full- Part- Study Load: Time Time	New Full- Study Load: Time		Part- Time	
Current School/Centre:	New School/Centre:			
Current College:	New College:			
Reason for Change Request:				
5. Applicant Declaration				
I certify that the information supplied by me on this form is complete and true. I understand that I must devote at least 20 hours (part-time)/40 hours (full-time) per week to my research program. I have read the relevant sections of the Research Award Rules.				
Student's signature		Date		



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OFFICE USE ONLY Signatures below refer to current program authorities: Signatures below refer to proposed new program authorities: **School HDR Administrator** Program Code: Course Code: Academic Organisation Code: **Chair of Supervisory Panel Chair of Supervisory Panel** (✓ Tick One) Endorsed Not Endorsed (✓ Tick One) Endorsed Not Endorsed Name (print): Name (print): Signature Signature DD/MM/YYYY DD/MM/YYYY **Head of Department Head of Department** (✓ Tick One) (✓ Tick One) Endorsed Not Endorsed Endorsed Not Endorsed Name (print): Name (print): Signature Signature DD/MM/YYYY DD/MM/YYYY **Delegated Authority Delegated Authority** (✓ Tick One) Approved Not Approved (✓ Tick One) Approved Not Approved Name (print): Name (print): Signature Signature DD/MM/YYYY DD/MM/YYYY **DIVISION OF STUDENT ADMINISTRATION USE ONLY** Academic Standards and Quality Office or Australia Awards **Student Administration and Records** (✓ Tick One) Verified Not Verified (✓ Tick) Processed Name (print): Name (print): Signature Signature

DD/MM/YYYY

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