This form is used to transfer between a master by research and a doctoral research program. The completed form must be sent to - graduate-school@une.edu.au. More information about HDR course transfers are available in the [HDR Admission and Enrolment Policy](https://policies.une.edu.au/document/view-current.php?id=524) and the [HDR Candidature Management Policy](https://policies.une.edu.au/document/view-current.php?id=331). Candidates in receipt of a scholarship must consult the terms and conditions of the award before completing this form. International candidates must discuss the proposed change(s) with [International Services](https://www.une.edu.au/staff-current/une-areas/administration-areas/une-international/international-services) prior to completing this form.

Candidate Details

|  |  |  |  |
| --- | --- | --- | --- |
| **Candidate Name** |  | **Student Number** |  |
| **School/Unit** | Choose an item. |
| **Current Degree** | Choose an item. |
|  | **Domestic** |  | **International** |

Transfer Information

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| **If applicable – Request to change enrolment to:** |
|[ ]  **Candidate is requesting to transfer from PhD to Masters** |[ ]  **Candidate is requesting to transfer from Masters to PhD** |
| **Select Master Degree:** Choose an item. | **Select Doctoral Degree:** Choose an item. |

|  |  |
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| **Date Effective From** Day/Month/Year | Click or tap to enter a date. |

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| **If applicable – Request to change enrolment to:** |
|  | **Full-time** |  | **Part-Time** |
|  | **On-campus** |  | **Online** |

Thesis Completion Plan

A detailed Thesis Completion Plan should be approximately 1,000-1,500 words and should address the following:

* A tabulation of the major chapters in the thesis to be submitted. A statement of which of these chapters are complete and have been read and approved by the supervisor(s), those which are incomplete, and an indication of their status (e.g., not yet commenced, partially drafted, fully drafted, with supervisor, undergoing revision.) An indication of the time taken to draft each chapter would also be useful.
* A statement of the work that needs to be done to complete the thesis, a timeline showing when each of the individual units of work (e.g., completed chapters) will be completed and submitted to the supervisor(s) where practically possible. List the resources required to complete your thesis and whether they are currently available to you, or need to be provided.

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| **Chapters** | **Title and Description** | **Statement of Current Status** | **Timeframe for Completion** |
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| **HDR Candidate** |  |  |  |  | Click or tap to enter a date. |  |
|  | **Name** |  | **Signature** |  | **Date** |  |

Master by Research to Doctoral Transfer Outcome – Milestone Review Panel to Complete

Skip this section if the transfer is from Doctoral to Master by Research.

|  |  |
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|  | The school recommends that the candidate remain enrolled in the Master of Research program, following the research plan in the original Master’s research project. |
|  | The school recommends admission to the Doctoral program as a provisional candidate, pending required revisions or the submission of further documents for confirmation. |
|  | The school recommends admission to the Doctoral program as a confirmed Doctoral candidate. |
| **Change in Enrolment (if applicable)** |
|  | Candidate is permitted to change their enrolment as requested above |
|  | Candidate is not permitted to change their enrolment as requested. \*Justification must be listed below. |
| \*Justification: |

Doctoral to Master by Research Transfer Outcome

Skip this section if the transfer is from Master by Research to Doctoral.

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| --- | --- |
|  | The school recommends that the candidate remain enrolled in the Doctoral program, following the research plan in the original Doctoral research project. |
|  | The school recommends admission to the Master by Research program, pending required revisions or the submission of further documents for confirmation. |
|  | The school recommends admission to the Master by Research program. |
| **Change in Enrolment (if applicable)** |
|  | Candidate is permitted to change their enrolment as requested above |
|  | Candidate is not permitted to change their enrolment as requested. \*Justification must be listed below. |
| \*Justification: |

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| **Principal Supervisor Endorsement** |  |  |  |  | Click or tap to enter a date. |  |
|  | **Name** |  | **Signature** |  | **Date** |  |

Head of School or delegate (for example, Milestone Review Panel Chair or HDR Coordinator)

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| Signing below indicates confirmation of the following:* Support for accepting the application for transfer.
* Confirm the School/Enrolling Unit has appropriate supervision and minimum facilities to support the applicant
 |
|  |
| **HDR Coordinator** |  |  |  |  |  |  |
|  | **Name** |  | **Signature** |  | **Date** |  |

Associate Dean, Research Approval

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| **Associate Dean, Research** |  |  |  |  |  |  |
|  | **Name** |  | **Signature** |  | **Date** |  |

Dean, Graduate Research

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|  |
| **Dean, Graduate Research** |  |  |  |  |  |  |
|  | **Name** |  | **Signature** |  | **Date** |  |