BOND UNIVERSITY
GRADUATE SCHOOL OF RESEARCH

Application for conversion of degree program

For Doctoral and Masters by Research Candidates

Print Form

NOTE

This form is used to request a change or conversion of program for candidates in PhD, Professional Doctorate or Master by Research. This form wil be kept on your student record in accordance with University Privacy Policy.

Please note that all correspondence will be sent to the address currently on record. If you change your address or contact details please fill in an 'Amendment to Personal Details' form which can be foundon the web at www.bond.edu.au

Applicants are advised that the Bond University Higher Degree Research Committee (BUHDRC) will only consider those applications that are supported by their Principal Supervisor and Faculty. Candidates should consult with their Principal Supervisor before completing this form.

Applicants should complete Section A and B and sign the declaration before submitting the form and all the necessary documentation to their Principal Supervisor.
Principal Supervisors should ensure that Section C is completed and the form is forwarded to the Associate Dean of Research/ Director of Research for consideration by the Faculty Research Committee.
The Chair of the Faculty Research Committee should complete **Section D.**
The Chair should then forward the application to the Higher Degree Research Officer in the Bond University Graduate School of Research (BUGSR) who will submit it to the BUHDRC for approval.

SECTION A **Personal Details**

Surname or Family Name:

Given Names:

Student ID:

Faculty of Enrolment:

Current program (e.g. PhD, SJD, Masters by Research)

Section B **Proposed program details**

Proposed program (e.g. PhD, SJD, Masters by Research)

Proposed project Title:

Brief description of how new project meets new program requirements**

*** The project description must show how this project differs from that in the original program including the background of the research problem, proposed research methodology, overview of the literature review, possible limitations, contribution to knowledge and a timeline showing how the project can be completed within the available candidature time.*

Candidates Signature :

Date

Section C **Supervisor Statement** ***(to be completed by the Principal Supervisor & signed byAssociate Supervisor)***

Principal Supervisor's name :

Have you been approved to the register of Accredited Supervisors?

If the applicant is seeking conversion from Masters by Research to a Doctoral program, please write a statement that addresses the following issues :

1. Progress in the Masters by Research project demonstrates that the work is of the quality expected of a doctoral project ;
2. Progress in the project must have sufficient complexity to validate the application to a doctoral candidature;
3. The candidate must have demonstrated the appropriate skills to undertake a doctoral program

If the applicant is seeking conversion from a Doctoral program to a Masters by Research , please write a statement that addresses the following issues :

1. What factors have been most crucial in the student needing to downgrade their project ?
2. When is the project likely to be completed ?

I agree to be the Principal Supervisor for being the candidate referred to in this application.

Signature Date

Associate Supervisor's name :

Have you been approved to the register of Accredited Supervisors?

I agree to be the Associate Supervisor for being the candidate referred to in this application.

Section D **Faculty Research Committee Approval**

The Faculty confirmst that the resources required to complete the research project are available ◯ Yes ◯ No

Is the applicant a scholarship holder?

The Facult Research Committee recommends the application for conversion of candidature and certifies that facilities necessary for the research program will be made available to the candidate for the duration of the program and that, in its opinion, the supervisor will have adequate time for supervision of the candidate.

Program recommended :

Name of Faculty Research Committee Chair Date

Signature

Please submit this application to BUGSR via the Higher Degree Research Officer

Bond University Higher Degree Research Committee approval:

Conditions if any

Name of Chair:

Signature Date