

① Before completing this form, please consult the guidelines for Program/Plan Transfer which can be found at: <https://i.unisa.edu.au/students/research-students/student-forms/>

PART 1: PERSONAL DETAILS

Student ID			
First Name			
Family Name			
Load	<input type="checkbox"/> Full-Time	<input type="checkbox"/> Part-Time	Mode <input type="checkbox"/> Internal <input type="checkbox"/> External

PART 2: PROGRAM CHANGES

I wish to change my program	<input type="checkbox"/> Yes	<input type="checkbox"/> No
I want to:		
<input type="checkbox"/> Transfer to PhD	<input type="checkbox"/> Transfer to Masters by Research	<input type="checkbox"/> Same Level Transfer
CURRENT PROGRAM		
Program Name		
Program Code	Program Plan	
Academic Unit		
NEW PROGRAM		
Program Name		
Program Code	Program Plan	
Academic Unit		

PART 3: CHANGE IMPACT

Will the change affect current supervisory arrangements?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<i>If yes, please attach a completed 'Change of Supervision' form</i>
Will the change impact the current Statement of Agreement?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<i>If yes, please attach a revised 'Statement of Agreement' form</i>
Will the change require a new Confirmation of Candidature?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<i>If yes, please attach a revised 'Confirmation of Candidature' form</i>
Will the change require a revised Research Proposal?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<i>If yes, please attach a revised Research Proposal</i>
Will the change extend the scholarship?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<i>If yes, please complete Part 6 with cost centre manager approval</i>

For students studying in Australia on an international student visa

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- Some of the changes arising from this request may result in a revised Confirmation of Enrolment (CoE) which could affect your student visa. For more information visit <https://i.unisa.edu.au/students/research-students/student-forms/>

PART 4: CHECKLIST & STUDENT DECLARATION

In signing this form, I:

- Confirm I have read and understood the information on <https://i.unisa.edu.au/students/research-students/student-forms/>
- Have attached any supporting documentation (if applicable)
- Have obtained *and* attached approval from my sponsor (if applicable)
- Understand that if I hold an international student visa that the changes requested in this application may affect my Confirmation of Enrolment (CoE) which could impact my student visa
- Understand that this request is provisional until confirmation is received from Graduate Research, SAS
- Understand that my scholarship may change as a result of the transfer

Student signature		Date	
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PART 5: CURRENT ACADEMIC UNIT APPROVAL

In signing this form, I confirm the following:

- The proposed change is supported by the student's current Research Degree Coordinator
- The proposed change is accompanied by the recommendation from Supervisory Panel (if applicable ⓘ)
- The extension of scholarship is supported by cost centre manager (if applicable ⓘ)

Dean of Research (or delegate) name:			
Dean of Research (or delegate) signature:		Date	
Cost Centre Manager name (if applicable ⓘ):			
Cost Centre Manager signature (if applicable ⓘ):		Date	

ⓘ Cost Centre Manager only needs to approve/sign when there are cost implications
 ⓘ Recommendation from Supervisory Panel is only required when transferring from Masters by Research to PhD

PART 6: NEW ACADEMIC UNIT APPROVAL (if applicable)

In signing this form, I confirm the following:

- The student's scholarship may be supported by the new Academic Unit (possible extension)
- The student has been assigned a new Principal Supervisor
- The appropriate research degree resources are available to enable the research degree student to
- Where the research degree student is transferring to a different Academic Unit/Institute but has the same research project a review of the research proposal has been undertaken

Dean of Research (or delegate) name:			
Dean of Research (or delegate) signature:		Date	
New Cost Centre 1 (if applicable ⓘ):			
Cost Centre 1 Manager signature (if applicable ⓘ):			
New Cost Centre 2 (if applicable ⓘ):			
Cost Centre 2 Manager signature (if applicable ⓘ):			

Staff Use: Please check and submit the completed form to **Scholarships and Candidature - SAS** via email research.students@unisa.edu.au

ⓘ Cost Centre Manager only needs to approve/sign when there are cost implications