**Transfer or Change of Qualification**

Research students should use this form to request a change to their qualification or course code. This can be to:

* Transfer to a different qualification (e.g., from a PhD in Engineering to a Master of Engineering or *vice versa*); or,
* Change course codes within the same qualification (e.g., remaining in the PhD programme but changing from Computer Science COSC790 to Electrical and Electronic Engineering ENEL790).

You must discuss any planned changes with your supervisory team before completing this form and consult the [Qualification Regulations](https://www.canterbury.ac.nz/about-uc/corporate-information/regulations/qualification-regulations/) for degree-specific Admission criteria.

Please note that changes to a qualification, including a change in course codes, may affect supervisory arrangements and have financial implications (e.g., on scholarship payments or departmental funding availability).

We recommend that doctoral students book an appointment with a Kaitoko | Research Student Advisor within Te Kura Tāura to discuss their individual circumstances and obtain advice before applying for a transfer or change of qualification. We recommend that research Master’s students discuss any changes with their Faculty Student Advisors or Graduate Research Coordinator.

Please contact Te Kura Tāura | UC Graduate School for further information on transfers.

**International students** are advised to speak with the Thesis Enrolment team to discuss their individual circumstances, including potential visa implications, prior to applying for a transfer or change of programme. If a student requires personalised advice regarding visas and immigration status, they should contact [Immigration New Zealand](https://www.immigration.govt.nz/).

**If the proposed new arrangements necessitate a change of supervisory team and/or a change in EFTS split, you must also complete an Appointment or Change of Supervisors application.**

**Section A**

*This section should be completed by the student. Before applying for any change in your study, you must first discuss the matter with your supervisors.*

|  |  |
| --- | --- |
| Student name: |  |
| Student ID number: |  |
| Senior Supervisor: |  |
| Department/School:  |  |
| Qualification (e.g., PhD in Biology): |  |
| Course code (e.g., BIOL790): |  |

|  |  |
| --- | --- |
| Proposed new course code and qualification (e.g., COSC690 - MSc in Computer Science, or ENEL790 - Electrical and Electronic Engineering PhD): |  |
| Will this request result in a change of qualification (e.g., master’s to PhD)? | [ ]  Yes [ ]  No |
| Requested date for change to take effect: |  |

|  |  |
| --- | --- |
| Please elaborate on the reason for your request:*Supply detailed information and append any supporting evidence.* *If the reason(s) for this request are private/confidential, please indicate the severity of the impacts of any issues.*  |  |
| Name/e-signature: |  |
| Date: |  |

**PLEASE FORWARD THE FORM TO YOUR SENIOR SUPERVISOR**

***You must ensure that any supporting documents are submitted along with the application.***

**Section B**

*This section should be completed by the Senior Supervisor. The Senior Supervisor should meet with the student and discuss the implications of making changes to their study before supporting any request. Note: If the proposed change will also include a change of supervisors, this section should be completed by the* ***new*** *Senior Supervisor*

Do you support this request?

[ ]  Yes

[ ]  No

|  |  |
| --- | --- |
| Please add any further comments here, with a more detailed description if you have answered “no” to the question above: *Please comment on any areas of concern, e.g., effects of this change on the timeline for degree completion, availability of resourcing and supervision.**This section must be completed.* |  |
| Name/e-signature: |  |
| Date: |  |

**PLEASE FORWARD THE FORM TO YOUR HEAD OF DEPARTMENT/SCHOOL OR THEIR DELEGATE**

***You must ensure that any supporting documents are submitted along with the application.***

**Section C**

*This section should be completed by the Head of Department/School (or the person/s with appropriate delegated authority under UC’s Academic and Research Delegations). Note: If the proposed change will also include a change of School/Department, this section should be completed by the* ***new*** *School/Department’s head or delegate.*

Do you support this request?

[ ]  Yes

[ ]  No

|  |  |
| --- | --- |
| Please add any further comments here, with a more detailed description if you have answered “no” to the question above: *Please comment on any areas of concern, e.g., effects of this change on the timeline for degree completion, availability of resourcing and supervision.* |  |
| Name/e-signature: |  |
| Date: |  |

**FOR DOCTORAL APPLICATIONS, PLEASE FORWARD TO** **GRADUATESCHOOL@CANTERBURY.AC.NZ**

**FOR RESEARCH MASTER’S APPLICATIONS, PLEASE FORWARD TO THE RELEVANT ADMINISTRATOR**

***You must ensure that any supporting documents are submitted along with the application.***

**Section D**

*This section should be completed by the Relevant Dean (or the person/s with appropriate delegated authority under UC’s Academic and Research Delegations).*

This request is:

[ ]  Approved

[ ]  Approved with conditions (specify below)

[ ]  Declined

|  |  |
| --- | --- |
| Please add any further comments here: Include any required conditions for continued enrolment and any reasons for declining a requested change. |  |
| Name/e-signature: |  |
| Date: |  |