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|  | UC Aho Hīnātore | Accelerator ScholarshipEvaluation Form |

Please submit this evaluation form to [scholarships@canterbury.ac.nz](mailto:scholarships@canterbury.ac.nz) within one week of completion of your UC Aho Hīnātore | Accelerator project.

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| *Information* |
| |  |  | | --- | --- | | Student Name: |  | | Student ID: |  | | Senior Supervisor: |  | | Project Title: |  | |
|  |
| *Achievement of Learning Outcomes (500 words max. per outcome)* |
| *Describe the key achievements made in relation to the learning outcomes set at the commencement of your 12-week project. Demonstrate how you attained the learning outcomes. If you had more than three learning outcomes, please add to the list below.*  ***Learning Outcome One:***  ***Learning Outcome Two:***  ***Learning Outcome Three:*** |

***UC Aho Hīnātore* | *Accelerator Scholarship Sign Off***

**Senior Supervisor to complete**

1. I confirm that the key learning outcomes were successfully attained. Yes  No
2. I support the student being awarded the UC Aho Hīnātore | Accelerator PhD Scholarship, and their progression to the PhD programme. Yes  No
3. The proposed PhD start date is (must be first day of a month): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ as a full time / part time student (please circle as appropriate).
4. The PhD course code is: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
5. I understand that if the student is wishing to study outside of Christchurch, that an Extramural Study Application will need to be completed and submitted to the UC Graduate School. Yes  No

Senior Supervisor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_

**Student to complete**

1. I confirm that I intend to progress to the PhD programme and accept the UC Aho Hīnātore | Accelerator PhD Scholarship. Yes  No
2. I agree with the proposed start date and enrolment details as provided by my Senior Supervisor Yes  No

Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_

**Head of Department/School to complete**

1. I have read this form and confirm that the Department/School supports this student’s progression to the PhD programme and the award of the UC Aho Hīnātore | Accelerator PhD Scholarship. Yes  No

HoD/HoS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_

**Dean of Postgraduate Research to complete**

Approved

Not approved

Comments

Dean of PG Research (or delegate): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_