**Doctoral Required Courses Form**

Please complete this form if you ***require*** a Doctoral student to complete additional courses(s) during their Doctoral tenure. Please be aware of the following conditions in doing so:

* At the relevant 6-monthly progress reviews, continued enrolment in the Doctorate will be conditional on the student passing the course(s) with the grade specified by the Senior Supervisor or higher.
* Students are normally limited to 15 points per semester and a maximum of 60 points during the tenure of their Doctoral candidature.
* Courses are normally to be taken in the first 2 years of candidature.
* Completed courses will be included on the student’s academic transcript from UC.
* Tuition Fees – at the domestic rate – for required courses are to be paid by the student’s host department/school:
	+ Students who wish to enroll in courses not required by the supervisory team can apply to the Dean of Postgraduate Research do so but will be liable for the relevant fees themselves.

**If this form is being completed at the time of approval of the student’s admission to UC, then please ensure that it is attached to the Cover Sheet and returned to the Admissions Team who will notify the student as part of the admission offer.**

**If the form is being completed once the student is already enrolled in their Doctorate, please send the form by email to** **graduateschool@canterbury.ac.nz****.**

Additional forms may be completed for the same student later in the candidature.

**Section A: Course Information**

*This section should be completed by the Senior Supervisor*

|  |  |
| --- | --- |
| Student name: |  |
| Student ID number: |  |
| Senior Supervisor: |  |
| Department/School: |  |
| Qualification (e.g., PhD in Biology): |  |
| Course code (e.g., BIOL790): |  |
| Required Course 1: | Course Code: When to be completed: Reason course is required: Grade to be achieved:  |
| Required Course 2: | Course Code: When to be completed: Reason course is required: Grade to be achieved: |
| Required Course 3: | Course Code: When to be completed: Reason course is required: Grade to be achieved: |
| Required Course 4: | Course Code: When to be completed: Reason course is required: Grade to be achieved: |

**Section B: Signatures**

**Student (only required if the student is already enrolled in the Doctorate. Not required if this is part of the initial enrolment offer):**

|  |  |
| --- | --- |
| I understand and accept the arrangements specified above: | [ ]  Yes [ ]  No *If no, please explain why:* |
| I understand that I must pass the courses specified above with the grade specified above or higher in order for my continued enrolment to be supported: | [ ]  Yes [ ]  No*If no, please explain why:* |
| Name/e-signature: |  |
| Date: |  |

**Senior Supervisor:**

|  |  |
| --- | --- |
| On behalf of the student’s supervisory team I confirm that completion of the specified course or courses is necessary for the student’s Doctoral studies:*If no, please explain why:* | [ ]  Yes [ ]  No *If no, please explain why:* |
| Name/e-signature: |  |
| Date: |  |

**Head of Department/School (or the person/s with appropriate delegated authority under UC’s Academic and Research Delegations):**

|  |  |
| --- | --- |
| I support the supervisor’s requirement for the student to complete the courses listed above to the specified standard: | [ ]  Yes [ ]  No *If no, please explain why:* |
| I confirm that completion of these courses is required as part of the student’s Doctoral studies: | [ ]  Yes [ ]  No*If no, please explain why:* |
| I confirm that the department/school will pay the student’s fees for enrolment in the specified course(s): | [ ]  Yes [ ]  No*If no, please explain why:* |
| Name/e-signature: |  |
| Date: |  |

***If this form is being completed at the time of approval of the student’s admission to UC, then please ensure that it is attached to the Cover Sheet and returned to the Admission Team (******admission@canterbury.ac.nz******).***

***If the form is being completed once the student is already enrolled in their Doctorate, please send the form by email to*** ***graduateschool@canterbury.ac.nz******.***

**Section C: Approval**

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

|  |  |
| --- | --- |
| The student’s enrolment in the above required courses is: | [ ]  Approved[ ]  Not approved |
| Please add any further comments here:  |  |

**Dean’s Signature**

|  |  |
| --- | --- |
| Name/e-signature: |  |
| Date: |  |