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**Studentship Project Details Form**

In order to recruit a student via an advertised studentship, you will need to complete this form and work with the Graduate School to organise the recruitment process.

1. The project (as shown on this form) will need to be approved by the Research Degrees Committee
2. Once approval is given, you will need to work with the Graduate School to run the recruitment process.
3. Please be aware that there are only three start dates per year (01 October, 01 January, and 01 April) and sufficient time must be left for the project to come to the RDC and for the position to be advertised and recruited for. For example, if you want a student to start in October, then ideally, this form should be sent to the May meeting of the RDC at the latest. Meetings are held in January, March, May, July, August/September and November of each year. Please contact dfrusher@sgul.ac.uk for actual dates.
4. If there are to be more than two co-supervisors, please copy and paste the relevant sections in.
5. Lead supervisors must meet the terms of the Licence to Supervise.

**TIMETABLE (to be agreed with the Graduate School)**

|  |  |
| --- | --- |
| **ACTION** | **PROVISIONAL DATE** |
| Supervisor project form sent to RDC |  |
| Studentship advert goes live on the SGUL website and FindaPhD (please be aware that you will need to pay a small fee for the advert on FindaPhD) |  |
| Closing date for studentship applications from prospective students |  |
| Shortlisting (supervisors and management team) |  |
| Students invited to interview |  |
| Interviews |  |
| Offer letters sent out |  |

**LEAD SUPERVISOR DETAILS**

|  |  |
| --- | --- |
| Title |  |
| First name(s) |  |
| Last or Family Name |  |
| Email address |  |
| Institute |  |
| Your current position / role |  |
| Your current contract end date (dd/mm/yy) |  |
| Your primary research area |  |
| Your skills and expertise |  |
| What specific skills training can you bring to this SGUL PhD programme? |  |
| Publications (list up to 4 relevant publications published in the last 5 years) |  |
| Will additional financial resources be required to support this project and, if so, where will these resources come from? |  |
| If you have funding in place, please state the funder, amount, dates and grant code |  |  |
|  |  |
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Current supervisory roles of Lead supervisor

**PLEASE CONTACT THE GRADUATE SCHOOL FOR A PRINT OUT OF SGUL STUDENTS IF YOU DO NOT HAVE THIS INFORMATION.**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Student name and Institution (e.g. SGUL) | Degree undertaken (MPhil/PhD or MD(Res)) only | Full or Part-Time? | Date of Registration | Supervisor role? (Lead or co-supervisor) |
|  |  |  |  |  |
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|  |  |  |  |  |

Most recent supervision history of previous students lead supervisor (last five years) –

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Student name and Institution (e.g. SGUL) | Degree undertaken (MPhil/PhD or MD(Res)) only | Full or Part-Time? | Time to thesis submission\* (e.g. within 4 Years) | Supervisor role? (Lead or co-supervisor) |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**\*** Details will be confirmed with Graduate School records for students registered at SGUL

Further details of Lead supervisor’s supervision history

|  |  |
| --- | --- |
| Total number of PhD students previously supervised |  |
| Total number of MD(Res) students previously supervised |  |
| Total number of students who withdrew or did not complete |  |

Attendance at SGUL research degree supervisor training (please contact SGUL Human Resources to confirm your dates)

**Please note that attendance at the ‘Best Practice’ training is mandatory every three years, in order to remain up-to-date with changes and amendments to SGUL rules and regulations.**

a) I confirm that I have attended SGUL research degree supervisor training as follows:

Introduction on (date)…………………………………………

Best Practice on (date)………………………………………..

Other training (give details and dates)……………………………………………………………................................................................................

……………………………………………………………………………………………………………………………………………………

b) I confirm that I have read the SGUL ‘Licence to Supervise’ policy and have appropriate experience to act as a Lead Supervisor for this project.

Signature……………………………………………………………………………………………………………………………………

Date……………………………………………………………………………………………………………………………………………

**CO-SUPERVISOR 1**

|  |  |
| --- | --- |
| Title |  |
| First name(s) |  |
| Last or Family Name |  |
| Email address |  |
| Institute |  |
| Your position / role |  |
| Your current contract end date (dd/mm/yy) |  |
| Your primary research area |  |
| Your skills and expertise |  |
| What specific skills training can you bring to this SGUL PhD programme? |  |
| Publications (list up to 4 relevant publications published in the last 5 years) |  |

Current supervisory roles of Co-Supervisor, if applicable

**PLEASE CONTACT THE GRADUATE SCHOOL FOR A PRINT OUT OF SGUL STUDENTS IF YOU DO NOT HAVE THIS INFORMATION.**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Student name and Institution (e.g. SGUL) | Degree undertaken (MPhil/PhD or MD(Res)) only | Full or Part-Time? | Date of Registration | Supervisor role? (Lead or co-supervisor) |
|  |  |  |  |  |
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|  |  |  |  |  |
|  |  |  |  |  |

Most recent supervision history of previous students, if applicable (last five years) –

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Student name and Institution (e.g. SGUL) | Degree undertaken (MPhil/PhD or MD(Res)) only | Full or Part-Time? | Time to thesis submission\* (e.g. within 4 Years) | Supervisor role? (Lead or co-supervisor) |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**\*** Details will be confirmed with Graduate School records for students registered at SGUL

Further details of supervision history, if applicable

|  |  |
| --- | --- |
| Total number of PhD students previously supervised |  |
| Total number of MD(Res) students previously supervised |  |
| Total number of students who withdrew or did not complete |  |

Attendance at SGUL research degree supervisor training (please contact SGUL Human Resources to confirm your dates)

**Please note that attendance at the ‘Best Practice’ training is mandatory every three years, in order to remain up-to-date with changes and amendments to SGUL rules and regulations.**

I confirm that I have attended SGUL research degree supervisor training as follows:

Introduction on (date)…………………………………………

Best Practice on (date)………………………………………..

Other training (give details and dates)……………………………………………………………................................................................................

……………………………………………………………………………………………………………………………………………………

Or

I have not yet attended any supervisory training

Signature……………………………………………………………………………………………………………………………………

Date……………………………………………………………………………………………………………………………………………

**CO-SUPERVISOR 2**

|  |  |
| --- | --- |
| Title |  |
| First name(s) |  |
| Last or Family Name |  |
| Email address |  |
| Institute |  |
| Your position / role |  |
| Your current contract end date (dd/mm/yy) |  |
| Your primary research area |  |
| Your skills and expertise |  |
| What specific skills training can you bring to this SGUL PhD programme? |  |
| Publications (list up to 4 relevant publications published in the last 5 years) |  |

Current supervisory roles of Co-Supervisor, if applicable

**PLEASE CONTACT THE GRADUATE SCHOOL FOR A PRINT OUT OF SGUL STUDENTS IF YOU DO NOT HAVE THIS INFORMATION.**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Student name and Institution (e.g. SGUL) | Degree undertaken (MPhil/PhD or MD(Res)) only | Full or Part-Time? | Date of Registration | Supervisor role? (Lead or co-supervisor) |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

Most recent supervision history of previous students, if applicable (last five years) –

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Student name and Institution (e.g. SGUL) | Degree undertaken (MPhil/PhD or MD(Res)) only | Full or Part-Time? | Time to thesis submission\* (e.g. within 4 Years) | Supervisor role? (Lead or co-supervisor) |
|  |  |  |  |  |
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|  |  |  |  |  |

**\*** Details will be confirmed with Graduate School records for students registered at SGUL

Further details of supervision history, if applicable

|  |  |
| --- | --- |
| Total number of PhD students previously supervised |  |
| Total number of MD(Res) students previously supervised |  |
| Total number of students who withdrew or did not complete |  |

Attendance at SGUL research degree supervisor training (please contact SGUL Human Resources to confirm your dates)

**Please note that attendance at the ‘Best Practice’ training is mandatory every three years, in order to remain up-to-date with changes and amendments to SGUL rules and regulations.**

I confirm that I have attended SGUL research degree supervisor training as follows:

Introduction on (date)…………………………………………

Best Practice on (date)………………………………………..

Other training (give details and dates)……………………………………………………………................................................................................

……………………………………………………………………………………………………………………………………………………

Or

I have not yet attended any supervisory training

Signature……………………………………………………………………………………………………………………………………

Date……………………………………………………………………………………………………………………………………………

**PROJECT DETAILS**

|  |  |
| --- | --- |
| Title of PhD projectPlease makes sure the wording you use and your project title ‘sells’ your project to the board (when assessing your project’s suitability for inclusion) and to potential students (we will copy this for the project title on the studentship advert). |  |
| Theme |  |
| Core Skills |  |
| Project Summary (approx. 100 words)This to be copied on the studentship advert. |  |
| Please state primary research question and hypothesis/ses being tested and describe how this study is novel and appropriate for a research degree. |  |
| Brief description of project (please be as brief as possible)Has this project been subject to full external peer review in the form of a grant application or studentship award? |  |
| Skills we expect a student to develop/acquire whilst pursuing this project(max. 250 words) |  |
| Potential non-academic partners for this project? Please name these and provide a short paragraph about each. |  |
| Who will this project be advertised to – Home, Home/EU or Home/EU/Overseas?NB – at this time EU and Overseas students will be required to pay the difference between the Home and the Overseas fee rates and this information will be included in the advert |  |

Any additional information not supplied elsewhere

|  |
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|  |

**SIGNATURES REQUIRED FOR APPROVAL OF PROJECT, SUPERVISORY TEAM AND APPLICANT**

**For completion by the Postgraduate Coordinator\***

**I certify that:**

a) I have met and discussed this project with the supervisor/s and any amendments to the project have been made and agreed.

b) I support the proposed supervisory team

Printed Name……………………………………………………………………………………………………………………………

Signature……………………………………………………………………………………………………………………………………

Date……………………………………………………………………………………………………………………………………………

**\* *If the Postgraduate Coordinator is one of the proposed supervisors, an alternative Postgraduate Coordinator must sign above.***

**For completion by the Head of Institute/Faculty \*\***

**I certify that:**

a) I approve the proposed research proposal.

c) Sufficient finance, suitable facilities and adequate supervision are available in the Institute/Faculty for the full period of study.

d) I agree to the proposed supervisors and confirm that they will be employed for the length of time of study for the student plus one year in case of resubmission.

Printed Name……………………………………………………………………………………………………………………………

Signature……………………………………………………………………………………………………………………………………

Date……………………………………………………………………………………………………………………………………………

**\*\* *If the Head of Institute/Faculty is one of the proposed supervisors, then his or her Deputy must sign***