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| **Section 1: Details of the candidate** | | | |
| Name of candidate |  | | |
| College |  | | |
| Course | PhD  Masters | Student Number |  |

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| --- | --- | --- | --- | --- | --- | --- |
| **Section 2: Supervisory Panel**  Please list your new supervision panel and indicate the percentage of supervision that each will undertake – must add up to 100% By signing below, you agree to the supervision changes detailed in this form. All supervisors must sign the form. | | | | | | |
|  | Currently Registered on the CDU Supervisor Register? | | CDU Staff Status  (Internal, External or Adjunct) | CDU College | Signature | % |
| Principal Supervisor |  | | | | | |
|  | Y | N |  |  |  |  |
| Associate Supervisor |  | | | | | |
|  | Y | N |  |  |  |  |
|  | Y | N |  |  |  |  |
|  | Y | N |  |  |  |  |
|  | Y | N |  |  |  |  |

*All supervisors CDU Staff or External, must be registered on the CDU Supervisor Register*

|  |  |  |  |  |  |  |  |  |
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| **Section 3: Please clearly state whether you are adding a new supervisor or replacing a current supervisor and provide a reason for the change:** | | | | | | | | |
|  | | | | | | | | |
| If you have removed any supervisors from your panel. Have you advised them?  Yes  No | | | | | | | | |
| **Date for change to be effective (DD/MM/YYYY):** |  |  |  |  |  |  |  |  |

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| **Section 4: Change of College**  Please complete only if you are changing Principal Supervisors and they are a member of a different college | |
| If your principal supervisor now is a member of a different college to you, would you like to shift to this college?  Yes  No | |
| If yes, please confirm NEW College |  |

|  |  |
| --- | --- |
| Candidate Signature: | Date: |

***Candidate:*** *Please submit form to your College or School HDR Administration team once all signatures have been received for your new panel*

***College /School HDR Administration:*** *Please submit form to* [*research.degrees@cdu.edu.au*](mailto:research.degrees@cdu.edu.au) *once endorsed by College Dean/Delegate or Director/Delegate.*