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| **newcastle_master_blk** | **PREVIOUS STUDY APPLICATION – DOCTORAL PROGRAMMES** |

**You should complete and submit this form if you wish to apply for previous research degree study at a different institution to be taken into account for calculation of your period of candidature at Newcastle University.**

**Minimum Study Duration at Newcastle**

**Full-time Doctoral Programme One year of minimum study/primary research**

**Part-time Doctoral Programme Two years of minimum study/primary research**

**If this previous study application is approved, you must also submit a postgraduate application so that a formal academic offer can be made for the programme of study at Newcastle University. An application can be made at:** [**http://www.ncl.ac.uk/postgraduate/apply/form/**](http://www.ncl.ac.uk/postgraduate/apply/form/)

**If a previous study application is approved after you have already received an academic offer, a revised offer letter will be produced by Postgraduate Admissions taking into account your previous study.**

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| **Section 1 – To be completed by CANDIDATE** |
| **Personal Details** |
| Name |  | Student No (from application, if known) |  |
| Degree |  |
| Stage |  | Full-Time/Part-Time |  |
| Email address for correspondence |  |
| **Previous Study Details** |
| Previous Institution |  |
| Start date of study at previous Institution |  |
| Reason for Transfer |  |
| Proposed start date at Newcastle University  |  |
| *Copies of the following from your current/previous institution should be included with your application:** *Project Approval documents*
* *Annual Progress Review reports*
* *Letter confirming your dates of study.*

*Consideration of the previous study request will not be possible without these documents* |
| **Supervisory Team (previous institution)** |
| Name:  | Position:  |
| Name:  | Position:  |

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| **Proposed Supervisor at Newcastle if different from above:** |
| Name: | Position: |

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| Signed: Date: |

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| **SECTION 2 - To be completed by PROPOSED ACADEMIC UNIT**  |
| **Supervisor’s Statement In Support of Application**  |
| Name: Signed: Date: |

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| **SECTION 3 – To be completed by HEAD OF PROPOSED ACADEMIC UNIT**  |
| **Do you approve this request?** | Yes 🞏 | No 🞏 |
| **Comments**  |
| **Name:**  |
| **Signed: Date:** |

**STUDENTS IN THE FACULTIES OF HASS AND SAGE, RETURN THIS FORM TO:** **gradschool@ncl.ac.uk** **OR**

**HASS and SAGE GRADUATE SCHOOL, LEVEL 6, HENRY DAYSH BUILDING, , NEWCASTLE UNIVERSITY, NEWCASTLE UPON TYNE, NE1 7RU**

**STUDENTS IN MEDICAL SCIENCES, RETURN THIS FORM TO:**

NUBIpgenquiries@newcastle.ac.uk

TCRIpgenquiries@newcastle.ac.uk

PHSIpgenquiries@newcastle.ac.uk

 **ORMEDICAL SCIENCES GRADUATE SCHOOL, 3RD FLOOR, RIDLEY BUILDING 1, NEWCASTLE UNIVERSITY, NEWCASTLE UPON TYNE, NE1 7RU**

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| **SECTION 4 – To be completed by Dean of Postgraduate Studies** |
| **Do you approve this request?** | Yes 🞏 | No 🞏 |
| **Comments** |
| Signed: Date: |

Graduate School Guidance

PG Dean to consider:

* Whether project approval is required on registration at Newcastle. This may be useful if the student is transferring early in their candidature.
* Whether the APR timeline should differ to conventional timelines, e.g. whether a 6 month APR would be beneficial to support transition.