Adelaide Graduate Research School graduate.research@adelaide.edu.au



Previous Higher Degree by Research Enrolment and Applications for Transfer/Credit

Family Name				
Given Name(s)				
I am an International Student	O Yes	0	No	
PLEASE NOTE: Your Research Training P Further information regarding the RTP chttps://www.education.gov.au/research	rogram (RTP) Fees O can also be found on	offset entitlement of the Department of	and period of candid of Education and Tra	ced as required.
Currently Enrolled Students				

If you are transferring from another institution please provide the following information:

Institution (if other than the University of Adelaide): Commencement Date: / ___ / ___ Name of supervisor: Previous research topic: New Research topic (if applicable): Is your supervisor transferring to the University of Adelaide? O Yes O No If no, please provide a reason for the transfer

Previously Enrolled Students	
Name of Former Program:	
Institution (if other than the Universit	ty of Adelaide):
Years of Study://	to / /
Name of supervisor:	
Previous research topic:	
New Research topic (if applicable):	
Did you complete this program? O	Yes O No
If No, please provide an explanation	of reason for withdrawal/discontinuing previous program
CONTACT DETAILS	
	v of the person or officer responsible for the administration of higher degree by ution. The specified person/officer will be contacted to verify the number of FTE days e by research enrolment.
Name	
Position	
Phone Number	
E-mail	
Adelaide must be attached	of the complete transcript from any academic institution other than the university of together with a letter (endorsed by the Head of the institution or your School/Discipline of the research undertaken and the duration of study
enrolment consumed at a previous	Ith requires the University to confirm the number of Full-time Equivalent (FTE) days Australian institution so that your remaining entitlement under the RTP Fees Offset d. For further information see the RTP Guidelines, available online at: rch-training-program
APPLICATION FOR CREDIT ON TH	HE BASIS OF COURSEWORK PREVIOUSLY UNDERTAKEN
If you are applying for credit for cour	rsework completed within a previous program please provide the following information:
NOTE: Your period of candidature w	vill be reduced as required
Name of Former Program:	
Institution (if other than the Universit	ty of Adelaide):
University of Adelaide program for w	which credit is being sought:
School/Discipline:	

Page **2** of **4**

Updated 31 March 2022

Course(s) completed in former program on which credit application is based	School/Discipline recommendation including no of credit units granted

Note: If applying for credit on the basis of coursework completed at other than the University of Adelaide, the application must be accompanied by an official certified copy of the complete academic record at that academic institution, together with photocopies of the syllabuses of the course(s) which form the basis of the credit application. Note that the syllabuses photocopies must be as they appear in the Calendar/Handbook of the tertiary institution for the relevant year(s). A brief description of the structure of the degree, if available, would be helpful.

SCHOLARSHIP DETAILS

If you held a scholarship(s) for your current or previous HDR program please provide details below:

Scholarship Title	Degree	Commencement Date	Date of Termination/Transfer

As verification of the details of your scholarship(s) must be obtained please provide contact details below of the person or officer in your institution responsible for the administration of your scholarship.

Name	
Position	
Department	
Phone Number	
E-mail	

CERTIFICATION BY STUDENT

I declare that the information supplied by me in this application is complete, true and correct in every particular.

I authorise the University of Adelaide to obtain confirmation of my academic background from other educational institutions and relevant authorities including details of my enrolment, academic record, progress, attendance, examination results and scholarship records.

Transcript Attached O Yes O No	Syllabus A	attached O Yes O	NO	
Name		Signature		Date
UNIVERSITY OF ADELAIDE AP	PROVAL	S ONLY		
As at date:	Number of F	TE days of Credit:	Number of R	RTP days of Credit:
Endorsement by Head of School	ol or Disc	ciple/Postgradu	ate Coordinato	or
Head of School/Postgraduate Coordinator		Signature here		 Date
Head of School/Postgraduate Coordinator's name (circle as appropriate)		Signature nere		Date
Approval Admissions Officer				
Name		Signature here		Date
For Office Use Only				
Candidature consumed:RTP consumed:		_ Comment:		
Scholarship tenure consumed:				

www.adelaide.edu.au/graduate-research Ph: (08) 8313 5882 Email: graduate.research@adelaide.edu.au

Further Information

Ph: (08) 8313 5882

Coursework to be credited: Yes/No