

Change / Addition to HDR Supervisory Team

To enable this electronic form, you must first **SAVE** it then **REOPEN** as a PDF file (it will not function properly when used in a browser window). Please complete this form to advise of any changes to your Supervisory Team.

1. Student Details

First Name	<input type="text"/>	Last Name	<input type="text"/>	Student ID	<input type="text"/>
School:	<input type="text"/>	Faculty <select>	<input type="text"/>		

2. Current Supervisory Team

Please list your current HDR Supervisory team and detail the appropriate action.
Please note the Principal Supervisor must be listed as research active:

Principal Supervisor	Research Active: <input type="radio"/> Yes <input type="radio"/> No	Action:	<input type="text"/>		
First Name	<input type="text"/>	Last Name	<input type="text"/>	Staff ID	<input type="text"/>
Co-Supervisor #1	Action:		<input type="text"/>		
First Name	<input type="text"/>	Last Name	<input type="text"/>	Staff ID	<input type="text"/>
Co-Supervisor #2	Action:		<input type="text"/>		
First Name	<input type="text"/>	Last Name	<input type="text"/>	Staff ID	<input type="text"/>
Co-Supervisor #3	Action:		<input type="text"/>		
First Name	<input type="text"/>	Last Name	<input type="text"/>	Staff ID	<input type="text"/>

3. Additions to Supervisory Team

Please list any new supervisors you are seeking to be added :

(1)	Title	<input type="text"/>	First Name	<input type="text"/>	Last Name	<input type="text"/>
Capacity <select>	<input type="text"/>	CSU Academic/Adjunct ID#	<input type="text"/>	Research Active: <input type="radio"/> Yes <input type="radio"/> No		
Email	<input type="text"/>		Role <select>	<input type="text"/>		
(2)	Title	<input type="text"/>	First Name	<input type="text"/>	Last Name	<input type="text"/>
Capacity <select>	<input type="text"/>	CSU Academic/Adjunct ID#	<input type="text"/>	Research Active: <input type="radio"/> Yes <input type="radio"/> No		
Email	<input type="text"/>		Role <select>	<input type="text"/>		

Please outline why these changes have been requested?

4. Approvals and Authorisations

PLEASE NOTE: This is an electronic form and requires the below authorisations in the order they appear. After each authorisation this form needs to be emailed to the next signatory by clicking the 'submit by email to next signatory' button and entering in the next recipient's email address. If you do not have an electronic signature, you may create one in the signature field below. If you do not wish to create one, please print this form, sign, scan and email to the next signatory. For any queries about this form please contact the [Research Office](#).

Student:

Name Signature Date:

Current / New Principal Supervisor

I endorse this change in Supervisory Team

Name Signature Date:

Head of School

I endorse this change in Supervisory Team

Name Signature Date:

Faculty Associate/Sub-Dean (Research or Graduate Studies)

I endorse this change in Supervisory Team

I confirm the Principal Supervisor has been reviewed and is currently registered as research active: Yes No

I recommend that Co-Supervisor 1 is: <select>:

I recommend that Co-Supervisor 2 is: <select>:

I recommend that Co-Supervisor 3 is: <select>:

Name Signature Date:

Research Commit Delegate

I endorse this change in Supervisory Team

Name Signature Date: