This form is used to apply to the HDR Supervisor Register or change Supervisor Registration level. The completed form must be sent to [graduate-school@une.edu.au](https://myune-my.sharepoint.com/personal/nrumpca_une_edu_au/Documents/HDRProjCoord/Share%20folder%20Proj%20Coor/Supervision/Sup%20Reg/graduate-school@une.edu.au). Please refer to the [HDR Supervision Policy](https://policies.une.edu.au/document/view-current.php?id=272) for more information.

Section 1: Application Type

|  |  |
| --- | --- |
| **Select Application Type Below** | Choose an item. |
| **Requested Supervisor Registration Level** | Choose an item. |

Section 2: Details

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Title** |  | | **Other** |  |
| **Given or First Name(s)** |  | | | |
| **Surname or Family Name** |  | | | |
| **Date of Birth** (Day/Month/Year) | |  | | |

Section 3: University of New England Academic Staff

|  |  |  |
| --- | --- | --- |
| **Employee Number** |  | |
| **UNE Email** |  | |
| **Employment** | Choose an item. | |
| **School/Unit** | | Choose an item. |
| [**Discipline Code**](https://www.une.edu.au/research/graduate-research-school/hdr-forms-and-policies/discipline-codes) | D00 | |

Section 4: Qualifications and Supervision Experience

Each application must include a CV/Resume outlining the employment history, qualifications, at least two (2) recent publications, etc.

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Highest Degree Completed** | |  | | | | | | |
| **Year Degree Completed** | |  | | **University Degree Awarded** | |  | | |
| [**ORCiD**](https://orcid.org/) | |  | | | | | | |
| **Year Completed Supervision Accreditation Training** (if not completed leave blank) | | | | | | |  | |
| **Previous Supervision Experience?** | | **\*Yes –** complete details below |  | | **No** | | |  |
| **\*Previous Supervision Details** (Skip if no previous supervision experience) | | | | | | | | |
| **Student Name** |  | | | **Period of Supervision** (Years) | | | |  |
| **University/Institution** |  | | | **Highest Academic Level Supervised** (PhD, Master) | | | |  |

Section 5: School Approval

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Head of School or delegate (for example, HDR Coordinator) Certification** - By signing below you certify that the following items are true: | | | | | | | |
| **1.** | Confirm satisfaction that the applicant meets the criteria for the requested registration level in accordance with the HDR Supervision Policy | | | | | | |
| **2.** | Confirm satisfaction that the applicant is knowledgeable of the current policies, procedures and guidelines governing the conduct of research and research degrees at the University of New England. | | | | | | |
| **3.** | The applicant is aware that all supervisors employed by UNE must complete Supervisor Refresher programs every two (2) years and undertake supervisory development activities. | | | | | | |
|  | | | | | | | |
| **Head of School or delegate** | |  |  |  |  | Click or tap to enter a date. |  |
|  | | **Name** |  | **Signature** |  | **Date** |  |