**Doctoral Provisional Year Review**

Candidate’s Name:       ID:

**Instructions**

* Graduate Centre sends the candidate’s registration summary and instructions for downloading the provisional year review form to the candidate and supervisor/s.
* Candidate and supervisor fill in relevant sections ensuring that the joint or co-supervisor is consulted.
* Supervisor and candidate meet to discuss comments and to complete the joint report
* Supervisor and candidate sign the forms
* Any changes are indicated on the registration summary
* Supervisor forwards all forms, including the candidate’s research proposal (approved by a Dept or Faculty Postgraduate Committee) to the HoD for consideration and signature.
* HoD ensures there are no issues to be dealt with, signs the forms, and forwards them to the Associate Dean (Postgraduate) for signature.
* Associate Dean (Postgraduate) forwards completed forms to the Graduate Centre.

**HEAD OF DEPARTMENT**

If any concerns have been raised by the candidate or supervisor, please indicate what action has been taken and what further action you recommend:

**I confirm that the candidate’s research proposal has been approved by the PG Committee:** yes

**The candidate’s research proposal is attached** yes

**I recommend that the candidate’s registration be:**

Confirmed

Continued on a provisional basis for a period of three to six months (*please specify*)   (number of months)

Discontinued and the candidate recommended for enrolment in another degree

Terminated (*please attach a memo or DOC6 with details)*

**I recommend that the alterations to registration be:** approved  not approved

.....................................................................................................

**Signature of Head of Department**

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**Name Date**

**ASSOCIATE DEAN (POSTGRADUATE)**

**I endorse the above recommendations** yes  no

Please note any issues which need to be referred to the Dean of Graduate Studies:

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**Signature of Associate Dean (Postgraduate)**

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**Name Date**

Candidate’s Name:       ID:

**SUPERVISOR**

*Please note that all postgraduate policies and guidelines are available at:* [*http://www.auckland.ac.nz/uoa/cs-current-pg-policies*](http://www.auckland.ac.nz/uoa/cs-current-pg-policies)

Overall quality of work of the candidate

a. Very good  d. Satisfactory but irregular

b. Good  e. Below acceptable standard

c. Satisfactory  f. Not known

If (d) or (e) what measures have you taken?

Overall rate of progress of the candidate

a. Very good  d. Satisfactory but irregular

b. Good  e. Below acceptable standard

c. Satisfactory  f. Not known

If (d) or (e) what measures have you taken?

3. Has the candidate met all of their provisional goals? Yes  No

If No, please comment and list any requirements for extension of provisional registration:

4. How often and by what means is contact with the candidate maintained (e.g. email, face-to-face)?

5. Are you satisfied with the frequency and means of contact? Yes  No

If No, please comment:

1. Are there any issues of which the candidate or Head of Department should be aware? Yes  No

If Yes, what are these?

**I recommend that the candidate’s registration be:**

Confirmed

Continued on a provisional basis for a period of three to six months (*please specify*)  (number of months)

Discontinued and the candidate recommended for enrolment in another degree

Terminated

**I have consulted the joint or co-supervisor:** yes

**I have discussed my comments and completed the joint report with the candidate** yes

**I have suggested alterations to the candidate’s registration** yes

**The candidate’s research proposal is attached** yes

...................................................................................................... ......................................................................................................

**Signature of Supervisor 1 Signature of Supervisor 2**

..................................................................................................... .....................................................................................................

**Name Date Name Date**

Candidate’s Name:       ID:

**CANDIDATE**

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1. I rate the overall quality of my work as:

a. Very good  c. Satisfactory

b. Good  d. Below my expectations

2. I assess my overall rate of progress as:

a. Very good  c. Satisfactory

b. Good  d. Below my expectations

1. In the last year have you given a departmental seminar? Yes  No
2. In the last year have you attended any conferences? Yes  No
3. In the last year have you given any artistic presentations or performances? Yes  No
4. In the last year have you published anything? Yes  No

If Yes, please give details

1. Have you submitted work to your supervisor/s? Yes  No

8. Have you received written feedback? Yes  No

9. How often and by what means (e.g. email, face-to-face) is contact with your supervisor maintained?

10. Are you satisfied with the frequency and means of contact? Yes  No

If No, please comment:

11. What kinds of assistance from your supervisor have you found to be helpful?

12. Is there anything your supervisor does that is not helpful?

13. Are there particular problems and/or issues that you would welcome more help with?

Candidate’s Name:       ID:

13. If you have concerns regarding your progress or supervision which cannot be resolved in discussion with your supervisor, you should approach:

- the postgraduate adviser in your department

- the head of your department

- the Associate Dean (Postgraduate) of your faculty

- the Graduate Centre (ext 81321)

- Student Learning Services (ext 88850)

- AUSA Student Advice Hub

Documents available on the School of Graduate Studies website (<http://www.auckland.ac.nz/uoa/cs-current-pg-policies>) include:

- Resolution of Student Academic Complaints and Disputes Statute

- Doctoral Supervision Policy and Procedures

- Doctoral Candidates – Resources and Support Guidelines

14. Are there any intellectual property issues which have not been resolved? Yes  No

If Yes, please comment:

15. Briefly list your progress or achievements over the last year (at least ½ page is expected, but not more than one page)

**I have completed and discussed the joint report with my supervisor** Yes  No

If No please comment:

**I have completed all other relevant sections of the report** Yes  No

If No please comment:

**Signature of Candidate**...................................................................................................... **Date**........................................

Candidate’s Name:       ID:

**JOINT REPORT**

*Please note that all postgraduate policies and guidelines are available at:* [*http://www.auckland.ac.nz/uoa/cs-current-pg-policies*](http://www.auckland.ac.nz/uoa/cs-current-pg-policies)

1. Please give an expected completion date:
2. Are all the resources needed (e.g. equipment, funds) for completion by this date available? Yes  No

If No, please comment:

1. Ethical clearance

a. has been obtained

b. is pending

c. is not required

1. What sections of the thesis have been written (in draft or final form)?

1. Are there any changes to the registration conditions/details listed on the front page of this report? Yes  No

If Yes, please indicate changes on the registration summary which is attached to this report.

1. Please agree upon, and briefly describe, the work you expect to be achieved next year:

Candidate’s Name:       ID:

**PReSS Account – indicative budget**

|  |  |
| --- | --- |
| Current available balance | $ |

Proposed Expenditure:

|  |  |  |  |
| --- | --- | --- | --- |
|  | Current year  20 | Next year  20 | Following year  20 |
| Consumables | $ | $ | $ |
| Conference travel costs | $ | $ | $ |
| Research travel/Field trip costs | $ | $ | $ |
| Photocopying and printing | $ | $ | $ |
| Other (please describe) | $ | $ | $ |
| Total | $ | $ | $ |

Approved by supervisor:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature