**Doctoral Provisional Year Review**

Candidate’s Name: …………………………………………………………………………… ID: ………………………………………..

**Instructions**

* The School of Graduate Studies 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 School of Graduate Studies at sgsadmin@auckland.ac.nz.

**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:

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**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 [ ]

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**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?

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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?

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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:

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

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

If No, please comment:

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

If Yes, what are these?

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**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[ ]

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

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**Name Date Name Date**

Candidate’s Name: …………………………………………………………………………… ID: ………………………………………..

**CANDIDATE**

*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. 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

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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?

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

If No, please comment:

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

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

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

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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 School of Graduate Studies (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:

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

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

If No please comment:

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

If No please comment:

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**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:

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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)?

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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:

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Candidate’s Name: …………………………………………………………………………… ID: ………………………………………..

**PReSS Account – indicative budget**

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

 Proposed Expenditure:

|  |  |  |  |
| --- | --- | --- | --- |
|  | Current year20\_\_\_ | Next year20\_\_\_ | Following year20\_\_\_ |
| Consumables | $  | $  | $  |
| Conference travel costs | $  | $  | $  |
| Research travel/Field trip costs | $  | $  | $  |
| Photocopying and printing | $  | $  | $  |
| Other (please describe) | $  | $  | $ |
| Total | $  | $  | $ |

 Approved by supervisor:

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

 Signature