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**HIGHER DEGREES COMMITTEE**

**Form RDC 1**

***REGISTRATION OF THE RESEARCH PROGRAMME OF STUDY***

**(This form should be completed electronically and signed. Emails from the signators confirming their approval will be accepted if a signature or electronic signature is not possible. )**

**Purpose of the RDC1 stage: Registration of the research programme of study**

The RDC1 milestone ensures that all research students have the arrangements for their proposed research programme of study registered promptly within one month of their start date. Particularly, the RDC1 stage confirms that there is an appropriate research project, supervisory team, consideration of any ethical issues and a personal development plan in place.

**Student Information** (To be completed by the student and the Director of Studies)

|  |  |
| --- | --- |
| **Name** |  |
| **Matriculation Number** |  |
| **Matriculation Date** |  |
| **School** |  |
| **Mode of Attendance** | **Part-time Full-time**  **Delete as Applicable** |

**Reviewer Information and Recommendation** (To be completed by the reviewer)

|  |  |
| --- | --- |
| **Name of Reviewer** |  |
| **Date Issued** |  |
| **Date Returned** |  |

Following consideration of the application form and, where appropriate, discussion with the

Director of Studies, the following recommendation is made to the Higher Degrees Committee:

|  |  |
| --- | --- |
| **Approval** |  |
| **Approval with recommendations to be conveyed to the Director of Studies (details attached)** |  |
| **Unable to recommend approval following discussion with Director of Studies. Application referred to full Committee** |  |

**Section 1 General (To be completed by the student and the Director of Studies)**

|  |  |
| --- | --- |
| **1.1 Application For** | **MPhil MPhil/PhD PhD ProfD**  **Delete as Applicable** |
| **1.2 Funding Category** | **University Funded School Funded Externally Funded**  **Self-Funded Staff Sponsored Other (please state)**  **Delete as Applicable** |
| **1.3 Particulars of any grant or award held in connection with the proposed research** |  |
| **1.4 Proposed Title of research** |  |

**Section 2 The Research (To be completed by the student and the Director of Studies)**

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| --- | --- | --- | --- |
| **2.1 Collaborating or co-operating establishment(s).**  **Please specify if there is a collaborating or co-operating establishment and provide their name and address.**  **If there is a collaborating establishment a letter of support should be attached.**  **A collaborating establishment** is one that has some formal contractual arrangements with the research student project. For example the establishment is funding the project and has specific requirements and agreements for the partnership or there are Intellectual Property agreements.  **A co-operating establishment** is one that is offering access to resources such as seminars, library, training, with no formal contract required. | | | |
| **Collaborating Establishment Co-operating Establishment None** (delete as applicable)  **Name**  **Address** | | | |
| **2.2 Ethical Considerations:**  **Does the programme of research involve human or animal participants?** | | **Yes No**  (delete as applicable) | |
| **If yes, please provide the following details.**  **1) Identify any ethical issues**  **2) Discuss how you plan to address the ethical issues.**  **3) Summarise the status of your application for ethical approval.**  Please note that approval of the research programme by the School Ethics Committee and/or an external Ethics committee (eg NHS) will be required if you answer yes. This approval does not need to be obtained before submitting this application form for registration of your research programme of study, but it does need to be in place before the research can commence. | | | |
| **Details** | | | |
| **2.3 Conflict of Interest:**  **Does this project present a conflict of interest for the student or any individual on the supervisory team?** | | | **Yes No**  **Delete as Applicable** |
| **If yes, please state any potential conflict of interest which may arise or be perceived to arise in undertaking this project.**  A conflict of interest should be specified when those who are involved with the conduct or reporting of research also have personal, financial or other interests, or where they can benefit in some other way, depending on the results of the research. The point about a conflict of interest is that it needs to be publically disclosed from the outset. It should not, and probably most of the time does not, impart any effect on the results of the research. However, it might, if discovered later, give rise to concern. | | | |
| **Details** | | | |
| **2.4 Facilities**  **Detail the facilities available for the investigation (including funding, location). Include the relationship between work to be undertaken in collaborating or co-operating establishment and that to be undertaken at the University.** | | | |
| **Details** | | | |
| **2.5 Risk Assessment**  **Confirm that a risk assessment has been carried out for the project**  All research students must undertake a risk assessment of their research project. Please confirm that this has been done and give a brief summary of the risk assessment undertaken. For some disciplines this will involve following a specific formal risk assessment process. For others, the student should identify any risks involved in carrying out the research project and how they plan to mitigate the risks. | **Yes No**  **Delete as Applicable** | | |
| **Summary of Risk Assessment** | | | |
| **2.6 Confirm that the student has been made aware of all Health and Safety regulations** | **Yes No**  **Delete as Applicable** | | |
| **2.7 Confirm that the student’s Personal Development Plan and Record (PDP/PDR) has been updated and attached to this RDC1 form.**  A copy of the PDP/PDR template and advice on how to complete it can be found in the student’s logbook at [www.gcu.ac.uk/graduateschool/guidelines](http://www.gcu.ac.uk/graduateschool/guidelines). | **Yes No**  **Delete as Applicable** | | |

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| **2.8 Research Project Key Words**  **List up to three key words that best describe the discipline areas covered by the research project.** |
|  |
| **2.9 Research Project Summary**  **(Maximum one page, 500 words)**  **Please include the following headings and under each heading answer the relevant questions.**   1. **The research topic area**   *What is the nature of the research area or problem in layman’s terms? What is the gap in our knowledge?*   1. **Aim of the research project**   *What is the aim of the project to address the gap?*   1. **Outline of the research design and methods**   *What methodologies/approaches/theories are involved in your research? How do you plan to carry out the research?*   1. **Intended contribution to knowledge and impact**   *Why is it important to study the gap?  What will be the main findings of this work?*  *What value is the solution? What will it produce that will help: people’s well-being, science, society or the economy? What impact will it have?* |
|  |

**Section 3 Supervision (To be completed by the supervisory team)**

**New Supervisors with no completions** must attend the series of four half-day workshops entitled ***How to be an Effective Supervisor*** prior to submission of this form. If this is not feasible, then supervisors need to attend the workshops **within 6 months of submission of the form**.

**Experienced supervisors** **(1 or more completions)** must attend a minimum of **1 refresher training session every 2 years**. Experienced supervisors can attend **any** **refresher workshop session** from the supervisor training courses listed on the Graduate School website: [www.gcu.ac.uk/workshops/supervisors/](http://www.gcu.ac.uk/workshops/supervisors/)

**NB A brief (single page) CV must be attached for all supervisors.**

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| **3.1 Director of Studies (include name, qualification, post held, place of work and if external, full postal address)** | | | |
|  | | | |
| **Details of courses for Research supervision attended/to be attended** | | | |
| **Date** | **Title** | | |
| **No. of students currently supervising as:**  **(Include the student being proposed in this RDC1 form in your numbers)** | | **PhD/ProfD** | **MPhil** |
| 1. **Director of Studies** | |  |  |
| 1. **Second/Third Supervisor** | |  |  |
| **No. previously successfully supervised** | |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **3.2 Second Supervisor (include name, qualification, post held, place of work and if external, full postal address)** | | | |
|  | | | |
| **Details of courses for Research supervision attended/to be attended** | | | |
| **Date** | **Title** | | |
| **No. of students currently supervising as:**  **( Include the student being proposed in this RDC1 form in your numbers )** | | **PhD/ProfD** | **MPhil** |
| 1. **Director of Studies** | |  |  |
| 1. **Second/Third Supervisor** | |  |  |
| **No. previously successfully supervised** | |  |  |

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| --- | --- | --- | --- |
| **3.3 Third Supervisor (include name, qualification, post held, place of work and if external, full postal address)** | | | |
|  | | | |
| **Details of courses for Research supervision attended/to be attended** | | | |
| **Date** | **Title** | | |
| **No. of students currently supervising as:**  **( Include the student being proposed in this RDC1 form in your numbers )** | | **PhD/ProfD** | **MPhil** |
| 1. **Director of Studies** | |  |  |
| 1. **Second/Third Supervisor** | |  |  |
| **No. previously successfully supervised** | |  |  |

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| **3.4 Details of any other person(s) who will act in an advisory capacity**  **(name, qualifications, post held and place of work)** | | |
|  | | |
| **3.5 Confirm that the student and supervisory team agreed the role the supervisors will assume during the research programme** | | **Yes No**  **Delete as Applicable** |
|  | | |
| **3.6 Details of experienced supervisor(s) who will act as Mentor(s) for any new supervisors on the team who have yet to have a completion** | | |
| **New supervisor(s)** | **Mentor(s)** | |

**Section 4 Statement by the Student**

I confirm that the foregoing particulars are correct. I confirm that I have read and understood the Regulations governing the degree applied for, including those relating to plagiarism. I understand that, except with specific permission, I may not, during the period of my registration be a candidate for another award. I understand that, except with specific permission, I must prepare and defend my thesis in English.

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| **Signed** |  | **Date** |  |

**Section 5 Recommendations by the Supervisors**

We support this application and believe that the student has the potential to complete successfully the programme of work. We recommend that this applicant be registered as a research degree candidate.

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| **Signed** |  | **Date** |  |
| **Signed** |  | **Date** |  |
| **Signed** |  | **Date** |  |

**Checklist of materials to be submitted with the RDC1 form**

1. Signed RDC1 form Yes/No
2. Any emails confirming approval in lieu of signatures Yes/No
3. CV for each member of the supervisory team Yes/No
4. Personal Development Plan and Record Yes/No

**FOR INTERNAL USE ONLY**

**Section 6 Checklist for Scrutiny of the Application by the Postgraduate Research Tutor or their nominated Reviewer**

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| --- | --- |
| **6.1 Have you found it necessary to seek additional opinion on the proposal?** | **Yes No**  **Delete as Applicable** |
| **If so, from whom?** |  |
| **6.2 Is the research project an appropriate topic for Postgraduate Research Study?** | **Yes No**  **Delete as Applicable** |
| **Are the resources adequate for the project?** | **Yes No**  **Delete as Applicable** |
| **6.3 Are there any ethical considerations?** | **Yes No**  **Delete as Applicable** |
| **Have these been adequately addressed and a satisfactory approach planned?** | **Yes No**  **Delete as Applicable** |
| **6.4 Is the supervisory team adequately experienced in the area of study?** | **Yes No**  **Delete as Applicable** |
| **6.5 Have the student’s training needs been addressed adequately?** | **Yes No**  **Delete as Applicable** |

**Signatures**

|  |  |  |  |
| --- | --- | --- | --- |
| **Nominated Reviewer, if different from PGRT** |  | **Date** |  |
| **PGRT** |  | **Date** |  |

**Section 7 Support by the School**

I (the School Associate Dean of Research) certify that the facilities and resources described in this form will be available for the above candidate.

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| **Supported by ADR** |  | **Date** |  |

|  |  |  |  |
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| **Research Administrator Check** |  | **Date** |  |
| **Date Sent to Clerk of the HDC** |  | | |
| **Date Approved by HDC** |  | | |

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**Section 8 Administrative checks**