

OFFICE FOR RESEARCHER TRAINING, QUALITY AND INTEGRITY Application for Registration as an External Graduate Research Supervisor

PART A: To be completed by the Applicant

	,							
1. Applic	ant's Details							
Title:		Name:						
Position:				Employer:				
Institution:				•		Campus:		
Email:						Phone:		
Postal							<u>-</u>	
Address:								
Have you be	een a registered superv	isor previously	·? Yes	No)			
2. Academic and Research Achievement								
Please attach your CV with evidence of relevant qualifications and research training and supervisor professional development experience. Your CV should include: a. Details of Academic Qualifications, including awarding institution and year awarded for each; b. Research Publications (referred papers, books. Chapters, referred conference papers) over the past five years (maximum of five publications); c. Competitive or other sources of research funding awarded over the last five years (maximum of five grants); d. A short statement regarding your specific interest in this topic or area of research; e. Academic and professional consultancy activities undertaken related to the research topic. 3. Supervisory Experience Have you supervised (as a Principal or Associate Supervisor) a candidate to successful completion of a research higher degree? Yes No If "Yes" identify the number of candidates supervised to a successful completion over the last five years.								
Course		Number of Associate Si	=	ons as		mber of Com	=	;
Masters by	Research							
Doctor of Pl	hilosophy							
Professional Doctorate (by Research)								

If the supervision has occurred at another University, documentary evidence should be provided. Such evidence may include a letter from the Dean of the College, Director of Institute or Centre or Director of Research & Research Training outlining the supervisory experience.

Please attach any other details in relation to supervision or examination of masters or doctoral theses that may be of relevance.

4. C	andidate Details					
I have a	agreed to provide supervision for the following Graduate Research Candidate:					
Name:						
Institut	re: Campus:					
Researd Topic:	ch					
friend,	have any particular connection with the candidate? (former employer or work colleague, relative) Yes No , please provide details:					
5. E	xternal Supervisor Declaration					
	I have discussed with the candidate my availability and negotiated mutual expectations regarding my supervision;					
b.	I understand that either (please tick) I will undertake this role as part of ongoing collaboration and without remuneration; or: I will receive remuneration for my supervision during this period under the terms outlined in the Independent Contractor Agreement negotiated with me by the Institute for which I am supervising.					
	I have reviewed the Supervision Policy, Supervision Registration and Development Procedure a the following link: https://policy.vu.edu.au ;					
	ree to an annual review of my appointment through the candidate's Progress Report, to be rseen and approved by the Deputy Director, Flagship Research Institute;					
e.	I have kept a copy of this Registration of Appointment for my personal records; I have read and agree to the terms as listed above					
	I agree to participate in appropriate supervisory development activities as recommended in the Supervision Policy and Supervisor Registration and Development Procedure and related Guidelines (https://policy.vu.edu.au/). Ongoing registration as a supervisor will be dependent on supervisors engaging in professional development and training activities relevant to the duties and responsibilities of a graduate research supervisor;					
	I agree to supervise graduate research candidates in accordance with the Supervision Policy and Supervisor Registration and Development Procedure and related Guidelines (https://policy.vu.edu.au/).					
Signatu	ure Date					

Please now submit your application to $\underline{researcher.development@vu.edu.au}.$

PART B: To be completed by the Deputy Director, Flagship Research Institute

1. Deputy Director, Flagship Research	Institute Recommendation								
1. Deputy Director, Hagship Research	mstitute Recommendation								
All information requested has been supp	lied.	Yes	No						
The Flagship Research Institute recomm Research that the Applicant be added Research Supervisors as an External Supe	to the Register of Graduate		No*						
* If registration is not recommended, the Deputy Director, Flagship Institute will contact the staff member to discuss the reasons why the application has not been approved and will encourage the staff member to seek academic and supervision development in certain areas in order to meet the requirements.									
(Please tick boxes as appropriate to indica College/Institute/Centre):	ite the level of supervisory re	gistration recon	nmended by the						
Level 1 - Associate Super	visor - External								
Other *									
*Please provide details for consideration	hutha Daan								
	.,								
I confirm that the applicant will be remunerated for the supervision of the candidate listed in this form and that this agreement will be reviewed annually. Yes No									
Recommended by Deputy Director, Flagshi	p Institute								
Name									
Signature		Date							
3. Dean, Graduate Research Approval									
Approved? Yes No)								
Name									

Signature_____

Date_____