FORM RD2 Authorisation for Research Student Admission

Once completed and signed, this must be emailed to the appropriate School Contact:

[SACIdoctoralcollege@napier.ac.uk](mailto:SACIdoctoralcollege@napier.ac.uk) [SASdoctoralcollege@napier.ac.uk](mailto:SASdoctoralcollege@napier.ac.uk) [SCEBEdoctoralcollege@napier.ac.uk](mailto:SCEBEdoctoralcollege@napier.ac.uk)

[SHSCdoctoralcollege@napier.ac.uk](mailto:SHSCdoctoralcollege@napier.ac.uk) [TBSdoctoralcollege@napier.ac.uk](mailto:TBSdoctoralcollege@napier.ac.uk)

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| **Student Details** | | |
| **Name**  This *must* match the details in SITS | **Edinburgh Napier Number** | **Course/School** |
| Click or tap here to enter text. |  | Choose an item. |
| **Proposed start date**  *1st of the month October or March* | **Mode of attendance** | |
|  | Choose an item. | |

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| **Research Degree Details**  If course requires an ATAS, information in Brief description will be used (GOV website has a minimum word limit) | |
| **Provisional title** | Click or tap here to enter text. |
| **Brief description**  Text only  No bullet points  Max. 2000 words | Click or tap here to enter text. |

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| **Tuition Fee Details** | |
| **% e.g. 100** | **One option below must be completed for all students** |
|  | of tuition fees to be charged to school |
|  | of tuition fees should be charged to the student |
| **Internal Use only (if required)**  *If fees are to be charged to the school, please provide details of the arrangement in place Or if only charging the home rate to an oseas fee payer, provide information on who is paying the remainder of the fee*  Click or tap here to enter text. | |

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| **Stipend Payment**  **This section must be completed for all students** | |
| Should a stipend be paid to the student? | Choose an item. |
| Is this a standard stipend? (If ‘NO’, complete section below) | Choose an item. |
| **Internal Use only (if required)**  *please state clearly how much is to be paid, and for how long. (Examples: ‘standard stipend for 12 months’; ‘£500 per month for 36 months’; ’Year 1: 1200 per month, Year 2: 1250 per month, Year 3: 1500 per month’)* | |

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| **Supervisory Details**  **By signing, we confirm that**   1. An interview has taken place, and the applicant has the potential to complete a programme of research leading to the above award. Ethical implications of the proposed research project have been considered and discussed with the applicant, within the context of the University’s Code of Practice on Research Ethics and Governance. 2. References have been checked, are satisfactory, and have been authored by someone who is independent of both the interview panel and the proposed supervisory team. | |
| **Position** | **Staff name and ID number (PRS screen in SITS)**  *Provide external information if appropriate* |
| Director of Studies (DoS) | Click or tap here to enter text. |
| Supervisor(s)  *Normally one* | Click or tap here to enter text. |
| Click or tap here to enter text. |
| Click or tap here to enter text. |
| Independent Panel Chair | Click or tap here to enter text. |

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| **Formal Approval** | |
| **By signing, we confirm that:**   1. All facilities and Fees and Stipend funding (where provided by the University) required to support the applicant in this programme of research study are available. 2. The applicant should be offered a place as a research student on the terms stated in this form and registered for a research degree following acceptance of the offer. | |
| **Authorised signatory 1**  ACADEMIC AUTHORITY  (***must*** be included) |  |
| Print name | Click or tap here to enter text. |
| Date | Click or tap to enter a date. |
| **Authorised signatory 2**  RESOURCE AUTHORITY  (***must*** be included) |  |
| Print name | Click or tap here to enter text. |
| Date | Click or tap to enter a date. |