

Confirmation Committee Evaluation Form

RESEARCH DIVISION
Office of Graduate Studies



Research Higher Degree Confirmation Year Requirement

This form is to be completed by the Chair of the Confirmation Committee in response to a candidate undertaking confirmation. The Confirmation Committee will have received and read the candidates written proposal and the cover sheet in support of the confirmation year. **Please attach the candidate cover sheet** and any additional pages to this proforma.

Role & Expectations

- The Confirmation Committee will evaluate the written proposal and the oral presentation and ask questions of the candidate in relation to their research.
- They will review their findings and determine an outcome.
- They will record their evaluations, outcome and feedback on this form and forward all of the documentation to the Head of School/Nominee for ratification.
- The Committee is to convey the outcome and feedback to the candidate as soon as possible after the Committee have reached a decision.

Date of Confirmation: _____ / _____ / _____

Candidate Details	
Name: _____	Student No: _____
Current program level: <input type="checkbox"/> M Phil <input type="checkbox"/> PhD	
Confirmation is being assessed at the following level: <input type="checkbox"/> M Phil <input type="checkbox"/> PhD	
Confirmation Committee Members	
(1st) Chair of the Committee: (Must not be a supervisor of the candidate)	
Name: _____	
School: _____	
(2nd) Committee Member: (It is recommended that committee members not be supervisors of the candidate)	
Name: _____	
School/Organisation: _____	
(3rd) Committee Member: Name: _____	
School/Organisation: _____	
(4th) Committee Member: Name: _____	
School/Organisation: _____	
(5th) Committee Member: Name: _____	
School/Organisation: _____	

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4. Updated timetable for completion of the thesis	YES	NO	
Draft timelines are appropriate and achievable:	<input type="checkbox"/>	<input type="checkbox"/>	
Comments:			
5. Resource Implications	YES	NO	N/A
Laboratory access appropriate:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Adequate infrastructure and funding:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Adequate technical support available:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other resources:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Further training or assistance required: (If "Yes" please provide details below)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:			
6. Oral presentation delivered to the Confirmation Committee in an open forum:			
Duration of presentation (mins):			
Venue of presentation:			
Approx. number of attendees:			
Oral presentation demonstrates a sound understanding of the research topic:	YES	NO	
	<input type="checkbox"/>	<input type="checkbox"/>	
Comments:			

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	YES	NO
10a. Is this candidate transferring program (ie upgrading/downgrading/changing research area) as part of this process? If yes, complete the section below:		
Name of the new program in full:		
The additional requirements to be considered and addressed are:	YES	NO
<ul style="list-style-type: none"> • The supervisory capacity of the School/Discipline/Faculty has been established and there are sufficient resources available to successfully support the candidature, including continued scholarship support if applicable. 		
<ul style="list-style-type: none"> • The candidate is working well and consistently and is in regular contact with the supervisor. 		
<ul style="list-style-type: none"> • Is the candidate a scholarship holder? 		
If yes, supervisor and Head of School to advise the following:		
<ul style="list-style-type: none"> • The stipend is to continue at the current rate (indexed annually)? 		
<ul style="list-style-type: none"> • Applicable supplementation is to continue at the existing rate? 		
If the answer to <u>either</u> of the two questions directly above is no, or if Cost Collectors are to change specify new rates and cost collectors below:		
<i>Revised Stipend payable per annum:</i>		
<i>Revised Cost Collector:</i>		
<i>Revised Supplementation to be paid per annum:</i>		
<i>Revised Cost Collector:</i>		
Comments:		

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11. Outcome	Tick relevant outcome
<p>The candidate is CONFIRMED</p>	
<p>2nd Attempt Required</p> <ul style="list-style-type: none"> The candidate is NOT confirmed and is required to undertake confirmation again within 3 months (FTE). The School will coordinate the second attempt in the same manner as the first. 	
<p>The candidate is NOT confirmed</p> <p>A recommendation is hereby made to the Dean of Graduate Studies to advise the student they are required to show cause to the Research Training Sub-Committee as to why their candidature should be permitted to continue.</p>	
<p>Comments:</p> <p>a) Where the recommendation is <u>2nd Attempt Required</u>, the Committee must detail the reasons for their decision.</p> <p>b) Where the recommendation is <u>Not Confirmed</u> the Committee must provide:</p> <ul style="list-style-type: none"> An unequivocal statement of the panel's recommendation; A detailed statement on the quality of the candidate's work with regard to the standard required for candidature, including the candidate's application to the project, initiative shown in devising and developing the project and the overall progress to date; A detailed statement of all the reasons for the recommendation not to confirm the candidature, indicating all the deficiencies of the proposal; A statement of what other options, if any, have been discussed with the candidate (eg downgrade to a Master level program). <p>c) Where a variation to one of these outcomes has been determined, specific details are to be provided here. For example, a downgrade to a Masters level program is recommended.</p>	

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Feedback to Candidate

If detailed feedback comments have not been made on the previous evaluation pages you may summarise your feedback for the candidate here.

Please note the candidate will receive a copy of the completed evaluation form.

12. The Confirmation Committee offer the following feedback to the candidate:

Critical review of recent work in the field:

Research proposal:

Plan of research:

Oral presentation:

Defence of research:

13. The following recommendations should be considered:

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Signatures and Ratification

14. Signatures of Committee members:
 By signing this form Committee members agree with the outcome documented at item 11 and have formulated feedback to be provided to the candidate.

1) Committee Chair:

Name: _____

Signature: _____ Date: ____/____/____

Feedback has been provided to the candidate, OR,
 Feedback will be provided to the candidate by ____/____/____

2) Committee Member:

Name: _____

Signature: _____ Date: ____/____/____

3) Committee Member:

Name: _____

Signature: _____ Date: ____/____/____

4) Committee Member:

Name: _____

Signature: _____ Date: ____/____/____

5) Committee Member:

Name: _____

Signature: _____ Date: ____/____/____

15. Head of School/Nominee:

a. The following confirmation year documents are to be attached:

- Candidate cover sheet
- Research Proposal (from item 2)
- Research Plan (from item 3)
- Updated timetable (from item 4)

b. If any member of the Committee was a supervisor of the student please justify the reasons here:

Name: _____

Signature: _____ Date: ____/____/____

16. Assistant Dean (Research Training)/Nominee:

a. I am satisfied that this outcome was determined in accordance with the Confirmation Year Guidelines and that due process was followed.

b. I have confirmed that the Chair of Committee has provided feedback to the candidate.

Name: _____

Signature: _____ Date: ____/____/____

PLEASE ENSURE ALL DOCUMENTS ARE SENT TO THE OFFICE OF GRADUATE STUDIES, ASAP.

OGS USE ONLY:

Copy of Confirmation Committee Review document sent to student & supervisors: ____/____/____

Student acknowledgement received: ____/____/____

Student system updated: ____/____/____

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