

PROPOSAL TO ESTABLISH A JOINTLY AWARDED DOCTORAL DEGREE CANDIDATE AGREEMENT



This form is used to request the formal establishment of a Jointly Awarded Doctoral Degree. The information provided will be used to draft the legally binding Candidate Agreement for review by the Partner Institution. The supervisors at both institutions should complete this form together (i.e. not the candidate).

Please refer to the [Jointly Awarded Doctoral Degrees and Dual Award Doctoral Degrees Policy](#) before completing this form.

Approval is required by the UON Head of School/Nominee and the Assistant Dean Research Training before submitting this form to UON Graduate Research for the Dean of Graduate Research's consideration. If approved, UON Graduate Research will prepare the Jointly Awarded Candidate Agreement and will liaise with the relevant person(s) at the partner institution regarding legal and administrative matters necessary to finalise the agreement.

PART A: PROPOSED PARTNER INSTITUTION

Name of Institution:

PART B: PROPOSED CANDIDATE DETAILS

Family Name:

Given Name:

Address:

Email:

Country of
Citizenship:

Gender:

Australian Permanent Resident:

Yes

No

NA (Australian Citizen)

Proposed Research
Project:

ENROLMENT DETAILS

Application submitted to UON?

Yes

No

If yes, UON Student ID:

Application submitted to Partner Institution?

Yes

No

If yes, Partner Institution Student ID:

Date of PhD commencement at Partner Institution*:

* Please provide the candidate's offer of admission from the partner institution.

PLANNED STUDY PERIODS

Note: The candidate must spend a minimum of 12 months in total at each institution. This may be made up of multiple visits.

Visit	Location	Start Date (e.g. 1/1/2019)	End Date (e.g. 31/12/2019)	Duration
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

PART C: PROGRAM AND INSTITUTIONAL DETAILS

UON PRINCIPAL SUPERVISOR

Family Name:

Given Name:

School:

Phone:

Email:

UON CO-SUPERVISOR 1

Family Name:

Given Name:

School:

Phone:

Email:

UON CO-SUPERVISOR 2

Family Name:

Given Name:

School:

Phone:

Email:

PARTNER INSTITUTION SUPERVISOR 1

Family Name:

Given Name:

School:

Phone:

Email:

PARTNER INSTITUTION SUPERVISOR 2

Family Name:

Given Name:

School:

Phone:

Email:

PARTNER INSTITUTION SUPERVISOR 3

Family Name:

Given Name:

School:

Phone:

Email:

UON APPROVALS TO BE OBTAINED

Ethics:

Health & Safety:

Other:

PARTNER INSTITUTION APPROVALS TO BE OBTAINED

Ethics:

Health & Safety:

Other:

PROGRAM DETAILS

UON Degree Name:

Doctor of Philosophy

Partner Institution Degree Name:

INTELLECTUAL PROPERTY, DATA ACCESS AND STORAGE

Will the research develop IP?

Yes

No

If yes, who will be the IP licensee?

Data Access Table

Please provide the names of people who, in addition to the candidate, will have access to the data, subject to meeting ethics and confidentiality requirements.

Note: Data refers to any information gained from research participants or through other research activity associated with the thesis. The candidate and principal supervisor should reach agreement about access to data, especially if the candidate's research is part of a wider research project.

Consideration may be given to broader data sharing. Many data sharing agencies (e.g. NIH, US; NHMRC, Australia) encourage, or indeed require, data sharing and providing access to data and other research outputs (such as metadata, analysis code, study protocols, study materials, etc.) arising from supported research unless prevented by ethical, privacy or confidentiality matters. Further information is available at <https://www.nhmrc.gov.au/grants-funding/policy/nhmrc-statement-data-sharing>.

Name and Role	Data type	Duration of Access
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

Raw data will be stored at:

Under the supervision of:

Processed data will be stored at:

Under the supervision of:

PART D: **STUDENT FINANCIAL SUPPORT**

Faculty contribution to travel expenses for candidate and/or supervisor(s)*:

* Note that UON scholarship recipients receive standard relocation support

Is the candidate to be considered for a UON Jointly Awarded Scholarship?*

* Note that for all Jointly Awarded Scholarship recipients stipends are normally provided only for the period the candidate is in Australia. However, tuition fee scholarships cover the entire enrolment period (maximum of 4 years).

Instructions for completion: Please complete the following table if the candidate is either applying for or has been awarded a PhD scholarship.

	Australian Scholarship		International Scholarship	
	<input type="checkbox"/> Awarded	<input type="checkbox"/> Applying	<input type="checkbox"/> Awarded	<input type="checkbox"/> Applying
Scholarship Name:	<input type="text"/>		<input type="text"/>	
Funding Source:	<input type="text"/>		<input type="text"/>	
Coverage/Inclusions: (i.e. stipend, tuition, accommodation)	<input type="text"/>		<input type="text"/>	
Duration:	<input type="text"/>		<input type="text"/>	
Stipend value per annum:	<input type="text"/>		<input type="text"/>	
Tuition fee value per annum:	<input type="text"/>		<input type="text"/>	
Relocation / flights value per annum:	<input type="text"/>		<input type="text"/>	
Other inclusions:	<input type="text"/>		<input type="text"/>	
Other details:	<input type="text"/>		<input type="text"/>	

PART E: DECLARATION

Note: This Proposal form is not a legally binding document. The Candidate Agreement that UON Graduate Research will prepare becomes the legally binding document when signed by all parties.

I certify that I have read the [Jointly Awarded Doctoral Degrees and Dual Award Doctoral Degrees Policy](#) and that all information contained in this proposal is complete and correct to the best of my knowledge.

I confirm that I have discussed the establishment of a JADD for this candidate with the co-supervisors.

Proposed UON Principal Supervisor Signature:	<input type="text"/>	Date:	<input type="text"/>
Proposed UON Co-Supervisor 1 Signature:	<input type="text"/>	Date:	<input type="text"/>
Proposed UON Co-Supervisor 2 Signature:	<input type="text"/>	Date:	<input type="text"/>
Proposed Partner Institution Principal Supervisor Signature:	<input type="text"/>	Date:	<input type="text"/>
Proposed Partner Institution Co-Supervisor 1 Signature:	<input type="text"/>	Date:	<input type="text"/>
Proposed Partner Institution Co-Supervisor 2 Signature:	<input type="text"/>	Date:	<input type="text"/>

PART F: SCHOOL AND FACULTY APPROVALS

Please note that the **School and Faculty are responsible for all costs** associated with the UON supervisor attending the oral examination.

UON Head of School Nominee Name:	<input type="text"/>		
Signature:	<input type="text"/>	Date:	<input type="text"/>
UON Assistant Dean Research Training Name:	<input type="text"/>		
Signature:	<input type="text"/>	Date:	<input type="text"/>

Please ensure all approvals are obtained prior to submitting this form to HDR-Partnerships@newcastle.edu.au for consideration by the Dean of Graduate Research.

PART G: UON DEAN OF GRADUATE RESEARCH APPROVAL

Signature:	<input type="text"/>	Date:	<input type="text"/>
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