**Application for Conversion from Research Master’s to PhD in the   
Faculty of Medicine and Health Sciences**

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| **Academic environment** | Click or tap here to enter text. | |
| **PhD programme name (as per yearbook)** | Click or tap here to enter text. | |
| **Proposed main internal supervisor** | Click or tap here to enter text. | |
| **Student SU number** | Click or tap here to enter text. | |
| **Student surname** | Click or tap here to enter text. | |
| **Student first names in full** | Click or tap here to enter text. | |
| **Student cell no** | Click or tap here to enter text. | |
| **Student non-SU email** | Click or tap here to enter text. | |
| **Title of the proposed doctoral dissertation:** | | **\*Attach Synopsis to application** |
| Click or tap here to enter text. | | |

**CONVERSION FROM MASTER’S TO PHD**

[Applications are open throughout the year until the **agenda closing date** for the last meeting of the [Committee for Postgraduate Research](http://www.sun.ac.za/english/faculty/healthsciences/rdsd/doctoraloffice/Pages/CPR.aspx) in any given year.]

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| **APPLICANT DECLARATION**  I hereby submit a full application for consideration for conversion from research master’s to PhD studies in the Faculty of Medicine and Health Sciences, and I declare that I accept that:   1. A Review Panel, and the relevant Ethics Committee have approved the proposed study. 2. The Committee for Postgraduate Research (CPR) will need to approve the proposed study. 3. I will be required to submit written work and make amendments/modifications regularly, and undertake to do so timeously in order to not delay the process. 4. The application may be rejected if it does not fulfil the prerequisites and expectations of the governance committees and Faculty, or if I fail to address the concerns of the CPR, Faculty Board or Senate, and that I will in such a case not be registered for PhD studies. 5. I may need to submit a further application for ethics approval / renewal once my application is accepted. | |
| Applicant’s signature:  Shape  Description automatically generated with low confidence | Date:  Click or tap to enter a date. |

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| **Insert synopsis of 500 to maximum 800 words**  Click or tap here to enter text. |

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| **Declaration by Head of Department and Supervisor**  We hereby grant permission to register student named above as a doctoral candidate. | |
| Academic year of conversion  Click or tap to enter a date. | Expected submission date  Click or tap to enter a date. |
| Supervisor name Click or tap here to enter text. | Supervisor signature Shape  Description automatically generated with low confidence |
| HoD name Click or tap here to enter text. | HoD signature Shape  Description automatically generated with low confidence |