**Office of Graduate Research**

[**hdr.engagement@flinders.edu.au**](mailto:hdr.engagement@flinders.edu.au)

Cotutelle Proposal

**Higher Degree by Research Students –** This form is used by students:

* Applying for a Cotutelle arrangement;
* Whose home or host institution is Flinders University.

Please refer to the [Cotutelle Procedures](https://www.flinders.edu.au/content/dam/documents/staff/policies/academic-students/cotutelle-arrangement-procedures.pdf) for additional information regarding the requirements relating to Cotutelle arrangements.

**A. STUDENT DETAILS**

|  |  |
| --- | --- |
| Family Name: | Given Name: |
| Title: | Date of Birth: |
| Full Name (as it appears on your passport): | |
| Citizenship: | |
| Email Address: | Phone Number: |

**B. DOCTORATE RESEARCH INFORMATION**

|  |  |
| --- | --- |
| Title of Research/PhD: | |
| Name of Home Institution: | |
| Location of Home Institution: | |
| Doctorate Commencement Date: | Expected Completion Date: |
| Attendance Status (full-time, part-time): | |
| Name of Principal Supervisor at Home Institution: | |
| Email address of Principal Supervisor at Home Institution: | |
| Name of Host Institution: | |
| Location of Host Institution: | |
| Name of Supervisor at Host Institution: | |
| Email address of Supervisor at Host Institution: | |
| Please provide a link to the doctoral or higher degree by research policies and procedures at the institution other than Flinders University: | |

|  |  |
| --- | --- |
| Please provide the name and email address for a relevant contact for doctoral or higher degree by research study at the institution other than Flinders University: | |
| Start date of study at Host Institution: | End date of study at Host Institution: |
| Describe how the Cotutelle arrangement will benefit your research: | |
| Identify any ethics approvals (for example human, animal, biosafety) required for your research and whether approvals have been gained at your home institution: | |
| Identify any coursework required by either institution: | |

**C. VISA DETAILS**

|  |
| --- |
| What type of visa will you have for the study at the host institution? |
| Do you currently hold this visa? |
| If yes, what is the current visa expiry date? |
| If no, please identify the country where you will be lodging your visa application to study at the Host Institution |

**D. FINANCIAL SUPPORT AND INSURANCES**

Cotutelle arrangements generally include a fee waiver at the Host Institution for the length of the arrangement. However, students are required to ensure that they have the financial support required for living expenses, health (and any other) insurance in the host country.

|  |
| --- |
| Identify any scholarships, grants or funding you have applied for, or will apply for, to support your Cotutelle arrangement: |

**E. DECLARATION**

# Before making this declaration, please review the [Flinders University Higher Degree by Research Policy](https://www.flinders.edu.au/content/dam/documents/staff/policies/academic-students/higher-degrees-research-policy.pdf), the [Cotutelle Procedures](https://www.flinders.edu.au/content/dam/documents/staff/policies/academic-students/cotutelle-arrangement-procedures.pdf) and refer to the full set of HDR policies and procedures.

|  |
| --- |
| I AGREE: |
| To comply with the rules on admission and enrolment at Flinders University  To inform the Office of Graduate Research immediately if there is any change to the information I have given in this application  To allow Flinders University permission to check my Visa Entitlements via the Commonwealth Department of Immigration and Citizenship entitlement variations online (for students where Flinders University is the host institution) |
| I UNDERSTAND THAT: |
| The University may obtain official records from any institution which I have previously been enrolled;  The University may vary or cancel any decision it makes if the information I have given is incorrect or incomplete;  The university need not provide me with a cotutelle doctoral degree if I do not meet relevant progress requirements of both universities each year;  I am responsible for my living expenses, health and any other insurances, whilst completing my cotutelle at the relevant Host Institution;  The University is unable to provide me with financial assistance if I experience financial difficulties during the course of my cotutelle doctoral degree  I consent to the collection, storage and disclosure of information relating to record falsification or other irregular acts in accordance with the Australian Vice Chancellors’ Committee Procedures; and  I declare that the information given in this application is true and correct. |

|  |  |
| --- | --- |
| CHECKLIST (please tick to confirm you have attached or completed the below) | |
| Certified copies of Academic Qualifications translated (if not in English). Please refer to the [Flinders PhD entry requirements](https://handbook.flinders.edu.au/courses/current/phd) for your document preparation. |  |
| A copy of Master thesis abstract in English |  |
| Proof of admission to a Doctorate degree at home institution (where this is not Flinders University) |  |
| Notes:  \*Please note that this is a pre-assessment only. You are required to apply for admission once your cotutelle proposal is approved by the relevant Flinders College and a cotutelle agreement between two institutions is fully executed.  \*English Language requirements: Apart from the academic requirements, you are also required to meet the English language requirements outlined in the [Flinders PhD entry requirements](https://handbook.flinders.edu.au/courses/current/phd). Your English proficiency will be assessed when you apply for admission. | |

**Student Signature: Date:**

**F. REVIEWED BY OFFICE OF GRADUATE RESEARCH**

Existing partnership or agreement with institution

Institution reviewed (if required)

Dates for commencement, expected completion and study visit meet requirements

HDR Admissions notified

Flinders International notified

Flinders supervisor and HDR Coordinator sent relevant College Recommendation form and documents

OGR HDR Engagement Coordinator Signature:

OGR HDR Engagement Coordinator Signature Name:

Date: