

Termination of Enrolment

Higher Degree by Research Students

Please read the Guidelines outlining the Process of Termination of Enrolment of Higher Degree by Research Students before completing this form.

Part 1: Head of Enrolling Area or Appropriate Alternate must complete this section

Student ID Number Title Mr Ms Other _____

If a Curtin Sarawak student, please also provide the Sarawak ID Number

Surname / Family Name Given Names

Address for Correspondence

Title of Course Course Code

Academic Status
Prior to termination of enrolment, a candidate shall normally be accorded Conditional status

Enrolling Area Faculty

Termination of Enrolment Grounds

Grounds for recommendation for termination of enrolment (as stipulated in Section 16 of Rule 10: Degree of Doctor by Research and Rule 11: Degree of Master by Research):

Please tick appropriate box (more than one may be selected)

- (i) where the candidate has failed to submit a thesis within prescribed time limits, including extensions of enrolment as approved by the Associate Deputy Vice-Chancellor - Research Training (see Section 4(c)(ii));
- (ii) where the candidate has failed to submit an application for Candidacy within prescribed time limits, including extensions of time as approved by the Faculty Graduate Studies Committee (see Section 6(c));
- (iii) where the progress of the candidate is deemed to be unsatisfactory by the Head of Enrolling Area or appropriate alternate (see Section 9(c));
- (iv) where the candidate is Absent Without Leave for a period exceeding six months (see Section 10(b));
- (v) where the candidate has failed to otherwise comply with these Rules.

Part 2: Faculty Graduate Studies Committee representative must complete this section

Date of FGSC meeting where recommendation was considered: **Date**
(DD/MM/YY)

FGSC's Decision:

- (i) Recommendation for termination proceeds to Associate Deputy Vice-Chancellor - Research Training for approval; or » *Forward to ADVC-RT*
- (ii) Recommendation for termination not approved. » *Return to Enrolling Area*

In the case of (i) above,

Date of forward of recommendation to ADVC-RT: **Date**
(DD/MM/YY)

In the case of (ii) above,

Date termination of enrolment recommendation was returned to Enrolling Area: **Date**
(DD/MM/YY)

Name
[please print]

Position

Signature **Date**
(DD/MM/YY)

Part 3: ADVC-RT must complete this section

Date of Approval ADVC-RT **Date**
(DD/MM/YY)

Date of noting by the University Graduate Studies Committee **Date**
(DD/MM/YY)

ADVC-RT's Decision:

- (i) Recommendation for termination approved; or » *Student to be notified*
- (ii) Recommendation for termination not approved. » *Return to Enrolling Area*

In the case of (i) above,

Date student was formally notified of decision by OCC **Date**
(DD/MM/YY)

In the case of (ii) above,

Date termination of enrolment recommendation was returned to Enrolling Area: **Date**
(DD/MM/YY)

Name
[please print]

Position

Signature **Date**
(DD/MM/YY)