THESIS SUPERVISOR CONFIRMATION FORM

Reason for form submission

Note: When applying for admission, this form together with your application determine your eligibility. Completion of this form does not guarantee admission

Applicant/Student details

Name		Student ID/ Application no.	u	
Enrolment		If part time, attach your intended enrolment plan to this form.		
Commence supervision		**Thesis submission**		
Proposed thesis topic (Max 50 words)				

Supervisor details

Name		ANU email	
School/Centre			

Consent and Approvals

Applicant/ Student	I confirm the above details are correct and understand supervision of my thesis is available for *only* the period indicated and that if I do not comply with this I may: be forcibly transferred into the non-Advanced version of my Master Advanced degree; or be required to withdraw from Honours.		
Name		Signature		Date	
Supervisor	I confirm the above details are correct and I am available to supervise this student for the period indicated. [Note: the Coursework Award Rules state that an absence by, or incapacity of, a supervisor of greater than four weeks requires an appropriately qualified person to be formally appointed to supervise the student during the absence.]		
Name		Signature		Date	
Program Convenor	I endorse the above named supervisor and confirm they possess the appropriate skills and knowledge to supervise this student.		
Name		Signature		Date	
Head of School [of Supervisor]	I approve the above named supervisor and confirm their availability to supervise this student for the period indicated. [Note: the Coursework Award Rules state that an absence by, or incapacity of, a supervisor of greater than four weeks requires an appropriately qualified person to be formally appointed to supervise the student during the absence.]		
Name		Signature		Date	

Delegate to complete   FOR OFFICE USE ONLY

Def/Leave/P/T