

Phd SUPER DTP Studentship 2020-21 entry

RESEARCH DEGREE STUDENT APPLICATION FORM

This is the application form for the University of the Highlands and Islands PhD studentships, funded by NERC Studentships awarded to the SUPER Doctoral Training Programme. For more information on the SUPER DTP partner Universities and other stakeholder partners and organisations, please see Applicant Guidance Notes.

**Please complete each section of this form and return by Friday 13th December 2019 5pm GMT to:** **gradresearch@uhi.ac.uk**

Please ensure you submit this form – with the following supporting documentation – as one single pdf file (references excluded if not available at the time of submission – however applicants are responsible for ensuring their referees submit the references by the deadline):

* Copies of all official qualification certificates and transcripts. If your official certificates/transcripts are not in English, they must be accompanied by a full certified translation provided by a professional translator/translation company.
* If English is not your native language, an English language test certificate (IELTS or equivalent), gained within the past two years;
* A copy of the photo page of your passport if you are not a UK national. Also include any pages which indicate a right of abode in the UK;
* References (see 1.8).

**ALERT: If some of the following formatting appears to be missing/incomplete, please hover over the bottom right corner of the relevant table and click on the small box that will appear.**

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| 1. **APPLICANT INFORMATION**
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**1.1 PERSONAL DETAILS**

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| **FIRST NAME(S)** |  |
| **PREFERRED FIRST NAME** |  |
| **SURNAME/FAMILY NAME** |  |
| **EMAIL** |  |
| **SKYPE (if available)** |  |
| **NATIONALITY** |  |
| **COUNTRY OF BIRTH** |  |
| **IF NOT A UK/EU CITIZEN WHAT IS/WILL BE YOUR VISA STATUS IN THE UK?** |  |
| **COUNTRY OF PERMANENT RESIDENCE** |  |
| **COUNTRY OF RESIDENCE OVER LAST 3 YEARS** |  |
| **PURPOSE OF THAT RESIDENCE (permanent, education, employment)** |  |

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| **ADDRESS (UK)** | **ADDRESS HOME COUNTRY (IF NOT UK)** |
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| **DO YOU REQUIRE AN INTERNATIONAL STUDENT VISA? If yes, please complete section 3: “International Supplementary Questions”.** **Please tick here to also confirm that you give your consent to the University to check directly, if necessary, on your immigration history and/or current immigration status with UK Visas and Immigration (UKVI).**  | Choose an item. |

**1.3 EDUCATION AND PROFESSIONAL QUALIFICATIONS**

Please give the exact titles of qualifications, including any non UK qualifications (in the language awarded - please **do not** give English equivalencies). Please note that qualifications gained outside of the UK will be checked by the international admissions team to ensure UK equivalency.

Please give the name of the awarding body if different from university/college attended.

Please note that applicants for this studentship should normally have, or be studying for, a Masters degree or equivalent - although applicants with First Class (Hons) undergraduate degrees or relevant professional experience may also be considered. Please see ‘Relevant Professional Experience’ below.

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| **FROM****(Month/Year)** | **TO****(Month/Year)** | **UNIVERSITY/COLLEGE ATTENDED** | **FT/PT** | **SUBJECT** | **QUALIFICATION** | **DATE & CLASS OF AWARD/MARK OBTAINED** |
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If any of your qualifications were obtained under a different name from the one given in Section 1.1, please enter the name here (and indicate which qualifications were obtained under this name)

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| **QUALIFICATION** | **TITLE** | **FIRST NAME(S)** | **SURNAME/FAMILY NAME** |
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**1.4 RELEVANT PROFESSIONAL EXPERIENCE (300 words maximum)**

ONLY TO BE COMPLETED WHERE:

* You do not have and are not studying towards a Masters degree or equivalent, or
* You are returning to Masters study after a considerable break in higher education, or
* You have gained a Masters degree more than five years previously, or
* Your Masters degree is not in a relevant subject, AND

You have significant professional experience, which is relevant to your training proposal

You should use the section below to provide evidence that the training and development you have received is equivalent to that obtained through a relevant Masters course and, therefore, prepares you to continue to doctoral study.

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**1.5 ENGLISH LANGUAGE QUALIFICATIONS**

* All applicants for whom English is not their native language will be required to provide evidence of English language proficiency, usually in the form of an IELTS test, gained within the two years prior to their registration date (unless the student has a prior UK degree).
* For more information on English language requirements, please see our [web pages](https://www.uhi.ac.uk/en/studying-at-uhi/international/how-to-apply-to-uhi/english-language-requirements/)

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| **WHAT IS YOUR FIRST LANGUAGE?** |  |

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| **IF NOT ENGLISH, DO YOU HAVE ANY OF THE FOLLOWING ENGLISH LANGUAGE QUALIFICATIONS?** |
| **IELTS** |[ ]  **Cambridge** |[ ]  **GSCE** |[ ]
| **pearson** |[ ]  **toefl** |[ ]  **none** |[ ]
| **OTHER (please specify):**  |
| **Result (overall & by section)** |  | **Date achieved** |  |

**1.6 EMPLOYMENT**

Please give details of your employment in the last five years (if applicable)

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| **FROM (Month/Year)** | **TO (Month/Year)** | **POSITION HELD & PLACE OF WORK** | **FT/PT** | **NAME AND ADDRESS OF EMPLOYER** |
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**1.7 HEALTH OR MEDICAL CONDITIONS –** Information gathered in the following section is not used in the selection process, but will enable us to work with you as early as possible to identify support needs you may have. The information supplied will only be used for this and statistical purposes. We welcome applications from students with additional needs and are committed to supporting disabled students. We understand that being a disabled postgraduate researcher could raise some complex issues and we aim to meet a wide range of individual needs, where we reasonably can. Please click or ‘x’ box below as relevant:

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| [ ]  | No disability |
| [ ]  | I have a social/communication impairment such as Asperger’s syndrome/other autistic spectrum disorder |
| [ ]  | I am blind or have a serious visual impairment uncorrected by glasses |
| [ ]  | I am deaf or have a serious hearing impairment |
| [ ]  | I have a long standing illness or health condition such as cancer, HIV, diabetes, chronic heart disease, or epilepsy |
| [ ]  | I have a mental health condition, such as depression, schizophrenia or anxiety disorder |
| [ ]  | I have a specific learning difficulty such as dyslexia, dyspraxia or AD(H)D |
| [ ]  | I have physical impairment or mobility issues, such as difficulty using my arms or using a wheelchair or crutches |
| [ ]  | I have a disability, impairment or medical condition that is not listed above |
| [ ]  | I have two or more impairments and/or disabling medical conditions |
| [ ]  | Information refused |
| I have personal care support | [ ]  | I carry medicines which are time critical in their application (e.g. Epi-pen) | [ ]  |
| Please describe any additional support requirements you may have: |

**1.7 PLANNING STATISTICS -** Information gathered below is not used in the selection process but is required for statistical purposes and/or by the funding body. Please click or ‘x’ box below as relevant:

**AGE:** 0 – 24 [ ]  25 – 29 [ ]  30 – 34 [ ]

 35 – 39 [ ]  40 – 44 [ ]  45 – 49 [ ]

 50 – 54 [ ]  55 – 59 [ ]  60 – 64 [ ]

 65 + [ ]  Prefer to not disclose [ ]

**GENDER:** Male [ ]  Female [ ]  Other [ ]

Prefer to not disclose [ ]

**ETHNICITY:** Asian British [ ]  Asian other [ ]  Black British [ ]  Black other [ ]

 Mixed/multiple ethnic groups [ ]  Other [ ]  White British [ ]

 White other [ ]  Prefer to not disclose [ ]

**SEXUAL ORIENTATION**: Bisexual [ ]  Gay man [ ]  Gay woman/lesbian [ ]  Heterosexual [ ]

 Other [ ]  Prefer to not disclose [ ]

**1.8 REFEREES**

Please provide the details of two recent academic references. These should not be relatives. Applicants who have already embarked on a PhD programme should provide at least one up-to-date reference from a current supervisor. **NOTE:** It is the applicant’s responsibility to send the Applicant Reference Request Form to each referee.

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|  | **REFEREE 1** | **REFEREE 2** |
| **NAME** |  |  |
| **POSITION & RELATIONSHIP TO APPLICANT** |  |  |
| **ORGANISATION & ADDRESS** |  |  |
| **CONTACT EMAIL** |  |  |

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| 1. **THE RESEARCH PROJECT**
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| **Project title –** *provide the title of the project you are applying to – please note, if you are applying for more than 1 project, you will need to submit two separate applications* |
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| **HAVE YOU CONTACTED AN ACADEMIC ABOUT YOUR APPLICATION?****If yes, please provide name:** |  |
| **HOW DO YOU INTEND TO STUDY**  | **FULL TIME** [ ]  **PART TIME** [ ]  |

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| 1. **PERSONAL STATEMENT (500 WORDS MAX)**
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Explain why you are a suitable candidate for this project and how undertaking this study fits with your career aspirations and training needs. Please also demonstrate how your previous study (UG / MA) and/or professional experience have prepared you for this particular doctoral project – e.g. referencing your dissertation topics, specific and appropriate methodological training and/or expertise, (e.g. proficiency in a relevant language, particular IT skills etc), work-based learning or employment in a relevant occupation etc.

Please also provide below details on any publications or evidence of research experience.

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| 1. **APPLICANT DECLARATION**
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1. I confirm that I wish to apply to register for a research degree at the University of the Highlands and Islands on the basis of UHI’s student and [research degree award regulations and policies.](https://www.uhi.ac.uk/en/about-uhi/governance/policies-and-regulations/regulations/)
2. I confirm that the information provided in sections 1 to 3 is correct.
3. I understand that the university reserves the right to withdraw registration made on the basis of information that proves to be untrue or misleading.
4. Processing of personal data - I confirm that I have read and understood the following statement:

*The University of the Highlands and Islands and Academic Partners are registered under the Data Protection Act 2018. By signing this form you consent to these bodies holding and processing your personal data for all purposes connected with our statutory and business requirements. Where required, your information may be supplied to other official agencies e.g. Higher Education Statistics Agency (HESA), Scottish Funding Councils for Further and Higher Education. The information may also be: aggregated with other information and used for our own or other research purposes; used for the purposes of providing references, if we are asked to so do; and information on your progress may be disclosed to an organisation providing you with financial support.*

Please see our Privacy Notice [here](https://www.uhi.ac.uk/en/research-enterprise/grad-school/code-of-practice/) or visit [www.uhi.ac.uk/gradschool](http://www.uhi.ac.uk/gradschool) Note: this information is supplementary to the University’s HE admissions and enrolment privacy notices.

1. Additional support requirements - I confirm that I will notify the Graduate School Office if I have a learning difficulty, disability or health condition that I wish to be taken into account during my time as a student and at my oral examination.

I confirm to the best of my knowledge that the information I have given on this form is correct.

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| Signature: | Date: |