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| A picture containing text  Description automatically generated | **Application to Change**  **Candidature for PGR students**  For guidance on completing this form, please see: <https://www.sheffield.ac.uk/rpi/pgr/manage/change-status> |

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| **SECTION 1: TO BE COMPLETED BY THE STUDENT** | | | | | | |
| Family Name |  | | First Name | |  | |
| Registration Number |  | | Department | |  | |
| Are you studying in the UK on a visa? | | Yes  No | | | | |
| Are you funded by a Doctoral Loan Yes  No | | Are you funded by a Research Council scholarship (if yes, provide details) Yes  No | | | | |
| Change of candidature – *tick all that apply:* | | Provide details below, e.g. new programme: | | | | |
| Change of mode of attendance | |  | | | | |
| Change of programme of study | | International students studying on a Tier 4 or Student visa should note that there may be visa implications if they request a change of programme, see: <https://www.sheffield.ac.uk/rpi/pgr/manage/change-status> | | | | |
| Change of research topic | |  | | | | |
| Change of Department and/or Faculty | |  | | | | |
| Additional details: *please use this space or attach additional sheets to add further information* | | | | | | |
| **ATAS – Academic Technology Approval Scheme (applies only to non-UK/EU/EEA students):**  ATAS approval is issued by the Foreign and Commonwealth Office (FCO) and is specific to a student’s research topic and programme of study. Students who change their research topic and/or programme of study may need to apply for a new ATAS approval certificate. If new ATAS approval is required, students are not permitted to commence their new programme or research topic until ATAS clearance has been approved by the FCO and email confirmation approving the change of programme/research topic has been issued by Research, Partnerships and Innovation. For more information see <https://www.sheffield.ac.uk/study/atas> | | | | | | |
| Does this change require ATAS approval? | | | | | | Yes  No |
| If yes, has the request for ATAS been submitted and approved?  (if yes, please attach a copy of the new ATAS certificate) | | | | | | Yes  No |
| Student signature: | | | | Date: | | |
| **Confirmation of the outcome of your change of candidature application will be sent to your university email account** | | | | | | |

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| **SECTION 2: TO BE COMPLETED BY THE ACADEMIC DEPARTMENT** | | | |
| Do you support the student’s application for a change of candidature? | | Yes  No | |
| Additional details: *please use this space or attach additional sheets to add further information* | | | |
| **This application has been considered by the Department(s) and the above information is accurate** | | | |
| Supervisor Name: | Signature: | | Date: |
| HoD/PGR Lead Name (current dept): | Signature: | | Date: |
| HoD/PGR Lead Name (new dept, if applicable): | Signature: | | Date: |

**Completed forms should be sent to Research, Partnerships and Innovation for processing: Arts & Humanities -** [**pgrarts@sheffield.ac.uk**](mailto:pgrarts@sheffield.ac.uk)**; Engineering -** [**pgreng@sheffield.ac.uk**](mailto:pgreng@sheffield.ac.uk)**; Health -** [**pgrhealth@sheffield.ac.uk**](mailto:pgrhealth@sheffield.ac.uk)**; Science -** [**pgrsci@sheffield.ac.uk**](mailto:pgrsci@sheffield.ac.uk)**; Social Sciences -** [**pgrsocsci@sheffield.ac.uk**](mailto:pgrsocsci@sheffield.ac.uk)

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| **SECTION 3: TO BE COMPLETED BY INTERNATIONAL STUDENT SUPPORT, ADVICE & COMPLIANCE FOR APPLICATIONS BY OVERSEAS STUDENTS ONLY** | | | | | | | | | |
| Is a new ATAS application required?  Yes  No | | If Yes, is ATAS required immediately?  Yes  No  Or, as part of a new Tier 4 visa application?  Yes  No | | | | Does this change of candidature require reporting to the Home Office?  Yes  No | | |
| **SECTION 4: TO BE COMPLETED BY RESEARCH, PARTNERSHIPS AND INNOVATION** | | | | | | | | | |
| Is this change of candidature request approved by the Faculty?  Yes  No | | | | Does this change of candidature require reporting to the Student Loans Committee?  Yes  No | | | | | |
| Notes: please record any amendments or notes concerning this application. If the application is not approved a reason must be provided. | | | | | | | | | |
| **Signed on behalf of the Faculty by:** | | | | | | | | | |
| Name: | | | Signature: | | | | | Date: | |
| Revised end date for payment of tuition fees |  | | | | Revised time limit | |  | | |