|  |  |
| --- | --- |
| **SRUC**  Postgraduate Research Application Form |  |

|  |  |
| --- | --- |
| **This  SRUC application form should be used for all PhD applications.** | |
| **Application To: PhD Agriculture, Rural and Environmental Studies** | |
| If you are applying for an advertised funded studentship please indicate the project title as advertised. If you are applying with your own project, please provide your own project title.  Please note that funded studentships are advertised for study on a full time basis unless otherwise stated. | |
| **Project Title** |  |
| **Mode of Study** | Full Time  Part Time |
| **Equal Opportunities Survey Reference (for SRUC Funded Studentships only)** |  |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Personal Information** | | | | | | | | | |
| Gender: Male  Female  Other | | | | Home Address: | | | | | |
| Title (Mr, Ms, etc): | | | |  | | | | | |
| First Name (s): | | | |  | | | | | |
| Surname/ Family Name: | | | |  | | | | | |
| Nationality: | | | |  | | | | | |
| Country of Domicile: | | | | Postcode: | | | | | |
| Date of Birth (dd/mm/yy): / / | | | | Current Contact Address (if different): | | | | | |
| Age at 1st September in year of entry: | | | |  | | | | | |
| Telephone: | | | |  | | | | | |
| Mobile: | | | |  | | | | | |
| Email: | | | | Postcode: | | | | | |
|  | | | | | | | | | |
| **Education History: Degrees or Diplomas Held (or Pending)** | | | | | | | | | |
| You must provide copies of certificates and transcripts. Pleased include all relevant documentation along with this application form. | | | | | | | | | |
| **Name of Institution and Country of Study** | **Qualification** | ***Full-Time/ Part-Time*** | **Qualification Subject(s)** | | ***From*** | | ***To*** | | ***Qualification Result*** |
| *Mth* | *Year* | *Mth* | *Year* |
|  |  |  |  | |  |  |  |  |  |
|  |  |  |  | |  |  |  |  |  |
|  |  |  |  | |  |  |  |  |  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Work Experience** | | | | | | | |
| Please give details of work experience and employment, including both paid and voluntary activities. | | | | | | | |
| *Job Title* | *Main Duties or Training* | *Name of Organisation* | *Full-Time/ Part-Time* | *From* | | *To* | |
| *Mth* | *Year* | *Mth* | *Year* |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

|  |
| --- |
| **Training** |
| Please provide details on any training you are undertaking which is relevant to this application |
|  |

|  |
| --- |
| **Membership of Professional Bodies** |
| Please provide details on any professional or technical memberships you currently hold, including name of association and type of membership (e.g. Associate, Student, Fellow etc.) |
|  |

|  |
| --- |
| **Outline of Proposed Research** |
| If you are applying for an advertised project, please leave this section blank.Self-funded or externally sponsored applicants should complete this section. To help us in considering your application, please outline the type of research you are interested in carrying out including the aims, objectives and methods of your intended research degree |
|  |

|  |
| --- |
| **Supporting Statement** |
| Please provide a brief statement showing why you should be considered for this project. If you are applying for an advertised funded project, detail how you meet the requirements outlined in the specification of the project you are applying for. Please add any other information you feel may support your application. Any additional information, such as a CV, can be included along with the application form. |
|  |

|  |  |
| --- | --- |
| **Supervision** | |
| Please indicate if you have identified a member of SRUC academic staff who you would prefer to act as your research supervisor. If you are applying for an advertised project, please input the name the first supervisor found on the project advert. | |
| Name of Supervisor: |  |
| Have you already contacted this supervisor regarding postgraduate research study? | Yes  No |

|  |  |
| --- | --- |
| **Funding** | |
| **If you are self-funded or externally sponsored you must provide evidence of funding (e.g. letter from a sponsor or bank confirming funds).** Attach all relevant documentation to this application form. | |
| **Sponsor** | |
| Please identify your sponsor and the level of funding support you have obtained. Funding will need to cover tuition fees, living costs and any research costs related to your proposed project. |  |

|  |  |
| --- | --- |
| **Referees** | |
| **You must provide the name and full contact details of two referees as failure to do so could delay your application being considered. At least one of these referees should be an academic**  **We are unable to accept references from relatives/family members.** | |
| Name: | Name: |
| Position: | Position: |
| Connection to you: | Connection to you: |
| Address:  Postcode: | Address:  Postcode: |
| Telephone: | Telephone: |
| Email: | Email: |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Disability** | | | | | |
| Do you have an impairment, health condition or learning difference? Yes  No  If yes, please tick the box which best describes your disability: | | | | | |
| Personal Care Support **[30]** |  | A specific learning difficulty such as dyslexia, dyspraxia or AD(H)D **[31]** |  | A social/communication impairment such as Asperger’s syndrome/other autistic spectrum disorder **[32]** |  |
| A long standing illness or health condition such as cancer, HIV, diabetes, chronic heart disease or epilepsy **[33]** |  | A mental health condition, such as depression, schizophrenia or anxiety order **[34]** |  | A physical impairment or mobility issues, such as difficulty using arms or using a wheelchair or crutches **[35]** |  |
| Deafness or a serious hearing impairment **[36]** |  | Blind or a serious visual impairment uncorrected by glasses **[37]** |  | A disability, impairment or medical condition that is not listed above **[38]** |  |
| A specific learning difficulty such as Down’s Syndrome **[39]** |  |  |  |  |  |
| Please give details of any disability, including any specific arrangements or facilities required (continue on a separate sheet if necessary): | | | | | |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Care Leavers** | | | | **Care Responsibilities** | | | |
| Are you from a care experienced/looked after background?  Yes  No  Prefer not to say | | | | Do you have caring responsibilities?  Yes  No  Prefer not to say | | | |
| Foster Care |  | Care Leaver |  | Who do you care for? | | | |
| Kinship |  | Residential |  | Disabled Child/  Children Under 18 |  | Child/Children Under 17 |  |
| Other |  |  |  | Adult(s) Over 18 |  | Other |  |
| If other, please provide further details: | | | | If other, please provide further details: | | | |
|  | | | |  | | | |

|  |  |  |
| --- | --- | --- |
| **Fee Status** | | |
| Country of Birth: | | |
| For the purposes of tuition fees, please indicate your status: | | |
| Scottish | Rest of UK | EU |
| Overseas | Refugee | Asylum Seeker |
| Will you have lived in Scotland for more than three years by the start of the course? | | |
| Is there any other information which may assist us in considering your fees status (for example BFPO, Refugee or Asylum Seeker status, studied at Boarding School): | | |
| **You may be sent an additional fee status questionnaire in order to progress the setting of your tuition fees.** | | |

|  |  |
| --- | --- |
| **English Language** | |
| Is English your first or preferred language?  Yes  No | If not, please state first language: |
| If not, please provide an IELTS/TOEFL/CPE/CAE certificate that is less than 2 years old, with your application if available. | |

|  |  |  |
| --- | --- | --- |
| **International (Non UK) Applicants** | | UK Applicants, please continue to the “Planning Statistics” section |
| Do you require a visa to study in the UK? Yes  No | | |
| Passport Number: | Passport country of issue: | |
| Please attach a the passport page of your passport, and tick to confirm enclosure. Photocopies of your passport is acceptable; originals will be required at Enrolment.  Passport (photograph page) | | |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Planning Statistics** | | | | | | | |
| This information is required for statistical purposes and will not be considered during the selection process. You need to complete this section only if you have stated on Page 1 that your Country of Domicile is the UK. | | | | | | | |
| Ethnic Origin (please tick *one*): | | | | | | | |
| White – British 11 |  | Black – Caribbean 21 |  | Indian 31 |  | Chinese 34 |  |
| White – Irish 12 |  | Black – African 22 |  | Pakistani 32 |  | Asian – Other 39 |  |
| White – Other 19 |  | Black – Other 29 |  | Bangladeshi 33 |  | Other 80 |  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Marketing Information** | | | | | | | |
| How did you first hear about the programme? | | | | | | | |
| SRUC Website |  | FindAPhD |  | SRUC Staff |  | Friend/Relative |  |
| Former/Current Student |  | Other  Please Specify: | | | | |  |

|  |  |
| --- | --- |
| **Declaration** | |
| In submitting this application I confirm that the information provided is true, complete and accurate and no information or other material information has been omitted. I accept that if this is not the case, SRUC shall have the right not to process my application or if already enrolled request that I leave the course. I give my consent to the processing of my data by SRUC in accordance with the data protection legislation and GDPR. | |
| **Signature:** | **Date (dd/mm/yy):** / / |

|  |
| --- |
| Please contact SRUC’s Doctoral College Office at [**Doctoral.College@sruc.ac.uk**](mailto:Doctoral.College@sruc.ac.uk)with any questions.  **Completed application forms should be returned to:**  [Doctoral.College@sruc.ac.uk](mailto:Doctoral.College@sruc.ac.uk) |

|  |  |
| --- | --- |
| **FOR OFFICE USE ONLY** UNITe Number: S | |
| Unconditional  Conditional  Reject  **Date of Offer:** | **Offer Details:** |

**Notes and Guidance**

**The  SRUC application form should be used for all PhD applications**

**Disability / Additional Support Needs**

Please insert the appropriate code onto the application form, giving full details, continuing on additional paper if necessary.

|  |  |
| --- | --- |
| **[30]** Personal care support | **[35]** A physical impairment or mobility issues, such as difficulty using arms or using a wheelchair or crutches |
| **[31]** A specific learning disability such as dyslexia, dyspraxia or AD(H)D | **[36]** Deafness or a serious hearing impairment |
| **[32]** A social/communication impairment such as Asperger’s syndrome/other autistic spectrum disorder | **[37]** Blind or a serious visual impairment uncorrected by glasses |
| **[33]** A long standing illness or health condition such as cancer, HIV, diabetes, chronic heart disease or epilepsy | **[38]** A disability, impairment or medical condition that is not listed above |
| **[34]** A mental health condition, such as depression, schizophrenia or anxiety order | **[39]** A specific learning difficulty such as Down’s Syndrome |

**Qualifications**

Non-UK applicants should be aware that SRUC uses the UK ENIC service for translation of qualifications. Further information can be found on their web site: [www.enic.org.uk](http://www.enic.org.uk)

**International (Non UK) Applicants**

Please enter your passport number, country of issue and include a photocopy of the photograph page.

Please also include photocopies of certificates of qualification in support of your application.

These additional requirements for non-UK applicants are driven by the requirements of the UK’s Immigration and Visa regulations, and are aimed ultimately to assist you in your application. Due to the additional paperwork required, overseas applicants are advised to check the suitability of their qualifications with SRUC prior to submitting an application (via the email address: **internationalstudent@sruc.ac.uk**).

**Data Protection**

Data Protection Statement: All data kept within SRUC is treated confidentially. By completing this application form you consent to your data being made available for official purposes, through our student administration system, to administrative and academic staff at SRUC.

**Application Checklist**

Please ensure you have provided the following information in support of your application:

|  |  |
| --- | --- |
| Copies of degree certificates and transcripts |  |
| Evidence of funding (e.g. sponsor letter or bank statement) |  |
| Certificate of English proficiency (where English is not your first language) |  |
| Copy of the photograph page of your passport (non-UK applicants) |  |

Please contact SRUC’s Doctoral College Office on [**Doctoral.College@sruc.ac.uk**](mailto:Doctoral.College@sruc.ac.uk)with any questions.