# Split-Site Postgraduate Research (PGR) Proposal Form

# (single UoP award)

## For University wide Split-Site PGR proposals the Memoranda Strategic Approval (MSA) process will have nominated a lead Faculty as part of the initial strategic approval consideration.

## Following MSA initial strategic approval for Split-Site PGR proposals (University wide or single Faculty), completion of this proposal form provides the information required by Faculty Executive Committees to consider approval of a Split-Site PGR arrangement (single UoP award).

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|  | Initial Strategic Approval – required for all Split-Site PGR proposals | |
| 1.1 | Date initial strategic approval granted via MSA Memoranda Agreements process: |  |
| 1.2 | Proposer name (UoP academic staff): |  |
| 1.3 | Lead Faculty nominated by MSA:  *(University wide arrangements only)* |  |
| 1.4 | Nominated lead person: |  |
| 1.5 | **University wide**  **BAL**   **CCI**  **HSS**  **SAH**  **TEC** | |

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| 2. | Partner Institution Details |  |
| 2.1 | Legal Name of Proposed Partner Institution: |  |
| 2.2 | Registered Address of Partner Institution: *(include country)* |  |
| 2.3 | Provide evidence of support from the Partner for the Split-Site PGR arrangement: (*date & text of email*) |  |
| 2.4 | Describe how the reputation & academic standing of the Partner is comparable to UoP? *(Provide URLs of information source).* |  |
| 2.5 | Provide details of the nature and duration of any existing links between UoP and the Partner: |  |

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| 3. | Proposed PGR Arrangements | |  |
| 3.1 | How many Postgraduate Research Students (PGRS) will register under this arrangement? (*if known, include subject areas of research)* | |  |
| 3.2 | Provide the number of intakes for each academic year:  *(e.g. October or February or both)* | |  |
| 3.3 | Provide the first intake date for registration of PGRS: | |  |
| 3.4 | Provide details of PGRS attendance at the University of Portsmouth: | |  |
| 3.5 | Confirm Second Supervision will be provided by the Partner for all PGRS registered as part of the research arrangement: | |  |
| 4. | | **Risk Evaluation** | |
| 4.1 | | If an overseas partner, what are the current risks identified by UK Govt & UoP Insurers for the country being visited? (<https://www.gov.uk/foreign-travel-advice> & visit <https://sites.google.com/port.ac.uk/travelandexpenses/overseas-travel/overseas-travel-risk-assessment?authuser=0&pli=1> and download the Healix report for the country being visited and summarise key points here. If you need a city-specific report, then please email [insurancesupport@port.ac.uk](mailto:insurancesupport@port.ac.uk)) |  |
| 4.2 | | Are there any location and/or regional factors, which may affect the Split-Site PGR arrangement? |  |
| 4.3 | | Details of any potential conflicts of interest:  *(Any conflicts of interest for the awarding institution by putting the agreement in place).* |  |

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| 5. | | | | Contingency Arrangements | | | | |
| 5.1 | | | | Provide details of the contingency arrangements in the event of a part or whole failure of the Partner: | |  | | |
| 6. | | Financial Arrangements | | | | | | |
| 6.1 | | Confirm payment of 50% of the International or home/EU applicable PhD fee to Portsmouth: | | | |  | | |
| 6.2 | | Provide details of any bench fees payable to UoP for applicable subject areas: *(indicate the specific research expenses which are included in the bench fee)* | | | |  | | |
| 7. | Proposer Declaration | | | | | | | |
| The statements and information in this form are to the best of my knowledge, true and correct at the time of submission of this form. It is acknowledged that the form, including any attachments submitted with it, may be subject to audit. | | | | | | | | |
| **UoP Proposer Name:** | | | | | **eSignature or type ‘agreed’:** | | **Date:** | |
|  | | | | |  | |  | |
| 8. | | | Signoff by Executive Dean (for University wide proposals, as nominated by MSA) | | | | | |
| I hereby confirm that:  1) relevant discussions have taken place with appropriate stakeholders including:   * Each Head of School/Department involved; * AD(A) of each Faculty involved; * Faculty Research Degree Coordinator of each Faculty involved; * UoP Global; * Associate Dean Global Engagement (AD(GEEP))/ Faculty Global Engagement Leads; * Deputy Vice-Chancellor (Global Engagement and Student Life); * Deputy Vice-Chancellor Research and Innovation; * Director of Graduate School.   2) any additional due diligence and/or site visit has been undertaken (or scheduled), and;  3) Faculty Executive approval has been granted. | | | | | | | | |
| **Name:** | | | | | **eSignature only:** | | **Date:** |
|  | | | | |  | |  |
| Minute reference and date of relevant approving Faculty Executive Committee: | | | | | | |  |
| Where required by Faculty Executive - Site visit undertaken / or scheduled on: | | | | | | |  |

Thank you for completing this form. QAS Advisor, AD(A), or AD(GEEP) please email the completed and signed off form along with any additional documentation requested by Faculty Executive Committee (MS word format) to: [partnerships@port.ac.uk](mailto:partnerships@port.ac.uk)

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| **9. Partnerships Declaration** | |
| The Partnerships Team confirms;   * Any and all queries - including but not limited to; financial, visa or site visit issues (where applicable) have been resolved; * That the Agreement contract has been signed by all included Parties, and students can be considered for student exchange/study abroad to named courses as appropriate from the date found in the signed Agreement contract between the parties; * All associated approvals documents, and the fully executed Agreement contract have been recorded on internal UoP systems. | |
| **Name:** |  |
| **Date:** |  |