

Assessment on Qualifying Report of Research Degree Candidature (SGS35)

Notes to Student:

Please submit the following items to your research supervisor for assessment:

- (i) three copies of Qualifying Report;
- (ii) this assessment form with **Section A** duly completed and Cover Sheet attached;
- (iii) a recent unofficial transcript from AIMS (Student Record ⇒ My Academic Record ⇒ Grade Detail);
- (iv) the latest coursework plan from AIMS (Student Plan ⇒ DegreeWorks ⇒ Plans ⇒ View: [Notes] ⇒ Print [bottom right]);
- (v) a summary on studentship records from AIMS (Student Record ⇒ My Finance ⇒ Scholarship and Financial Aid Records); and
- (vi) a copy of the Submitted/Approved Planner from AIMS (Student Record ⇒ My Study Details (for Research Degree Programmes) which should include the list of publications during research studies at CityU.

The Supplementary Form on Evaluation of Teaching Assistant (TA) Assignments will be processed via AIMS online function starting from June 2016. Relevant students will receive notification in due course.

Notes to Qualifying Panel:

- 1) The Qualifying Panel is invited to:
 - (i) complete Section B of this form;
 - (ii) forward the form to the student concerned for completion of Section C; and
 - (iii) seek the approval of the Department Head/School Dean in Section D.
- 2) **Please forward the completed form to SGS within 30 days from the required Report Submission Date; otherwise, the studentship and/or research tuition scholarship of the student, if applicable, will be suspended accordingly.**

Section A Details of the Student's Candidature (to be completed by the student)

Name: _____ Student No.: _____

Commencement Date: _____ Dept./Sch.: _____ Prog./Mode: _____

(Normal) Study End Date: _____ (Max./Ext.) Study End Date: _____

Quota : _____ Report Submission Date (as stipulated in the email reminder) : _____

Records of Postgraduate Studentship

Please refer to the attached *Scholarship and Financial Aid Records* for studentship award records. For students who are eligible for Postgraduate Studentship, the award period should normally cover the normal study period. **In case of the "Award End Date of Studentship" ends before the "(Normal) Study End Date", please bring this situation to your supervisor's attention.**

Please forward the form to the Qualifying Panel for assessment.

Student Name:

Dept.:

Section B Assessment of the Student's Academic Performance (to be completed by the Qualifying Panel)
(please tick as appropriate)

1. **Report Received On:** _____ (dd/mon/yyyy)

2. **Comments on the Student's Coursework Performance:**

Please note that MPhil students are normally required to complete 7 credit units of coursework (minimum requirement) and PhD students 14 credit units (normal requirement) unless credit transfer is approved by the Department/School. At least half the coursework (4 credit units for MPhil and 7 for PhD) should be taken at CityU or other local institutions.

Please refer to the attached unofficial transcript and coursework plan on the student's coursework performance and requirements.

3. **Comments on the Qualifying Report:**

(In accordance with the regulations, the qualifying report shall include "a survey of the relevant literature, an identification of a specific research topic, the research methodology and a discussion on the possible outcome.")

4. **Comment if the research work undertaken by the student is an applied research:**

5. **If other assessment(s) have been arranged, please provide details and comments:**

Interview Seminar presentation Oral examination
 Others (please specify): _____

Comments: _____

Student Name:

Dept.:

6. Recommendations:

(a) Recommendation for Continuation of Studies

The student's overall performance is: Excellent Good Fair Not Satisfactory Poor

Please specify any recommendations for improvement if the student's performance is not satisfactory:

In view of the above, we recommend that (* delete as appropriate):

- the student be allowed to continue with *PhD/MPhil study.
- the student be required to submit a revised Qualifying Report by _____.
- the student's study be terminated.

[For recommendation of study termination on academic grounds, the supervisor is requested to complete a study termination form (SGS38) which can be downloaded from SGS website.]

Others: _____

(Applicable for eligible full-time students only)

(b) Recommendation for Continuation of Studentship by the Supervisor

[Note: Students who did not fulfill the threshold requirement set by the University (i.e. a minimum cumulative GPA of 2.50) or other requirements stipulated by individual Department/School will have their studentship discontinued.]

- I recommend continuation of the Studentship for 12 months.
- I recommend continuation of the Studentship for a tentative period of _____ month(s).

Please specify the condition(s) for renewal: _____.

I do not recommend continuation of the Studentship. The Studentship will be discontinued with effect from the month following the qualifying report assessment.

Remarks:

Supervisor/ Chair, Qualifying Panel

Signature

Date

Qualifying Panel Member

Signature

Date

Qualifying Panel Member

Signature

Date

Student Name:

Dept.:

Section C Feedback from the Student (to be completed by the student)

1. Feedback on the above assessment and comments made by your Qualifying Panel:

2. Feedback on your overall educational and learning experiences (including coursework study, research and academic related duties assigned by your department/school, if applicable) at CityU and any suggestions for improvement, if deemed necessary:

3. (For full-time students only) I declare that:

I have not engaged in any paid employment in the preceding 12 months.

I have engaged in paid employment in the preceding 12 months and have sought approval via SGS.

4. I undertake to abide by the Regulations Governing Postgraduate Studentships, if applicable.

Students' study progress (and continuation of studentship, if applicable) with recommendation other than continuation will be notified by SGS on the Qualifying Panel's recommendation.

Student Name

Signature

Date

Student Name:

Dept.:

Section D Approval by the Department Head/School Dean

Comments on the Qualifying Panel’s assessment, the student’s feedback, and other general comments, if any:

I *approve* the Qualifying Panel’s recommendation on study as given in Section B6 (a).
 do not approve

Based on the assessment of the Qualifying Panel in Section C and the Evaluation of Teaching Assistant Assignments*, the overall recommendation on the Studentship arrangement is as follows (*applicable for eligible full-time students only*):

- Renewal of studentship for 12 months.
- The TA studentship (i.e. 25% of studentship) be put on probation for one semester/ be deducted from the Postgraduate Studentship (applicable for students whose TA studentship was already put on probation for one semester).
- Continuation of the Studentship for a tentative period of _____ month(s).
- Discontinuation of Postgraduate studentship.

**Note: The Supplementary Form on Evaluation of Teaching Assistant (TA) Assignments will be processed via AIMS online function starting from June 2016. Department Heads/School Deans and designated departmental staff will have access to the performance ratings.*

Signature: _____
Department Head/School Dean

Date: _____

Please return the completed form to SGS for processing.