PGR-7 Form
Alteration of Research Supervisor(s)

Student name: ______________________________ ID number: ______________________________

Faculty: _______________________________ Department/School: ________________________________

Degree for which registered: (please tick as appropriate) [Masters] [PhD]

Original thesis title: __________________________________________________________
_____________________________________________________________________

New thesis title (if different from original): ________________________________________
_____________________________________________________________________

Proposed Current Supervisor(s): (Please include the names of the Supervisors(s) to be noted on the Student Record System)

Name: ________________________________________ Signature: _______________________________
Current Primary Supervisor

Name: ________________________________________ Signature: _______________________________
Current Joint Supervisor (if applicable)

Name(s) of Former Supervisor(s): (Please include the name(s) of the Supervisors(s) to be removed from the Student Record System)

Name: ________________________________________ Signature: _______________________________
Former Primary Supervisor

Name: ________________________________________ Signature: _______________________________
Former Joint Supervisor (if applicable)

Reason(s) for the alteration of Supervisor(s)


Approved by:

Head of Department/School: (Where the HoD is a supervisor; the Dean of Faculty should sign-off)

Name _________________________________ Signature __________________________ Date __________

Assistant Dean Research: (Where the Ass. Dean Research is a supervisor; the Dean of Faculty should sign-off)

Name _________________________________ Signature __________________________ Date __________

Dean Graduate & Professional Studies: (as per academic regulation 5.5.8, the revised arrangements for the supervision shall be proposed to the Postgraduate Research Committee for ratification)

Name _________________________________ Signature __________________________ Date __________

The completed and signed form must be returned to the Academic Registry. Email PGRProgression@ul.ie

Graduate & Professional Studies
Rev 6 May 2021