**PGS01**

**POSTGRADUATE STUDIES**

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| **APPLICATION FOR APPROVAL OF PROJECT PROPOSAL AND CONFIRMATION OF STUDY PANEL** |

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| **STUDENT**  Surname:……………………………………………. Initials:……………… Title:……… Student number:…………………………E-mail:……………………………………..  Mobile:……………………………..Postal address…………………………………………………..  Qualification Name:……………………………………………………………………….  Qualification Code:………………....... |
| **RESEARCH PROJECT**  Project title: ……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………… |

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| **STUDY PANEL**  **Please note:** For external supervisors/co-supervisors, a CV and letter of motivation should be attached.  **Supervisor:**  Title, First Names and Surname,: …………………………………………………………………….  Department and Institution: ………………………………………………………………………….  Postal address:………………………………………………………………………………………...  Physical address (for courier purposes):……………………………………………………………  Telephone number: (w)………………………………. (h) ………………………………………..  Cellular phone number: …………………………………. Skype:…………………………………..  E-mail address: ………………………………………………Fax number:………………………….  Highest qualification:………………………………………..  Field of specialization:………………………………………………………………… |
| **Co-supervisor 1:**  Title, First Names and Surname: …………………………………………………………………….  Department and Institution: ………………………………………………………………………….  Postal address:………………………………………………………………………………………...  Physical address (for courier purposes):……………………………………………………………  Telephone number: (w)………………………………. (h) ………………………………………..  Cellular phone number: …………………………………. Skype:…………………………………..  E-mail address: ……………………………………………… Fax number:…………………………  Highest qualification:………………………………………..  Field of specialization:………………………………………………………………… |
| **Co-supervisor 2:**  Title, First Names and Surname: …………………………………………………………………….  Department and Institution: ………………………………………………………………………….  Postal address:………………………………………………………………………………………...  Physical address (for courier purposes):……………………………………………………………  Telephone number: (w)………………………………. (h) ………………………………………..  Cellular phone number: …………………………………. Skype:…………………………………..  E-mail address: ……………………………………………… Fax number:…………………………  Highest qualification:………………………………………..  Field of specialization:………………………………………………………………… |

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| **1. RECOMMENDATION BY THE DRC**  Yes  No  N/A  Equivalence/status was granted by Senate.  Yes  No  N/A  Confidentiality agreement signed by all stakeholders is attached.  Yes  No  The project proposal and project summary are attached.  Yes  No  The project requires ethics clearance.  Date of DRC meeting at which proposal approved.  **/**  **2015**    \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Signature of the HoD/Chair of DRC** **Date** |
| **2. RECOMMENDATION BY THE FCPS**  Yes  No    A letter from the relevant Committee for Research Ethics granting approval is attached (when applicable)  Yes  No    \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Signature of the Chair of FCPS**  **Date** |

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| PGS01 should be completed by the HoD/Chair of DRC, and submitted for to the FCPS for approval (with the full proposal, a summary of approximately 150 words of the proposal, and an application for ethics clearance), following recommendation of the submission by the DRC.  PGS01: the full proposal (with a summary of approximately 150 words), and a letter of ethics clearance from the relevant Committee for Research Ethics should be submitted to the FCPS for recommendation  Approved proposals will be submitted in a summary template to the SCPS for noting |