

**Research Proposal Form**

Master of Science in Advanced Healthcare Practice

Applicant Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Main Discipline: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you intending to register for this programme:
Full time  Part time 

Proposed Title:

Background and Aim (max 200 words):



Overview of Research Design/Methodology (max 150 words):



References (if applicable):