

Fourth Year Research Project Proposal Form 2023-2024 Dow University of Health Sciences <u>Research Department</u>

Fourth Year Clinical Group:		
TYPE OF STUDY		
☐ Epidemiology	Clinical	Laboratory
PROJECT TITLE (in cap	ital letter)	
Research Proposal Sur	mmary	
Introduction:		
Objective(s):		
1-		
MATERIAL & METHODS:		
Study Design:		
Study population		
Duration of Study:		
Sample size:		
Sampling Technique:		
Inclusion Criteria of Study Part	icipant:	
1-		
2-		
Exclusion Criteria of Study Part	icipant:	
2-		
Data collection Procedure :		
Data confection i roccuare.		
Data Analysis Plan:		
CONTACT		
CONTACT		
Supervisor's Name:		_Contact No:
E-mail:		
Group Leader's Name:		_Contact No:
F-mail:		

Fourth Year Clinical Group:	
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GROUP MEMBERS:

S. No	Name of the Students	Email	Contact No
	Group A:	Introduction & Abstract	
1			
2			
3			
4			
	Group B	Data Entry & Results	
1			
2			
3			
4			
	Group C: Discussion & compi	le complete Research Study Submission	in Research Department
1			
2			
3			
4			
	Group D: to make presentation including present your study		
1			
2			
3			
4			

Date Signature of the Supervisor Signature of the Research Coordinate			
	 Date	Signature of the Supervisor	Signature of the Research Coordinator