



Fourth Year Research Project Proposal Form 2022-2023
Dow University of Health Sciences
Research Department

Fourth Year Clinical Group: _____

TYPE OF STUDY

<input type="checkbox"/> Epidemiology	<input type="checkbox"/> Clinical	<input type="checkbox"/> Laboratory
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PROJECT TITLE (in capital letter)

Research Proposal Summary

Introduction:
Objective(s):
1-
MATERIAL & METHODS:
Study Design:
Study population
Duration of Study:
Sample size:
Sampling Technique:
Inclusion Criteria of Study Participant:
1-
2-
Exclusion Criteria of Study Participant:
1-
2-

Data collection Procedure :
Data Analysis Plan:

CONTACT

Supervisor's Name: _____ Contact No: _____
E-mail: _____
Group Leader's Name: _____ Contact No: _____
E-mail: _____

Fourth Year Clinical Group: _____

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 & compile 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 Coordinator