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**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):

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

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References (if applicable):