**POSTGRADUATE INSTITUTE OF SCIENCE**

**Form 4.7.2A**

**University of Peradeniya**

M.Sc. Research Proposal Submission Form

Please submit this form with your Research Project Proposal before starting your research project.

Name of student: ……………………………………………………………………..

Registration No: ………………………………………..

Board of Study: …………………………………………………………..

M.Sc. Programme: ………………………………………..……..

Tentative title of the research project: ……………………………………………………

…………………………………………………………………………………………….

…………………………………………………………………………………………….

Mr./Ms. ……………………………………………………………………… has obtained the required GPA to proceed with the research project.

Date of release of the GPA: …………………… GPA: …………….…….

Name of the M.Sc. programme Coordinator: ………………….…………………………

Signature: ……….………….. Date: ……………………..

I am willing to undertake the supervision of the above Research Project to be carried out by Mr./Ms…………………………………………………………

Research Project supervisor (1)

Name : ………………………………….…………….

Signature: ……………………………….. Date: ………………..……

Affiliation: …………………………………………………………..

Research Project supervisor (2)

Name : ………………………………………………….

Signature: …………………….…….. Date: …………………..……

Affiliation: ……………………………………………..………………………..

**Note I: Supervisors are normally expected to supervise not more than five students of a given M. Sc. programme. However, under special circumstances the relevant Board of Study may accommodate changes to this condition.**

**Note II: Other than the supervisors, the persons providing data sets, laboratory facilities, etc. may also be considered as co-authors in publications resulting from the research work, depending on their contributions as determined by the supervisors of the project.**

**Note III: If the research project involves human or animal subjects or any other ethical issues, please request clearance from the PGIS Ethical Committee. Required forms can be down loaded from the PGIS website or obtain from the Director’s Office.**

Mr./Ms. ………………………………………………………………….. has paid the 50% of the payment for the SLQF 10 programme for the renewal of registration.

Senior Assistant Registrar/Assistant Registrar/ PGIS:

Signature: ……………………. Date: …………………………

Approval of the Chairman of the Board of Study:

Name of the Chairperson: ……………………………………………

Signature: ……….………….. Date: ……………………..

For office use only:

The Coordinating Committee approval on: …………………………..

Approval of the Director/PGIS: ……………………………..