



Approval for MSc Dissertation in Clinical Exercise Physiology and Supervision EXERSCI 792 A & B

This form must be completed before enrolment.

Name:	ID Number:	

Supervisor:

A brief and general description of the proposed research written by the student after discussion and with the agreement of their supervisor **(200 words maximum)**:

Declaration by Student:

- I agree to abide by safety guidelines relevant to my project/topic as specified in the Health & Safety Manual.
- I have discussed the proposed research with my supervisor, and I understand that my project will be required to conform to my supervisor's area of research.

Signature:

Date:

Declaration by Supervisor:

• I have discussed the proposed research with the student named above and agree to provide primary supervision through to submission of the dissertation.

Signature:

Date:

Approval of project / topic by PG Committee / HoD

Signature:

Date: