

MI READING COURSE PROPOSAL			
STUDENT INFORMATION			
SURNAME:		GIVEN NAME:	
BANNER #:		PROGRAM OF STUDY:	
IS THIS THESIS WORK?:	<input type="checkbox"/> Yes <input type="checkbox"/> No	YEAR OF STUDY:	<input type="checkbox"/> 1ST <input type="checkbox"/> 2ND <input type="checkbox"/> OTHER
<p>** If this is not thesis work, you are agreeing to conduct research with the intent to publish in a peer reviewed, academic journal with the understanding that this work may continue after the directed reading course is finished. Your contribution will be properly attributed.</p>			
DETAILS			
READING COURSE TITLE			
SUPERVISOR(S)			
REGISTRATION	<input type="checkbox"/> FALL <input type="checkbox"/> WINTER <input type="checkbox"/> SUMMER YEAR:		
PROPOSAL			
Your reading course proposal must be attached to this form and should include the following:			
TITLE:	<input type="checkbox"/>	SELECTED READING LIST	<input type="checkbox"/>
INTRODUCTION:	<input type="checkbox"/>	METHODOLOGY (including requirement for ethics approval)	<input type="checkbox"/>
PURPOSE / OBJECTIVES:	<input type="checkbox"/>	TIMELINE FOR ACTIVITIES IN THE COURSE	<input type="checkbox"/>
RELEVANCE TO THE IM FIELD:	<input type="checkbox"/>	METHOD OF EVALUATION (see criteria below)	<input type="checkbox"/>
RELEVANCE TO THE MI COMPETENCIES:	<input type="checkbox"/>	RELEVANT JOURNALS IDENTIFIED	<input type="checkbox"/>
RESEARCH, ETHICS			
Select a Research cluster			
SPECIFIC CLUSTER:			
Refer to Research Ethics			
DOES YOUR RESEARCH REQUIRE ETHICS REVIEW?	<input type="checkbox"/> YES <input type="checkbox"/> NO		
DESCRIPTION OF READING COURSE OBJECTIVES			
A 100 - 200 word abstract must be submitted			
SUPERVISOR: CRITERIA FOR METHOD OF EVALUATION OF THE READING			
COMPONENT	DETAILS	DUE DATE	VALUE
SIGNATURES			
STUDENT:		SUPERVISOR(S):	
DIRECTOR:		MI PROGRAM COORDINATOR:	
**Please note, by signing this form, you are allowing the continued use of your work for the intent of publication.			
ADMIN			
COPY TO SUPERVISOR	<input type="checkbox"/>	RESEARCH CLUSTER	<input type="checkbox"/>
COPY TO FGS	<input type="checkbox"/>	ABSTRACT	<input type="checkbox"/>
COPY TO PROGRAM COORDINATOR	<input type="checkbox"/>	ADDED TO WEBSITE	<input type="checkbox"/>