THE HONG KONG POLYTECHNIC UNIVERSITY

RESEARCH DEGREE PROPOSAL

(To be typewritten by the Applicant)

Note: Please note that the information given in this form will only be used for processing this application.

1. Project Title:

2. Project Objectives: (Purpose of proposed investigation)

3. Scope and Background of Research:
   (Please identify key issues/problems to be addressed)
4. Research Methodology:

5. Project Significance and Value:
6. **Details of Any External Collaboration:**

In these circumstances, are there likely to be any complications associated with the publication of your thesis? Give details.

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7. **Research Ethics/ Safety Approval**

(For ethics approval, please read the Guidelines for Ethics Review for Research/Teaching Projects Involving Human Subjects, which are available at [https://www2.polyu.edu.hk/ethics/Polyu/eth-hm-4.htm](https://www2.polyu.edu.hk/ethics/Polyu/eth-hm-4.htm), and make sure that ethics approval is obtained if your project involves human subjects. For safety approval, please read the policy and procedures for safety approval available at the Health, Safety & Environment Office Homepage. Please attach the approval letter where appropriate.)

I/We confirm that approval:

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<th>* has been obtained</th>
<th>* is not required</th>
<th>* will be obtained before the start of the project</th>
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(* Please tick as appropriate)
8. Statement of the Applicant

I wish to register for a research degree on the basis of the proposal given in this Form (RDC/1A).

I understand that, during the period of my registration with the University, I may not be a candidate for any other degree or award.

I understand that, except with the specific permission of the Research Committee, I must prepare and defend my thesis in English. (You are required to seek permission if another language, which is considered more appropriate to the subject, is to be used in the presentation of the thesis. Please submit the justification together with this application)

I undertake to abide by the general regulations of the University.

Signature ___________________________________________ Date ________________

(Student Applicant)

Name of Applicant __________________________________________

9. Endorsement by the Proposed Chief Supervisor

Signature of Chief Supervisor ___________________________ School/Department__________

Name of Chief Supervisor ___________________________ Date ________________

[Please send this form, application form RC/IPS, and Form IPS/1 to the Director of School/Head of Department for completion of Section 10.]

10. Recommendation of Head of Affiliated Department in the University

I support this application, and confirm to the best of my knowledge that adequate facilities as requested in Form IPS/1 will be provided to enable the student to conduct and complete the research programme in an efficient and safe manner. I also agree to provide adequate research space for the applicant during the research programme.

Signature ___________________________ Date ________________

(Director of School/Head of Department)