



WALAILAK UNIVERSITY
College of Graduate Studies

RESEARCH PROPOSAL FORM FOR PH.D. APPLICATION

Academic year _____ Term _____

Please complete the following form in English only.

PERSONAL DETAILS

Title Mr. Miss Ms. Mrs. Sex Male Female

Name _____

First name

Family name

1. DETAILS OF YOUR PROSPECTIVE PH.D. PROGRAM AND STUDY PLAN

Make sure that you have contacted your prospective advisor before completing this form.

Program _____

School/College _____

Proposed
Thesis Advisor _____

Proposed
Thesis Title _____

Study Plan Plan 1.1 for a Master degree holder Duration of Your _____
 Plan 1.2 for a Bachelor degree holder Research _____
Months

2. DETAILED SCIENTIFIC RESEARCH PROPOSAL (1000 – 1500 wds). *Please provide details of the background and significance to the research being proposed, describe the hypothesis to be tested, the methods of research to be used, relevant references and any preliminary data which supports the application.*

2. DETAILED SCIENTIFIC RESEARCH PROPOSAL (1000 – 1500 wds). *Continue.*