



Tehran University of Medical Sciences
Global Strategies and International Affairs (GSIA)

Office of IC-TUMS Vice Dean for Research Affairs

Research Project/Thesis Proposal Form

Note: This form is provided to you in **Word format** to make it easy for you to enter information directly into the document; however you are not allowed to change or alter items or format of this form in anyways.

- ❖ If any part of the form does not apply to you, put N/A in that part instead of deleting it.

Failure to comply with this paragraph will result in rejection of your proposal or a significant delay in processing it.



Research Title:

Full Name of the Project Manager(s):

School/Research Center:

Type of Research:

Basic

Applied/Clinical

H S R

This research is a:

Student Thesis

TUMS Research Project

Joint Research Project



Project Description

If a thesis, specify the level: Undergraduate M.Sc. MPH PhD Postdoc.

Type of Study: Please mark

<input type="checkbox"/>	Case series
<input type="checkbox"/>	Cross sectional
<input type="checkbox"/>	Case / control
<input type="checkbox"/>	Cohort
<input type="checkbox"/>	clinical trial / interventional
<input type="checkbox"/>	Experimental
<input type="checkbox"/>	Pharmaceutical Study
<input type="checkbox"/>	Implementation of a scientific/ executive Method
<input type="checkbox"/>	Test Review
<input type="checkbox"/>	Method Review
<input type="checkbox"/>	Qualitative
<input type="checkbox"/>	Health System Management Study
<input type="checkbox"/>	Software Design

Information about the Project Manager(s)

- Full Name(s):
- Academic Rank:
- School/Research Center:
- Department:
- Research Location:
- Expected Duration:
- Current Position and work location:
- Work Phone Number:
- Work Address:
- E-mail Address:
- **Contact Number in case of emergency:**



Research Project Team: (Other supervisors, advisors, students, other partners)

1	Full Name	Position and Academic Rank	Type of Involvement	E-mail address and Phone Number	Partner's Signature
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					



1- Proposal Abstract (max 300 words):

Key Words :



2- Rationale and Backgrounds:



3- Research Objectives and Goals:

A: Main Objective:

B: Specific Objectives:

C: Goals:



4- Research Questions and Hypothesis:



6- Variables Table:

	Variable	Definition	Qualitative		Quantitative		Variable		Measurement Method	Scale
			Ordinal	Nominal	Discrete	Continuous	Independent	Dependent		
1										
2										
3										
4										
5										
6										
7										
8										
9										
10										
11										
12										



9- Ethics: (Attach Ethical Consent Form if applies)



10- Safety Considerations:



11 - Limitations:



12 - References:



13- Budget Details: (in Rials)

List of Expenses				Cost (amount in Rials)
Research Personnel and Partners' Compensation	Name	Hours required		
	1-			
	2-			
	3-			
	4-			
	5-			
	6-			
	7-			
	8-			
Subtotal:				
Equipment and instruments (non expendable)	Equipment and Model No.	Manufacturer	Quantity	
	1-			
	2-			
	3-			
	4-			
	5-			
	6-			
Subtotal:				
Equipment (expendable), lab animals and Materials	Items	Manufacturer or Provider	Quantity	
	1-			
	2-			
	3-			
	4-			
	5-			
	6-			
	7-			
	8-			
	9-			
	10-			
	11-			
	12-			
	13-			
	14-			
15-				
Lab Tests and Services (specify)	Laboratory Name	Number of Tests		



Travel	Destinations	Transport Mode	Number of People Travelling	Number of trips	
	1-				
	2-				
	3-				
	4-				
Books, Copy and Print	Specify:				
Communication (phone, web etc)	Specify:				
Other Expenditures	1-				
	2-				
	3-				
	4-				
	5-				
	6-				
	7-				
Grand Total:					

Important Note: For year 2014

- The maximum funding which may be assigned to **M.Sc.** theses is **25,000,000 Rials**.
- The maximum funding which may be assigned to **PhD** theses is **75,000,000 Rials**.
- The maximum funding which may be assigned to **Undergraduate** theses is **15,000,000 Rials**.

14- Are you going to receive any financial assistance/budget from other sources for this research? (if yes, specify from where and how much)



**Project Manager(s)
Affirmation:**

Full Name:

Signature

Date

1-

2-

3-