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| **Application for admission: Scientific Writing module (HMS772/873)**  **Due Date:** NO LATER than 2 weeks before the Module Date. **MODULE DATE:** \_\_\_\_\_\_\_\_\_\_\_  ***(Please note that this is only an application for admission form NOT a module registration form)***  Please submit electronically to Mrs Kathy Pieterse ([kathy.pieterse@up.ac.za](mailto:kathy.pieterse@up.ac.za)) and “cc” Mr Lesiba Mpati ([lesiba.mpati@up.ac.za](mailto:lesiba.mpati@up.ac.za)) and “cc” Module Coordinator  **NB: You will only be allowed to attend the module once this form is signed/approved by your supervisor** | | | | |
| Name and Surname |  | | | |
| Degree/Diploma registered |  | | | |
| Year first registered for Diploma/Degree |  | | | |
| Student number |  | | | |
| E-mail address |  | | | |
| Title of your draft research report/dissertation/thesis |  | | | |
| Name of target journal (and impact factor) for manuscript submission |  | | | |
|  | | | | |
| **The following section needs to be completed together with your clinical/research supervisor:** | | | | |
| Name of supervisor |  | | | |
| Email |  | | | |
| Programme / Track |  | | | |
| Type of research method(s) | Quantitative | Qualitative | Mixed | Other (Literature Review, HRA, etc.) |
| Stage of research | Data analysis | Draft report ready | Research completed | |
| **The student has progressed with the research and advised to attend the module;**   1. The student applying to attend the Scientific Writing module does so with **my approval**, and **I** **shall available** for the duration of the module to discuss modifications. 2. The student will submit a draft manuscript during the first online session. 3. The student will bring a hard copy of the **draft journal article/research report** and **instructions to authors** upon attendance.   **N.B. Students who have NOT completed data collection will not be allowed to attend the class.**  Signature: ­­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Supervisor** Date  Signature: ­­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Student** Date | | | | |