## MACQUARIE UNIVERSITY CANCER BIOBANK

Faculty of Medicine, Health and Human Sciences



## **Research Proposal Form**

DETAILS OF REQUESTING RESEARCHER			
Name:	Email:		
Supervisor Name:	Supervisor Email:		
Institution			
Faculty/Department:			
Project Title:			
Date of Application:			
HREC approval YES PENDING			
PROJECT DETAILS Brief background and rationale:			
Project Hypotheses:			
Project Aims:			
Methodology, study design and statistical considerations:			

## MACQUARIE UNIVERSITY CANCER BIOBANK

Faculty of Medicine and Health Sciences



Provide details of funding relevant to t	this project (Funding source, CIs, Years, \$)			
Provide details of IBC and ethics appro	ovals/applications relevant to this project includ	ling approval r	numbers:	
Types and quantity of samples require	ed (e.g. 2ml serum/GBM patient pre-surgery X 5	5 patients):		
Proposed commencement date:	Propo	osed completio	n date:	
Please attach a brief curriculum v	vitae of the CI with the application			
I acknowledge that, if approved this research will be conducted in accordance with Macquarie University's Code for the Responsible Conduct of Research ( <a href="https://www.mq.edu.au/research/ethics-integrity-and-policies/research-integrity">https://www.mq.edu.au/research/ethics-integrity-and-policies/research-integrity</a> ).				
The contribution of the Macquarie Unicommunications arising from this rese	iversity Cancer Biobank and its staff will be appearch.	ropriately reco	gnized in any grant applications, public	ations or other
Once published, data from the project	will be made available for deposition and future	e use at Macqu	arie University.	
Signature				
Name		Date:		
Supervisor Signature				
Supervisor Name		Date:		