

MEDICAL STUDENT RESEARCH SCHEDULE AND PROPOSAL FORM

Student Instructions:

1. Students are required to perform 16 weeks of research. This form must be submitted to the research office **4 weeks prior to start of research dates. The 16 week research cannot be used as a research elective.**
2. This form must be submitted to the Medical Student Research Office at least 4 weeks prior to the start of the elective (MedStudentResearch@case.edu).

SECTION I: Background Information

Student Name: _____ Graduation Year: _____

Research location: _____

Research Mentor name and signature: _____

Research Mentor's phone: _____ email: _____

Class of 2020 required research block dates:

Please check two – 8 week blocks:

(longitudinal curriculum students select your 1st 8 weeks and please see below)

- a) 02/26/18- 04/27/18 b) 04/30/18-06/22/18
 c) 07/09/18-08/31/18 d) 09/03/18-10/26/18
 e) 10/29/18-12/21/18 f) 01/07/19-03/01/19
 g) 03/04/19-05/03/19 h) 05/06/19-06/28/19

Longitudinal Core Curriculum Students Only

Please fill in your second 8 weeks of your research schedule below.

Dates	# weeks	MSRO Approval

Society Dean's Name _____

Society Dean's Signature (verify research block dates): _____

Date _____

SECTION II

- A. If your project involves human subject research, you will need to have active IRB approval and be listed as a Key Personnel in the project.
- B. Please provide the IRB approval number: _____
- C. I certify that I will be a registered Key Personnel by the start date of my project.

Student's Initial: _____

SECTION III

D. Time-Line, Deliverables and Competencies:

- Organize your specific goals and “deliverables” into a time-line that corresponds to the intervals of time that you will receive research elective credit as indicated in the table on page 1. (eg, Interval 1 Research phase - research and compile the reference list, read background literature, complete interviews of study subjects)
- For example, if you propose 16 weeks of research broken into two eight-week blocks, list specific goals and expected deliverables for each of these three time intervals.

SECTION IV: Research Plan

- A. Research Description: In the space below, describe your project's (1) Research question; (2) Hypothesis; (3) Study Design (including basic approaches for statistical analysis).

Research Plan continued (please use more space than provided if needed):

SECTION V: Responsible Research Supervisor Attestation (Section for Research Mentor)

My signature verifies that as a Research Mentor:

1. I will support all of the plans in the student's proposal.
2. I will have reviewed and agreed with the student's goals/deliverables and timeline described in section IIID above.
3. I will meet with the student on a regular basis to review student's goals/deliverables and timeline.
4. I will provide constructive feedback to the student at the midpoint of their research block.
5. I will submit an evaluation of the student's performance at the end of each 8 week block of research (Mentor Evaluation of Medical Student Research Form)

Research Mentor's Name _____

Research Mentor's Signature _____

Date _____

MSRO Approval _____

Date _____