



Project Number: _____
(office use only)

Please submit your form electronically to QCU – Research Office, Wagga Wagga Campus Email: gcu@csu.edu.au

Name:

Student/Staff Number:

Address:

E-mail:

Phone:

Division/School & Campus Location:

Principal Supervisor's Name:

Principal Supervisor's Email

Where did you hear about the QCU?:

I have had an initial consultation regarding this project **Yes / No** (Consultation Number, if known: _____)

My project likely requires skills in: *Double click on square and select Default Value "checked" to insert "X" in boxes*

- Mathematics / Modelling
- Statistical Analysis
- Information Technology Support

The phase of my project:

- Beginning
- Intermediate
- Advanced

My current level of study:

- | | |
|------------------------------------|-----------------------------------|
| <input type="checkbox"/> Bachelors | <input type="checkbox"/> Honours |
| <input type="checkbox"/> Masters | <input type="checkbox"/> Doctoral |
| <input type="checkbox"/> Staff | <input type="checkbox"/> Other: |

Services provided:

- (a) **FREE Initial Consultation**
- (b) **Research Collaboration** in which QCU academic associates work with researchers and students as an integral part of the research / supervisory team and share in the academic outputs of the research project.
- (c) **Research Consultancy** in which QCU academic associates work with clients on a paid consultancy basis.

I am applying for:

- FREE Initial Consultation
- Research Collaboration
- Research Consultancy

The QCU encourages researchers and students to seek quantitative advice in the early planning phase of their project.

The QCU also encourages academic research supervisors to remain closely engaged in all consultancies and collaboration work associated with their research students and associated projects.

Summary of Research Project: *Please provide a brief description of your research*

Description of Quantitative Assistance Being Sought: such as, a statement of research question/s & connection between data & subsequent data analysis; specifically, what assistance do you require from us?

X

Applicant

Student/ Staff - Please email this form to your supervisor for approval

Date:

All research students need the signature of their principal supervisor.

X

Applicant

Supervisor approval ready to SUBMIT TO QCU
[Email QCU](#)

Date:

In developing your research proposal you need to explicitly consider the **Ethical Implications** of various aspects of the research you propose to conduct. If your proposed course of research raises ethical issues **then you need to obtain formal ethical clearance before undertaking your research.** You need to ensure you have allowed provision for the QCU to handle and view you data ensuring your data security is within your research ethics approval guidelines.

Signed by Applicant: _____ - **MUST BE SIGNED by Applicant**

OFFICE USE ONLY

Recommended Consultant:

Accept Decline

Expected number of hours:

Expected Completion Date:

Signature of Consultant:

Date:.....