



SUPPLEMENTARY FORM FOR RESEARCH PREPARATION / RESEARCH METHODS APPLICANTS

(This form is not to be used by International students)

1. MACQUARIE STUDENT IDENTIFICATION NUMBER

Have you ever been enrolled at Macquarie University before ?

Yes

No

Your student identification number? (if known)

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2. PERSONAL DETAILS

Title: _____ Family Name: _____ Other Names: _____

3. COURSE DETAILS

a. Course name in full

Course Code on Schedule of Coursework courses
e.g. PC-RESMET(ED)

Program structure code e.g. SPED20P

on Coursework booklets or
http://www.reg.mq.edu.au/Sections/Publications/Homepage/pgrad_courses.htm

4. YOUR PROPOSED AREA OF STUDY

Name of Macquarie academic/s staff consulted:

5. PROPOSED POSTGRADUATE UNIT(S) TO BE UNDERTAKEN AT MACQUARIE

Unit Code	Unit Name	Attendance Int = Internal Ext = External	Duration 1 = 1 st Half Year 2 = 2 nd Half Year 3 = Full Year	Head of Department Use Only	
				Recommended Yes/No	Signature
(e.g.) SPED801	Key Research Issues and Methods in Special Education	Int	2		

Name of Research supervisor:

Signature of Research supervisor:

**Please return completed form to Coursework Studies – PG, Level 3 Lincoln Building
Macquarie University, NSW 2109 Australia. Tel: 61-2-98507111, Fax: 61-2-98507340**