

# Bachelor of Medical Science with Honours

The Bachelor of Medical Science (Honours) is a separate program offered on campus only, over one year of full-time study within the Joint Medical Program (JMP).

## **MEDI400 Medical Science Honours** **48 Credit point year-long unit**

The Honours degree provides students with training in research methods through the process of completing and communicating about a student negotiated research project.

Students wishing to apply for this degree must have passed units totalling at least 144 cp in the Bachelor of Medicine. Applications must be on the attached form and approved by the Head of School and Honours Coordinator prior to seeking admission.

Once approved, the Bachelor of Medical Science with Honours application form is required as supporting documentation for seeking admission via UNE's direct admission application process.

Please note that students who are intending to undertake a BMedSci (Hons) at the completion of Year 3 of the JMP Bachelor of Medicine will still be allocated a placement in the JMP Bachelor of Medicine for 2018 and 2019 and will have to apply/indicate preferences for Year 4 and Year 5 placement at the same time as the rest of the Year 3 2017 cohort (usually around June/July). In the event the BMedSci (Hons) does not progress, students will undertake their allocated placement in 2018/2019. If the BMedSci (Hons) does progress, students will undertake their allocated placement in 2019/2020.

Students who are intending on undertaking a BMedSci (Hons) at the completion of Year 4 of the JMP will have already been allocated a Year 5 placement for the Bachelor of Medicine and will retain that allocation for the ensuing year.

### **PART A – Proposed project details** **(to be completed by the applicant)**

Students are required to nominate the research project they wish to pursue and obtain written approval from their proposed supervisor(s). Students are required to be on campus for the most part of MEDI 400. Off campus placement is only for research/data collection at an off-campus site and will require approval of the Head of School Research.

### **PART B – To be completed by the Principal Supervisor(s)**

The nominated supervisor(s) is required to complete the declaration as part of the admission approval process. The Principal Supervisor must be a School of Rural Medicine staff member.

### **Project Approval – Office Use Only**

The proposed project needs to be approved by the Head of School. Depending upon the nature of the research project, ethics approval may also be required. It is the responsibility of the student and supervisors' to obtain the necessary ethics approval.

### **Lodging your application for approval prior to seeking admission to the degree**

All applications on the Bachelor of Medicine (Honours) Application Form should be submitted to the Head of School and Honours Coordinator by **1st August** for approval and then included as evidence in your application for direct admission via University of New England Student Administration online Admission process.

Applications for admission to the Bachelor of Medical Science (Honours) **MUST be made BEFORE 30th September** by direct admission:

[www.une.edu.au/for/current-students/course-information/bach-hons-info.php](http://www.une.edu.au/for/current-students/course-information/bach-hons-info.php)



# Application Form

## Bachelor of Medical Science with Honours

Proposed Bachelor of Medical Science with Honours Project Details.

Please read the attached coversheet before completing this application.

### PART A – PROPOSED PROJECT DETAILS (TO BE COMPLETED BY THE APPLICANT)

Student Name:

Student Number:

#### School Supervisor/s Details

Name:

Email:

Telephone:

Name:

Email:

Telephone:

#### External Supervisor/s Details

Name:

Organisation:

Email:

Telephone:

Name:

Organisation:

Email:

Telephone:

#### Project Title

#### Project Outline

In the space provided, or on a separate sheet if necessary, give a brief summary of the aims, hypothesis, method, likely significance of the project and principal location of the project. For additional details you can attach a short document (no more than 2 pages).

Aims:

**Hypothesis:**

**Methods:**

**Significance:**

**Principal Location:**

**Candidates Signature**

**Signed:**

**Date:**

## PART B – TO BE COMPLETED BY THE PRINCIPAL OR SUPERVISOR

### Declaration

I agree to supervise \_\_\_\_\_ to undertake the Bachelor of Medical Science with Honours project as outlined in Part A.

I agree to provide the necessary resources for the student to be able to undertake the project.

Ethics clearance for the project has \_\_\_\_\_ /has not \_\_\_\_\_ been obtained.

If ethics clearance has not been obtained, please indicate when you expect this to occur

I undertake to ensure that the candidate is adequately instructed in all aspects of field research/laboratory safety which are relevant to the project, and, if applicable, that appropriate vaccinations are obtained by the candidate.

I will \_\_\_\_\_, will not \_\_\_\_\_, be absent for a prolonged period during the course of the project or thesis preparation period.

If a prolonged absence will occur please provide the name and contact details of an alternate supervisor for this period:

**Name:**

**Email:**

**Telephone:**

**Note:** It is the responsibility of the principal supervisor to ensure that the alternate supervisor is adequately informed as to the nature and progress of the project.

### Please Note

Supervisors are required to agree to the conditions set out in the declaration as the Bachelor of Medical Science with Honours is a training degree in Science and/or research. That is, it comprises a considerable time commitment by supervisors to the training of students in the scientific/research method, in the skills appropriate to their discipline, and in the verbal and written communication of scientific/research results.

### Principal / Supervisor Signature

**Name:**

**Signature:**

**Date:**

**Name:**

**Signature:**

**Date:**

### Project Approval (Office Use Only)

#### Honours Coordinator

**Approved:** Yes    No

**Name:**

**Signature:**

**Date:**

#### Deputy Head of School (Research)

**Approved:** Yes    No

**Name:**

**Signature:**

**Date:**