

National Cancer Institute – Cairo University

Postgraduate Protocol

1. Proposed Study title:	
2. Candidate Name:	
3. Date of registration:	
4. Registration Degree:	MSc <input type="checkbox"/> MD <input type="checkbox"/>
• Occupation	
• Emailing address :	
• Phone Number:	
• Signature:	
5. Supervisors Contact Information:	
Main Supervisor (1)	
• Department Name:	
• Faculty/ University:	
• Phone Number:	
• Email Address:	
• Signature:	
Other Supervisor (2):	
• Department Name:	
• Faculty/ University:	
• Phone Number:	
• Email Address:	
• Signature:	
Other Supervisor (3):	
• Department Name:	
• Faculty/ University:	
• Phone Number:	
• Email Address:	
• Signature:	
• Other Supervisor (4):	
• Department Name:	
• Faculty/ University:	
• Phone Number:	
• Email Address:	
• Signature:	

6- Background :

7- Objectives:

A) Primary Objective:

B) Secondary Objective

The level of compatibility between the research proposal and the department's research goals.:

The level of compatibility between the research proposal and the NCI 's research Plan .

8- Rationale of the study:

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9- Study Design:

10- Study Methodology:

a) Population of study & disease Condition:

b) Inclusion criteria:

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c) Exclusion criteria:

d) Interventions (in details):

11- Possible Risk and Adverse events:

12- Outcome of study

A) Primary outcome parameter (maximum two)

B) Secondary outcome parameters:

13- Sample size estimation:

14- Statistical analysis of data:

15- Source of funding:

16- Ethical committee approval:

17- Cooperation with other departments:

• Department Name:	
• Faculty/ University:	
• Phone Number:	
• Email Address:	
• Signature:	

18- Reference and List of Correlative Studies:

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	1. عنوان البحث:
	2. اسم الطالب:
	3. الدرجة:
<p>أ.د. / الدرجة: القسم: الكلية / الجامعة : التوقيع:</p> <p>أ.د. / الدرجة: القسم: الكلية / الجامعة : التوقيع:</p> <p>أ.د. / الدرجة: القسم: الكلية / الجامعة : التوقيع:</p> <p>أ.د. / الدرجة: القسم: الكلية / الجامعة : التوقيع:</p>	4. أسماء المشرفين:

الملخص باللغة العربية: