**Project 2 Proposal**

Trainees are required to submit a Proposal for Project 2 at any time before the end of 4th year of training or before the end of the Phase 2 in the 2022 Training Program (2022 TP) and submit the completed Project for approval no later than the 54th month of training or by end of Phase 3 of training in the 2022 TP.

Please refer to the Project 2 Assessment Instructions on the [College website](https://www.ranzcr.com/trainees/clinical-radiology/assessment) for further information on this assessment and its submission requirements. The College will manage your personal information in accordance with its [Privacy Policy](https://www.ranzcr.com/documents/747-ranzcr-privacy-policy/file).

Please complete all required sections of this Proposal form. Directors of Training are to review and approve the proposal by signing and dating the bottom of the form. Please send the completed Proposal Form to [CRtraining@ranzcr.edu.au](mailto:CRtraining@ranzcr.edu.au) for review and approval.

**Trainee, Site and Assessor Information:**

Please ensure that all information entered below is accurate and reflective of your current circumstances e.g., current training site, network etc.

1. **Trainee Information:**

RANZCR Member ID:   
Full Name:   
Email Address:

1. **Site Information:**

Training Site:Training Network:  
State:  
Country:

**Directions to complete the Assessment:**

Please refer to the guidelines associated with each question below. Please also refer to the Project 1 Assessment Instructions located for more detailed directions.

1. **Project Title:**
2. **Collaboration**If this is a collaborative project, please provide a list of contributing authors (e.g., Surname, First name, Surname, First name etc).   
     
     
   If this is a collaborative project, please provide details of your contribution to the project.
3. **Project Timeline**

Start Date of Project:

Expected Completion Date of Project:

Expected Submission Date of Project:

1. **Is Ethics Approval Sought for this Project?**YesNo
2. **Name of Supervisor (must be a radiologist):**

Full Name:

Position:

Signature:

1. **Rationale for Project**Word Limit: 200 words
2. **Aims and Objectives** –Word Limit: 200 words

Aims must include a short statement identifying the general objectives (goal being pursued by the research) as well as the specific objectives (operational) of the project.

For example:

* Specific types of knowledge to be produced
* Target audience to be reached.

1. **Project Plan** –Word Limit: 300 words  
   The project plan should include:

* The proposed methodology to show how specific objectives will be achieved
* The sequence of procedures
* Data collection proposed
* Data analysis proposed
* Ethical considerations as required.

1. **Please provide a reference list of relevant literature in Vancouver Style (Min 3, Max 10).**

**2)**

**1)**

**4)**

**5)**

**3)**

**6)**

**7)**

**8)**

**9)**

**10)**

1. **Trainee Confirmation**

Signature:

Date:

1. **Director of Training Confirmation**

I approve this Project 2 Proposal.

Full Name:

Signature:

Date:

**Submission Instructions**

It is the responsibility of the trainee to arrange for a Director of Training to review and sign the Proposal Form and submit the completed form to [CRtraining@razcr.edu.au](mailto:CRtraining@razcr.edu.au) for review and approval. Incorrect or missing information will result in the Proposal Form being returned to the Trainee for review and resubmission. The College takes no responsibility for any delays in processing a proposal if it is not completed correctly.

Trainees will receive a notification of acknowledgement of receipt of a completed Proposal Form.  
  
Once the Proposal Form has been determined to be complete, the remainder of the Project 2 Proposal process will take approximately 30 business days. A notification will be provided to trainees following the approval of the proposal.