**TRUST FUNDS PROJECT SUPERVISOR FORM**

**2019-20**

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| **STUDENT’S DETAILS** | | |
| **Name of Student:** | Click or tap here to enter text. | |
| **Student ID Number:** | Click or tap here to enter text. | |
| **MSc Course:** | Click or tap here to enter text. | |
| **Title of Proposed MSc Project:** | Click or tap here to enter text. | |
| **Name of Supervisor:** | Click or tap here to enter text. | |
| **SECTION TO BE COMPLETED BY PROJECT SUPERVISOR** | | |
| Please state below how this project will benefit both the School and the student (in approx. 30 words). | | |
| Click or tap here to enter text. | | |
| **Signature of Supervisor:** | | **Date:** |
|  | | Click or tap to enter a date. |
| Typed signatures will not be accepted. Please sign by hand or use an electronic signature. | | |