# DClinPsy logo - transparent background

# 2014 cohort

# SRP feedback form

The purpose of this form is to record feedback received on your SRP proposal and any amendments you will make to your proposal in response to the feedback. Note that the proposed title of the SRP will be approved by the Exam Board but this approval does not cover more detailed aspects of the proposal such as methodology, logistics and ethics.

**Necessary changes/actions:** These suggestions must be taken forward in order for the project to be viable.

Trainee name

Title of proposed SRP

Research supervisor

Field supervisor’s name and contact details

**Further considerations:** These recommendations are optional and should be discussed with your academic supervisor.

**Comments on SRP content area**

|  |  |
| --- | --- |
| Necessary changes/action: |  Further considerations: |
|  |  |

**Comments on SRP methodology**

|  |  |
| --- | --- |
| Necessary changes/action: |  Further considerations: |
|  |  |

**Comments on analysis**

|  |  |
| --- | --- |
| Necessary changes/action:  |  Further considerations: |
|  |  |

**Comments on practical and ethical issues**

|  |  |
| --- | --- |
| Necessary changes/action: |  Further considerations: |
|  |  |
|  |  |