# DClinPsy logo - transparent background

# SRP feedback form (2015 cohort)

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.

Please return the completed form to the Research Co-ordinator by email.

Trainee name

Title of proposed SRP

Research supervisor

Field supervisor’s name and contact details

Add as many additional feedback points as necessary.

**Feedback point 1:**

**Response/amendments:**

**Feedback point 2:**

**Response/amendments:**