

BCS HIGHER EDUCATION QUALIFICATIONS PROJECT PROPOSAL

Candidate Name:

Membership No:

Course Provider:
(if applicable)

Project Level: (Tick as appropriate)	Diploma <input style="width: 20px; height: 15px;" type="checkbox"/>	Professional Graduate Diploma <input style="width: 20px; height: 15px;" type="checkbox"/>
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Project Title:

Proposal Submission Date:

Authenticator: (Tick as appropriate)	BCS Professional Member (i.e. MBCS/FBCS) (CV not required) <input style="width: 20px; height: 15px;" type="checkbox"/>
	Authenticator's Membership No.:
	IT Professional (e.g. Manager, Supervisor or Tutor) with a minimum of 5 years relevant work experience. <input style="width: 20px; height: 15px;" type="checkbox"/>
	CV enclosed (mandatory) <input style="width: 20px; height: 15px;" type="checkbox"/>

Planned Project Submission date:	October 2009 <input style="width: 20px; height: 15px;" type="checkbox"/>	April 2010 <input style="width: 20px; height: 15px;" type="checkbox"/>
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NOTE: Please complete your proposal in the relevant section overleaf.

Proposal (approximately 500 words in length)

Examiners Comments (to be completed by the Examiner)			
Proposal Approved	<input type="checkbox"/>	Re-submit Proposal	<input type="checkbox"/>
Date completed:			