

Jeffrey Cheah School of Medicine and Health Sciences

PSYCHOLOGY HONOURS PROGRAM

- Please read the following information and it is recommended that you have made contact with the relevant Honours Coordinator and potential supervisors to discuss your potential honours program before completing and submitting this form to the Course Management Office (Psychology).
- Please note that only the Jeffrey Cheah School of Medicine and Health Sciences can make an offer
 of admission for the Honours program. Completion of this form and any recommendation/s made by
 the School does not constitute an offer for the Honours program.
- Offers are subject to the availability of adequate supervision and facilities.
- Closing date for submission of application: 1st December (annually), but applicants are encourage to apply early.
- For questions and more information, please contact
 - Choo May May, email choo.may.may@monash.edu

| APPLICANT DETAILS | | | |
|--|-----------------------|--|--|
| Title: Mr / Ms Name: | Student ID: | | |
| Personal E-mail: | | | |
| And also Monash email (for current Monash students): | | | |
| Telephone No:(Home) | (Mobile) | | |
| | OOUDOE DETAIL O | | |
| PREVIOUS OR CURRENT | COURSE DETAILS | | |
| Institution/University: | Campus (Monash only): | | |
| Course title: | Course code: | | |
| Have you completed your undergraduate degree and APAC/APS accredited Psychology major? | | | |
| ☐ Yes ☐ No (Month and | year completing): | | |
| Current Monash students (those completing 3 rd year) You are NOT required to forward your academic transcript(s). | | | |
| For Non-Monash applicants Please forward to the Course Management Office (Psychology), a <u>certified copy</u> of your complete academic transcript(s) (giving both marks and grades), and where appropriate, evidence of your undergraduate degree. Academic records will not be returned. | | | |
| If you are currently undertaking undergraduate studies in psychology, include your results from first year up to the first semester of third year. Kindly complete <u>Results Permission Form A</u> (to be returned together with this application form for permission to obtain your second semester results when they become available) and <u>Results Permission Form B</u> (to be given to your home university, giving them permission to release your results to us for selection purposes). | | | |
| You must also submit the Sunway http://www.monash.edu.my/advancement/pso/admissionecessary supporting documents with this application. | | | |

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| HONOURS PROGRAM SELECTION | | | | | |
|--|--|---|--|--|--|
| Program: | ☐ BPsychScB(Psy)(Hons) Course code: 3954 | ☐ BA (Hons) Course code: 3936 | | | |
| Study mode: | □ On-campus Full-time | ☐ On-campus Part-time (only for Malaysians) | | | |
| RESEARCH SUPERVISORS | | | | | |
| Please list your pref | erred research supervisor according | g to order of preference: | | | |
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| 2 | | 5 | | | |
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| Please list your pref | erred research area according to or | der of preference: | | | |
| Clinica | al & Counseling Psychology | Health Psychology | | | |
| Cognit | tive Psychology | Neuropsychology | | | |
| Develo | opmental Psychology | Social Psychology | | | |
| Educa | tional Psychology | Organizational Psychology | | | |
| | DE051D0 | U TODIO | | | |
| | RESEARC | н торіс | | | |
| Please list your initial ideas for preferred topics. e.g., autobiographical memory, substance abuse gambling, autism, etc. This area is for you to elaborate in more detail on the ideas and topics you find most interesting. Please think about and then list 3 to 6 possible topic ideas. | | | | | |
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| APPLICANT'S DECLARATION | | | | |
|--|-------------------------------------|---------------|-------|--|
| ☐ I certify that all the statements in this application and documents submitted are true and complete to the best of my knowledge. I understand that a false or incomplete answer may be grounds for not considering me or a reversal of any decisions made. | | | | |
| ☐ I have consulted the Honours Coordinator (or nominated representative) in regards to the proposed Honours program. | | | | |
| Student Acknowledgement, Agreement and Consent I have read the University's statement on privacy and the purposes for which my personal information will be used. I agree to be bound by the statutes, regulations and policies of the University as amended from time to time and agree to pay all fees, levies and charges directly arising from my enrolment. I consent to receiving electronically, information and business documents relating to my enrolment from the University and from University owned companies that provide support services to students on behalf of the University. I agree to access the correspondence of my University email account on a regular basis. | | | | |
| Applicant's Signa | ture: Da | ate: | | |
| - | OLIOOL (DEDARTMENT ALITHODICATION (| | | |
| SCHOOL/DEPARTMENT AUTHORISATION (For office use) List of enrolled/completed third year APAC/APS accredited Psychology units that could be included in the average calculation. | | | | |
| Unit code | Unit title | Credit points | Marks | |
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| Average mark achieved by applicant in third year units: | | | | |
| Assessment of Eligibility: | | | | |
| □ Offer □ Rejected | | | | |
| Comments: | | | | |
| | | | | |

Name: ______ Date: ______

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Honours Coordinator (or nominated representative)



RESULTS PERMISSION FORM A (NOT APPLICABLE FOR MONASH STUDENTS) – return with application form

| Institution/University: | Student ID number: | | |
|--|---|--|--|
| Surname: | Given name(s): | | |
| 3 rd year coordinator or adminis | trative officer details: | | |
| Name | : | | |
| Fax number | : | | |
| Email | : | | |
| I agree to my Home University for purposes of this application | releasing to you details of my academic record, including results obtained, . | | |
| Signature: | Date: | | |
| Please note: This form only needs to be filled out if you are finishing your 3 rd year in psychology at an institution other than Monash University this year, and are therefore unable to forward us a complete academic transcript at this stage. | | | |
| | on is collected for the primary purpose of selection of students for the Other purposes of collection include the assignment of research supervisor | | |

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RESULTS PERMISSION FORM B (NOT APPLICABLE FOR MONASH STUDENTS) – return to home university

| (name), give permission for my final results leased, upon request, to the Psychology Honours coordinator of the Jeffrey Cheah School of Me and Health Sciences, Monash University Sunway campus, for the purpose of Honours program select | |
|--|-------|
| | |
| Signature: | Date: |

Please submit this form to your Home University psychology administrative officer to note of any future contact from Monash.

Note: This form only needs to be filled out if you are finishing your 3rd year in psychology at an institution other than Monash University this year, and are therefore unable to forward us a complete academic transcript at this stage.

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