

# PROJECT ETHICAL APPROVAL APPLICATION FORM

#### **Section A**

Project Title				
Project No. (if applica	able)			
Project Start Date (if	applicable)			
Principal Investigator (PI): (in case of student project,	Student Name			
the project supervisor and student details should be recorded)	i acuity manitumon			
	Staff Email	Staff Ext		
Project Type		Details (Please Specify)		

Project Type	Details (Please Specify)
Staff (External Funding)	
Staff (Internal Funding)	
Staff (No funds are required)	
Student (specify: Undergraduate, Masters, PhD)	
External Applicant (specify: Undergraduate, Masters, PhD, Other)	

#### **Section B**

**Project Summary** (Short description of the nature of the project and the methodology to be used). *No more than 150 words* 

#### **Section C**

Provide information of any possible ethical issues in this project. Otherwise, type "No ethical related issues" and go to section F

### **Section D**

Provide details of how participants will provide consent for their involvement in this research.



#### Section E

Provide details of how the confidentiality of participant's will be maintained.

### Section F

### Attach the relevant documents:

- 1. Research proposal
- 2. Questionnaire to be used for Survey.
- 3. Participants Consent Form (*in case the project has ethical issues*) a formal template is attached below for modification if needed.
- 4. Ministry of Higher Education, Research and Innovation letter (only in the case of external applicant)

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Applicant Signature:

Date:



## **PARTICIPANTS CONSENT FORM\***

# Research Study/Project Title: Researcher Name:

This is to certify that the researcher of this above mentioned study/project, from (Type Institution Name), has informed me and I confirm on the following:

- 1. I voluntarily agree to participate in the research study.
- 2. I know the purpose of the study.
- 3. I am aware of the nature of my involvement and it has been fully explained to me.
- 4. I understand I have the right to withdraw at any time.
- 5. I understand that all information that I provided, will be treated in confidentially.
- 6. I FULLY UNDERSTAND THE ABOVE TERMS.

Participant Signature:	Date:	
Researcher Signature:	Date:	

\*NOTE: This consent form to be modified by the researcher according to the research needs.