

Genetic Research Ethics Approval Form

Project Information

Project Title

Principal Investigator(s)

Department/Institution

Contact Email

Study Overview

Research Objectives

Summary of Genetic Research

Methodology

Participants

Inclusion/Exclusion Criteria

Estimated Number of Participants

Recruitment Process

Sample Collection & Data

Type of Genetic Sample (e.g., saliva, blood)

Sample Collection Process

Data Storage & Security

Data Sharing/Outcomes

Ethical Considerations

Informed Consent Process

Privacy & Confidentiality Measures

Potential Risks and Benefits

Procedure for Returning Results to Participants

Additional Ethical Issues or Safeguards

Declarations

I/We declare that the information provided in this application is correct and complete to the best of my/our knowledge.

Date