Ethics Committee Waiver of Consent Application

1. Applicant Details **Principal Investigator Name** Institution/Department **Email Address Date** 2. Project Information **Project Title Project Summary** 3. Justification for Waiver of Consent Provide a detailed justification for requesting a waiver of consent, explaining why it is not practical or feasible to obtain individual consent. 4. Privacy and Confidentiality

Describe measures to maintain privacy and confidentiality of participants' data.							

Explain any potential risks to the participants and how these risks will be minimized.					
6. Additional Ir	nformation				

5. Risk Assessment