## **Public Health Research Ethics Application**

## 1. Applicant Information

Principal Investigator Name:	
Affiliation/Institution:	
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Email:	
Contact Number:	
2. Project Details	
Project Title:	
Co-Investigators (List):	
Project Duration (Start - End Date):	
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Funding Source (if any):	
3. Research Summary	
Background & Rationale:	

Objectives:
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Methodology:
Participant Criteria (Inclusion/Exclusion):
4. Ethical Considerations
4. Luncai Considerations
Potential Risks to Participants:
Potential Benefits:
Potential benefits.
Informed Consent Process:
Privacy & Confidentiality Measures:
Protection of Vulnerable Croups (if applicable):
Protection of Vulnerable Groups (if applicable):
5. Data Management
Type of Data Collected:

Data Storage & Security:
Miles Mail Harry Assess to Date.
Who Will Have Access to Data:
Plans for Data Sharing/Publications:
Fians for Data Sharing/Fublications.
6. Additional Information
o. Additional information
Has this protocol been reviewed elsewhere? If so, provide details:
Other Relevant Information: