Research Ethics Approval Form

Project Details

Project Title
Principal Investigator / Researcher Name
Department / Faculty
Contact Email
Contact Email
Project Summary
Brief Description of the Project
Participants
Describe the participants (age, number, source)
Recruitment process
Ethics Considerations
Potential risks to participants
How will consent be obtained?

Confidentiality and data protection measures

Other Information
Funding Sources (if any)
Proposed Start Date
Proposed End Date
I confirm that the information provided is accurate and complete.