## **Biomedical Research Ethics Application Form**

## 1. Project Information

Project Title
Principal Investigator
Institution/Organization
Co-Investigator(s)
Contact Email
Contact Email
Contact Phone Number
Project Start Date
Expected End Date
Expected Life Date
2. Dualingt Community
2. Project Summary
Provide a brief summary of the research project
3 Objectives & Hypothesis
3. Objectives & Hypothesis
Main Objectives

Hypothesis/Research Questions

4 Mothodology	
4. Methodology	
Describe the study design and methodology	
Study Site(s)	
5. Study Participants	
Number of Participants	
Inclusion Criteria	
Exclusion Criteria	
Recruitment Method	
6. Informed Consent	
Process for obtaining informed consent	

## 7. Data Management & Confidentiality

Describe how data will be collected, stored, and protected

Vho will have acces	ss to the data?
3. Potential	Risks & Benefits
Potential Risks to P	articipants
Potential Benefits to	Participants and/or Society
9. Fundina 8	& Conflicts of Interest
Funding Source(s)	
Declare any potentia	al conflicts of interest
10. Declarati	ons
declare that the info	ormation provided is accurate and complete. I understand my responsibilities regarding
Name	
Date	