

Remote/Online Study Ethics Approval Document

1. Study Information

| | |
|------------------------|--|
| Title of Study | |
| Principal Investigator | |
| Institution/Department | |
| Email | |
| Phone | |
| Co-Investigators | |
| Date of Submission | |

2. Study Overview

Objective

Brief Description

3. Participants

Selection Criteria

Recruitment Method

Number of Participants

4. Study Procedures

- 1.
- 2.

Remote/Online Tools Used

-
-

5. Data Handling

Data to Be Collected

Data Storage and Security

Data Retention Period

6. Ethical Considerations

- Informed Consent Process:
- Confidentiality Measures:
- Risks and Mitigation:
- Participant Right to Withdraw:

7. Attachments

- Informed Consent Form
- Participant Information Sheet
- Recruitment Materials
- Questionnaires/Surveys

8. Signatures

| Name | Role | Signature | Date |
|------|----------------------------|-----------|------|
| | Principal Investigator | | |
| | Department Head/Supervisor | | |
| | Ethics Committee | | |