

Nursing Research Ethical Approval Application Form

Applicant Details

Full Name

Email

Phone Number

Institution / Affiliation

Research Project Information

Project Title

Summary of the Project

Research Objectives

Methodology

Participants (Type and Number)

Ethical Considerations

Potential Risks

Potential Benefits

Informed Consent Process

Confidentiality Measures

Approval & Declarations

Supervisor Name (if applicable)

Date of Submission