APPLICATION FORM

RESEARCH ETHICS COMMITTEE – CARPHA

TITLE OF THE PROPOSED RESEARCH: …….

……..

DATE (and Version - if there has been a previous submission) ……..……..

NAME and CONTACT DETAILS (Address, Telephone and E-mail) of ALL the INVESTIGATORS, COLLABORATORS, AND/OR *SUPERVISORS* (starting with the principal investigator).

(Indicate which parts of the protocols each investigator will be responsible for, who will actually carry out if any procedure on participants, and where appropriate, what training they have had):

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SITE/S OF RESEARCH (Attention should be paid to the facilities available for participants' comfort, and availability of emergency procedures in the event of an unanticipated occurrence):

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NUMBERS OF RESEARCH PARTICIPANTS TO BE ENROLLED …….

PROPOSED DURATION OF THE STUDY ……

A SUMMARY OF THE PROPOSED STUDY — not more than 300 words and should include:

I. *The hypothesis and scientific basis or justification for the study*
II. *The usefulness and significance of the study*
III. *An outline of the study design*
IV. *An indication of steps taken to ensure and maintain confidentiality*
V. *An assessment of the benefits to participants (and/or groups in the community or the entire community) and the risks*

……..…….*(Signature)*
……..*(Date)*