**INSTITUTIONAL ETHICS REVIEW COMMITTEE (IERC) APPLICATION FORM**

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| **REQUIRED DOCUMENTATION FOR ALL PROJECTS****(Kindly submit a soft copy of your full project proposal along with this application to ierc@tenwekhosp.org with the appropriate application fee)** |

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| Date Submitted      | Title of Research Project      |
| Principal Investigator/Project Director      | Qualifications      | Email      |
| Projected Duration of Research       | Project Start Date      | Grant affiliation (if none, put “NA”). Attach project budget if applicable.      |
| Other organizations and/or agencies, if any involved in the study. Kindly attach any necessary approvals.      |

1. **Project Information:**
	1. Project Activity Status: [ ]  New Project [ ]  Review of Continuing Project [ ]  Revision to Prior Project

B. Does this project involve any patient information (such as chart review)? [ ]  Yes [ ]  No

C. Does this project involve any interventions or interactions with patients? [ ]  Yes [ ]  No

D. Is the project related to an academic program (diploma, degree, certificate, etc.)?

 [ ]  Yes. If yes, attach an approval letter [ ]  No

E. Total number of subjects to be studied

**II. Collaborators and their institutions** (kindly list all involved and attach any letters from the institution)

**III. Objectives** (2-3 sentences)

**IV. Rationale** (2-3 sentences)

**V. Research methodology – study design, methods, interventions, and program activities (**In 4-6 sentences, include a description of the study design, experimental methods, program activities, and any measures or observations. Describe the sample and population you will be studying and any relevant research methods)

**VI. Precautions** (What steps will be taken to ensure that each subject’s participation is voluntary and private?

What, if any, inducements/payments will be offered to the subjects for their participation?)

**VII. Confidentiality of data** (Describe the methods to be used to ensure confidentiality of data obtained, including plans for dissemination of the study, disposition, or destruction of data, etc.)

**VIII. Informed Consent** (Attach a copy of all consent forms to be signed by the subjects and/or any statements to be read to the subject. If no consent, explain reason.)

**IX. Dissemination of findings** (Detail the plans (or no plans if applicable) and budget to disseminate the findings to participants, general public, and scientific community.)

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| Principal Investigator Signature | Date |