**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 |