

RESEARCH ETHICS APPROVAL FORM

(For Scientists/Researchers/Students)

For Official Use
Only:
Date:

L--Reference no.---

Who Should Complete it?

This form should be completed to seek ethics approval for research projects to be undertaken by University of Management and Technology faculty, staff and students who will be conducting research affiliated with UMT. All sections of the form must be completed and submitted to the ORIC at least two weeks prior to the start of the research project.

Section 1:	DETAILS OF RESEARCHER/SCIENTIST/STUDENT			
Please tick one of the following:				
UMT Student Research Project				
UMT Faculty/Staff Research Project				
Other If other please specify:				
Name of The Researcher/Scientist/Student:				
Department/School:				
Email:	Mobile:			
Supervisor's Name:	Supervisor's Department:			
Project Start Date:	Project End Date:			
Collaborative Partners (If any):				
Project Location: -				

Section 2:	DETAILS OF RESEARCH ACTIVITY
Research Title:	
2- 3- 4-	
Research Methodology (research methodology (Experiment / Field Works / Observation etc.) Please provide a summary of your 100-150 words):
Any Predictable Risk of F	Research for Humans and Animals:
Any Predictable Risk of F	Research for Institutional and Public Property:
Section 3:	Research Participants and recruitment
Does the project involve	human participants?
YES No	
IF YES GO TO SECTION 4, OT	HERWISE GO TO SECTION 5.

Section 4:			
Summary of Informed Consents: (Please share Briefly About Number of Informed Consents and Attach Signed Documents Accordingly) (Please note this is a mandatory requirement).			
Section 5: Confidentiality:			
How the data will be stored? Please tick one of the fo	ollowing:		
Paper Version Electronic Version			
Please provide details of where the data will be store	d?		
How long the data will be retained? 5 years 10 years			
Section 6: Any other approval required?			
YES No			
IF YES PLEASE SPECIFY:			
Section 7: Has your project received scientific peer i			
Please provide data of peer review and attach scient mandatory requirement).	ific peer view report. (Please note this is a		

Section 8: Statement of Ethical Commitment:

pledge the commitment that all rules set by the ethical				
policy are followed in my research process. I also make a commitment to abide by ethical principles, moral				
values, law and instruction of the institutions. My research carries no bias for ethnicity, gender, regional				
aspects and is totally impartial and objective. I have taken informed consent from participants,				
participation; is on a voluntary basis and no force of any kind has been used to attract the participants.				

Signature of Researcher/Scientist/Student

Endorsed By	Reviewed by Manager ORIC	Approved By
Supervisor/Project Head (If Applicable)		Chairman Research Ethics & Support Committee (RESC)
Name:	Name:	Name:
Signature:	Signature:	Signature:
Stamp:	Stamp:	Stamp: