Ethical Clearance Review Form

Name of Applicant:					Student ID (if applicable):	<u>:</u>	
Title	of Research:						
No.	Checklist items		Tick the a	ppropriate box	Com	ments	
1.	Have all the relevant section		□Yes	\square No			
	completed by the researcher?						
2.	Is the research start date mentioned		□Yes	□No			
	on the application form?			_110			
	(Note: Research or data pro						
	should not start prior to Etl						
	Clearance application outcome)						
3.	Has the researcher clearly indicated		\square Yes	☐Yes ☐No			
	the research aims/objective	es and/or					
4.	research questions? In the case of students, has	tho					
4.	researcher received approv		∐Yes ∐No				
	their supervisor to proceed						
	Ethical Clearance Application						
5.	If the research has already received		□Yes				
	ethical clearance from ano	ther	□Yes	No			
	institution, have the releva	nt					
	information and evidence b	peen					
	provided?						
6.	Has the researcher identified the		□Yes	□No			
	target population for the st	udy?					
7	Are there any ethical issues you wish		□Yes	□No			
	to raise in relation to any p						
	benefits to the participants	in the					
0.0	research?						
8a.	Are there any ethical issues to raise in relation to any p	•	□Yes	□No			
	risks to the participants in						
	research?						
8b.	Has the researcher clarified	how	□Yes	□No			
	potential risks will be						
	addressed/mitigated?						
9	The following annexes bee		□Yes	□No			
	submitted with this applica						
	Informed Consent and/or A	Assent	□Yes	□No			
	Form(s)						
	Gatekeeper Consent Form(s)	□Yes	□No			
	Any other relevant certifica	ites	□Yes	□No			
	and/or approvals						

	Data Collection Tools (Questionnaire, Survey, Interview Schedule,	□Yes	□No				
	Observation Checklist etc.)						
	Other (Please specify):	□Yes	□No				
10	Are there any ethical issues that you wish to raise on the proposed research design and methodology?	□Yes	□No				
11	Does the application bear signs of academic malpractice (plagiarism, fabrication, falsification of data, etc)?	□Yes	□No				
12	Are there any additional comments you would wish to raise about the ethical dimensions of this research?	□Yes	□No				
13	Have you indicated your final decision on the Ethical Clearance Application on the Reviewer Decision Sheet?	□Yes	□No				
	Reviewer Decision on Ethical Clearance Application						
This Ethical Clearance Application has been reviewed based on the institutional guidelines in the ethical conduct of research.							
Th	The reviewer has reached the following decision:						
[Ti	ck one of the following boxes, where	appropri	ate]				
	Approved: This research may	proceed					
	\square Revisions Required : This research may proceed if the conditions below are						
	implemented.						
	\square Rejected : This research may not proceed (provide reasons and way forward						
	below).						
Re	asons (and conditions, where applica	able):					
Reviewed by: ************************* [Reviewer]							
Signature:							

[To be completed by Chairperson, Research Unit]

Signature:	Name:	
		Chairperson, Research Unit
Date:		