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| **Project Title** | | |  | | | | | | | | | | | | | | |
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| **Principal Researcher(s)** | | |  | | | | | | | | |  | | | | | |
| **Email Address** | | |  | | | | | | | | |  | | | | | |
| **Supervisor and Co-supervisor** | | |  | | | | | | | | |  | | | | | |
| **Department** | | |  | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | |
| **Nature of Project** | Honours/4th Year | | |  | Master’s  Mini-dissertation | | |  | Master’s  Full dissertation | | | | X | Doctoral |  | Departmental |  |
|  | | | | | | | | | | | | | | | | | |
| **Research involves** | | | Human Health | | |  | Animals | | |  | Human Health and Animals | | | |  | Data collection from people |  |
| Children (Non-therapeutic research) | |  | Children (Therapeutic research) | | |  | Other vulnerable persons | | |  | Special health and safety considerations | | | |  | Desktop, field work or laboratory research only |  |
| Environmental hazards/ pollution | |  | Interference with nature | | |  | Intellectual Property (IP) | | |  | Possible conflict of interests (researcher, funder or participants) | | | |  | Benefits from this research |  |
|  | | | | | | | | | | | | | | | | | |
| **Risk Classification** | | | Low Risk | | |  | Medium Risk | | |  | High Risk | | | |  | Other |  |
|  | | | | | | | | | | | | | | | | | |

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| **Documents submitted for ethical clearance consideration** | Project proposal | | X | Participant Informed Consent | |  |
| Survey Instrument/Questionnaire | |  | Translation (where appropriate) | |  |
| Translation (where appropriate) | |  | Guardian Informed Consent | |  |
| Open-ended question sheet | |  | Translation (where appropriate) | |  |
| Translation (where appropriate) | |  | Letter requesting access to sites/ information/ participants | |  |
| Observation sheet | |  | Letter granting access approval | |  |
| Research instrument permission | |  | Other documentation: | |  |
| Copyright permission | |  |  | |  |
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| **Faculty REC comments, e.g.:**   * Reasons for recommendation to the UZREC * Why/how the benefits outweigh the risks associated with the research * Special conditions to be attached to the approval | |  | | | | |
| **Faculty REC Chairperson’s Signature** | |  | | | **Date** | |
| **Print Name** | |  | | | | |