**Checklist for Submission of Research Ethics Approval Application to PAPRSB Institute of Health Sciences Research Ethics Committee (IHSREC)**

**Record of Submission**

|  |  |
| --- | --- |
| Name of Principal Investigator: |  |
| Research Grant (if applicable): |  |
| Faculty: |  |
| Programme: |  |
| Title of Project: |  |

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| --- | --- | --- | --- |
|  | **To be completed by Principal Investigator** | ✓ or pending or N/A | For office use only |
|  | **Printed proof of email** submission to [rec.ihs@ubd.edu.bn](mailto:rec.ihs@ubd.edu.bn). |  |  |
| The email must have been copied (CC-ed) to all researchers. |  |  |
|  | **UREC form (RE01)** |  |  |
| Complete list of researchers along with their role must be stated in the UREC. |  |  |
|  | **Full research proposal**,including: |  |  |
| Research proposal with introduction, aims/objectives, methods & materials, data analysis |  |  |
| Questionnaires and permission for use (if not self-designed) |  |  |
| Data collection form/data entry proforma (if applicable) |  |  |
| Gantt chart |  |  |
|  | **Participant consent form** in English, if applicable (use updated standard format) |  |  |
| Participant consent formin Malay, if applicable (use updated standard format) |  |  |
|  | **Participant information sheet** in English, if applicable (use updated standard format) |  |  |
| Participant information sheet in Malay, if applicable (use updated standard format) |  |  |
|  | Signed and dated **CV of all researchers**  (use updated standard format; not more than 2 pages) |  |  |
|  | **Permission/approval letter(s)** from relevant authorities and gatekeepers, if applicable. Please list: |  |  |
| A) |  |  |
| B) |  |  |
| C) |  |  |
|  | Submission of **Risk Assessment Forms**: |  |  |
| A) Evidence of verified **risk assessment**   * For staff, electronic copy of only last page (section C) of **RPRA**. * For student, electronic copy of only verification page of student **ABRA**. |  |  |
| B) IHSREC Risk and Sensitivity Assessment Form **(IRSA)** |  |  |
|  | For student project application, submit **supervisor approval form for the submission of ethics application of student project**. |  |  |
| **FOR OFFICE USE ONLY** | | |  |
| **UBD/PAPRSBIHSREC/2020/**  *Application received on (date & time):* | | |  |

**DO NOT SUBMIT THIS PAGE – THIS PAGE IS FOR YOUR INFORMATION ONLY**

Important Notes:

1. The checklist has to be **TYPED** and not handwritten.
2. The checklist has to be attached as the first page of your submission.
3. All electronic documents must have page numbers and should have table of contents.
4. All electronic documents must be submitted to [rec.ihs@ubd.edu.bn](mailto:rec.ihs@ubd.edu.bn) and must have been copied (CC-ed) to all researchers.
5. All documents sent electronically are to be submitted as hardcopies and must be submitted in a hardfile without any loose pages.
6. There should be 2 copies for IHSREC application OR 3 copies for joint IHSMHREC application. If you need data/facilities from Ministry of Health (MoH) or if you have MoH members as your co-researchers, then the application will be for joint IHSMHREC.
7. All hardcopies are to be submitted by hand in a file to Ms. Noriah, IHS Admin Office, who will check the application before accepting, on **Tuesday only (14:00-16:00)**.
8. Any last minute or post deadline submission will be reviewed only in the following Ethics applications review meeting.
9. Incomplete application forms will **NOT BE ACCEPTED** or tabled in the meeting.
10. For **participant information sheet** and **participant consent form**,please use updated standard format. Please check the IHS website for updated versions.
11. The **CV** must be in the updated standard format and should not be more than 2 pages.
12. Please refer to IHS website (http://ihs.ubd.edu.bn) for more information on ethics application.

***Updated on 8th August 2020***