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| **1** | **Section** (To be completed by the Office of ERC) | |
| 1.1 | Ethical Review Application No. |  |
| 1.2 | Type of Review | Expedite / Regular |
| 1.3 | Date received |  |
| 1.4 | Date of ERC meeting 1 |  |
| 1.5 | Date of ERC meeting 2 |  |
| 1.6 | Date of resubmission |  |
| 1.7 | Decision |  |

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| **2** | **Section: Checklist of Documents Provided with the Application** (To be completed by the Office of ERC and the Applicant) | | |
|  | Document Provided | To be marked by Applicant | To be marked by ERC |
| 2.1 | Application for ethical review of research proposal |  |  |
| 2.2 | Research proposal |  |  |
| 2.3.1 | Study instrument in English |  |  |
| 2.3.2 | Study instrument Sinhala translation (if relevant) |  |  |
| 2.3.3 | Study instrument Tamil translation (if relevant) |  |  |
| 2.4.1 | Invitation (Attachment – 1) and consent to participate in a research project (Attachment – 2) in English |  |  |
| 2.4.2 | Invitation (Attachment – 1) and consent to participate in a research project (Attachment – 2) Sinhala translation (if relevant) |  |  |
| 2.4.3 | Invitation (Attachment – 1) and consent to participate in a research project (Attachment – 2) Tamil translation (if relevant) |  |  |
| 2.5 | Review form of the application for ethical review of research proposal (MS Word and PDF formats) |  |  |
| 2.6 | Proof of payment for the ethical review (cash deposit to Account No. xxxx, Faculty of Agriculture, at People's Bank, Peradeniya Branch) |  |  |
| 2.7 | Any other documents (Specify) |  |  |

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| **3** | **Section: Research Project** (To be completed by the Applicant) | | | | | | |
| 3.1 | Title of the research project |  | | | | | |
| 3.2 | Proposed dates & Period | Start: | | | End: | | Period: |
| 3.3 | Nature of the study | | | | | | |
|  | Item | | Yes | No | | Specification | |
| 3.3.1 | Involve animals | |  |  | |  | |
| 3.3.2 | Involve humans | |  |  | |  | |
| 3.3.3 | Questionnaire only | |  |  | |  | |
| 3.3.4 | Questionnaire & sample collection | |  |  | |  | |
| 3.3.5 | Observation | |  |  | |  | |
| 3.3.6 | Other (specify) | |  |  | |  | |
| 3.4 | Will consent be sought if the participants are minors: Yes / No | | | | | | |
| 3.5 | Has the research proposal received a scholarly review: Yes/No  If received the details: | | | | | | |

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| **4** | **Section: Applicant and Principal Investigator** (To be completed by the Applicant) | |
| 4.1.1 | Name and the Affiliation of the Applicant |  |
| 4.1.2 | Email of the Applicant |  |
| 4.1.3 | Telephone No. of the Applicant |  |
| 4.2.1 | Name of the Principal Investigator |  |
| 4.2.2 | Email of the Principal Investigator |  |
| 4.2.3 | Telephone No. of the Principal Investigator |  |

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| **5** | **Co-investigators** (if any, to be completed by the Applicant) | | |
|  | Name | Affiliation | Signature |
| 5.1 |  |  |  |
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| **6** | **Section: Declaration** (To be completed by the Applicant) |
| I/We certify that the information given above is true and correct to the best of my knowledge. If there is change in the protocol or the research project, I/We shall inform the ECC. I/We also confirm that I/we have provided on the Review Form the relevant page numbers of the proposal on which each specified issue is addressed.  The Applicant: ………………………………….. …………………………….  Signature Date: ………………………..  The Principal Investigator(if different to the applicant):  ………………………………….. …………………………….  SignatureDate: ……………………….. | |