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| NEC LOGO  (no name) | **NATIONAL ETHICS COMMITTEE**  **STANDARD OPERATING PROCEDURES** | | |
| **APPLICATION FORM FOR ETHICS REVIEW OF FINAL REPORT** | NEC Form No. | 14 |
| SOP No. |  |
| Version No. | 1 |
| Version Date | 21 December 2015 |

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| 1. **General Information** | | | | |
| \*Title of Study |  | | | |
| Version number/date of the NEC approved protocol | |  | | |
| \*NEC Code  (To be provided by NEC) | |  | \*Study Site |  |
| \*Name of Researcher | |  | Contact Information | \*Tel No: |
| \*Mobile No: |
| \*Co-researcher/s (if any) | |  | Fax No: |
| \*Email: |
| \*Institution of researcher | |  | | |
| \*Address of Institution | |  | | |
| Effective period of ethical clearance | | From: To: | | |

|  |  |
| --- | --- |
| Final Report | |
| 1. Start of study | 1. End of study |
| 1. Number of enrolled participants | 1. Number of required participants |
| 1. Number of participants who withdrew |  |
| 1. Deviations from the approved protocol | 1. Issues/problems encountered |
| 1. Summary of findings: | |
| 1. Conclusions: | |
| 1. Actions for dissemination of study results: | |

**Signature of Researcher: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**