**ADMUREC Form 2 - Ethics Clearance Application Submission Checklist**

The UREO Secretariat checks whether the following requirements for research ethics clearance have been submitted by the applicant. Required documents must be complete for the review process to begin. Hard copies must have the relevant signatures. Submit all soft copies of documents as SEPARATE PDF FILES, each labeled with the appropriate file name.

The applicant is encouraged to proactively submit all relevant documents that would support his or her application. One copy of this form is given to the applicant, the other copy is kept by UREO.

* Application Form (one of the following, soft copy and hard copy w/ signatures):

1. For Ethics Clearance for Research with Human Participants (Expedited/Full)
2. For Validation of Exemption from Review
3. Research Protocol Amendment
4. Continuing Ethics Review and Clearance

* Research protocol: title, investigators and affiliations, research objectives, significance, brief literature review/conceptual framework, full methods (especially description of sample, recruitment, inclusion criteria; and procedures), ethical considerations pertinent to the study [for a & b]
* Participant recruitment materials/letters/scripts/templates [for a, b]
* Informed Consent Forms (ICF) and Assent Forms (if applicable) [for a, b]
* Funding/Grant/Sponsor letter or contract (if applicable)
* Permission letters from relevant collaborating offices or data collection areas [for a, b]
* Instruments, questionnaires, interview or FGD scripts and protocols [for a, b]
* 1-2 page CVs of Principal and Co-Investigator(s) [for a, b]
* For c) and d): all of the aforementioned materials that have been changed or amended since last approved submission

**Acknowledgment**

This is to acknowledge that the University Research Ethics Office has received the complete research ethics clearance application of:

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Protocol Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Printed Name & Signature of Receiving Printed Name & Signature of Applicant

UREO Staff