



Dear Researchers,

Good day!

Thank you for submitting your application for Research Ethics Clearance. Based on the INITIAL REVIEW, your paper entitled “_____

has been identified as _____.

As suggested by the Ethics Panel, please incorporate the following information as our basis for the recommendation of the Issuance of your Research Ethics Clearance;

In the Protocol/Proposal:

- ☐ 1. Anonymity/Confidentiality of the data
- ☐ 2. Plan on processing personal data, access, disposal and terms of use (Data privacy Act of 2012)
- ☐ 3. Measures to protect privacy of participants
- ☐ 4. Appropriate mechanisms/interventions in place to address the vulnerability issues
- ☐ 5. Measures to mitigate the risks
- ☐ 6. Disclosure of conflict of Interest

In the Informed Consent:

- ☐ 1. Purpose of the study
- ☐ 2. Expected duration of participation
- ☐ 3. Adequate process for ensuring that consent is voluntary
- ☐ 4. Procedures to be carried out
- ☐ 5. Mechanisms in cases of discomforts and risks
- ☐ 6. Benefits to the participants
- ☐ 7. Compensations/reimbursement of expenses
- ☐ 8. Withdrawal of participants from the study anytime without penalty
- ☐ 9. Duties and responsibilities of participants
- ☐ 10. Extent of confidentiality
- ☐ 11. Ensuring that the language used in the instrument can be understood by the respondents/participants
(Translate the instrument to the respondents/participants' languages.)
- ☐ 12. Contact person
- ☐ 13. Include REOC contact details

To facilitate the checking of the Panel's suggestions, you may highlight the required information in your Protocol or Informed Consent. Please submit to the REOC office _____ set/s of your revised copy placed in a long _____ expanded envelop. Once the suggestions are incorporated, it will be forwarded to the Ethics Panel for a second review. Upon compliance and recommendation of the Ethics Panel, your Research Ethics Clearance will be released on the scheduled date.

Thank you very much.

ANALYN D. SAAVEDRA, Ph. D.

WMSU REOC Chair

Recommended Actions:

☐ Pls. Incorporate required information

☐ For Payment at the University Cashier