Western Mindanao State University



Research Extension Services and External Linkage

**RESEARCH ETHICS OVERSIGHT COMMITTEE**

Zamboanga City, 7000, Philippines

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WMSU*-*REOC-FR-004.01

Effective Date: 05-Aug-2024

**STUDY PROTOCOL ASSESSMENT FORM**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Study Protocol Title\* |  | | | |
| WMSU REOC Code |  | Type of Review | ☐Expedited ☐Full | |
| Researcher\* |  | ERP | ☐Chair ☐Member | |
| Name of Adviser\* |  | Institution\* |  | |
| Name of Reviewer |  | Date Received |  | |
| **Guide questions for reviewing the proposal / protocol** | | | | **Page & Line Number\*** |
| Does the study have social value? ☐Unable to Assess ☐ Yes ☐No  Comment: (e.g. relevance to national /community needs) | | | |  |
| Is the study background adequate? ☐Unable to Assess ☐Yes ☐No  Comment: | | | |  |
| Are the research questions supported by the Review of Literature? ☐Unable to Assess ☐Yes ☐No  Comment: | | | |  |
| Are the study objectives Specific, Measurable, Attainable, Realistic, ☐Unable to Assess ☐Yes ☐No  Time-bound?  Comment: | | | |  |
| Does the research need to be carried out with human participants? ☐Unable to Assess ☐Yes ☐No  Comment: | | | |  |
| Is the research design appropriate?   * Is the population identified and defined? ☐Unable to Assess ☐Yes ☐No   Comment:   * Is the selection of study participants described? ☐Unable to Assess ☐Yes ☐No   WMSU*-*REOC-FR-004.01  Effective Date: 05-Aug-2024  Comment: | | | |  |
| * Is the sample size justified? ☐Unable to Assess ☐Yes ☐No   Comment:   * Is the plan for data analysis described? ☐Unable to Assess ☐Yes ☐No   Comment:   * Are there dummy tables? ☐Unable to Assess ☐Yes ☐No   Comment: | | | |  |
| Is the research tool appropriate for the study? ☐Unable to Assess ☐Yes ☐No  (survey questionnaire, interview questions)  Comment: | | | |  |
| Are there measures to protect privacy of participants ☐Unable to Assess ☐Yes ☐No  and confidentiality of data?  Comment: | | | |  |
| Does the study have a vulnerability issue? ☐Unable to Assess ☐Yes ☐No  Comment: | | | |  |
| Are appropriate mechanisms/interventions in place ☐Unable to Assess ☐Yes ☐No  to address the vulnerability issue/s?  Comment: | | | |  |
| Are there risks/ probable harms to the human participants in the study? ☐Unable to Assess ☐Yes ☐No  Comment: | | | |  |
| Are there measures to mitigate the risks? ☐Unable to Assess ☐Yes ☐No  Comment: | | | |  |
| Is the informed consent procedure / form adequate ☐Unable to Assess ☐Yes ☐No  WMSU*-*REOC-FR-004.01  Effective Date: 05-Aug-2024  and culturally appropriate?  Comment: | | | |  |
| Is/are the investigator/s and adviser/s adequately trained and do ☐Unable to Assess ☐Yes ☐No  they have sufficient experience to undertake the study?  Comment: | | | |  |
| Is there a disclosure of conflict of interest? ☐Unable to Assess ☐Yes ☐No  Comment: | | | |  |
| Are the research facilities adequate? ☐Unable to Assess ☐Yes ☐No  Comment: | | | |  |
| Are there any other concerns in the study? ☐Unable to Assess ☐Yes ☐No  Comment: | | | |  |

**Recommendation: ☐ Approved**

**☐ Minor revision/s required**

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**☐ Major revision/s required**

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**☐ Disapproved**

**Reasons for disapproval:**

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**Name and Signature of Primary Reviewer Review Date**