***NB: Please tick the relevant box with X***

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **Project Title** | | |  | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | |
| **Principal Researcher(s)** | | |  | | | | | | | | |  | | | | | |
| **Student/Staff number** | | |  | | | | | | | | | | | | | | |
| **Email Address** | | |  | | | | | | | | | **Contact Number**: | | | | | |
| **Supervisor and Co-supervisor** | | |  | | | | | | | | |  | | | | | |
| **Department/Section** | | |  | | | | | | | | | | | | | | |
| **Faculty** | | |  | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | |
| **Nature of Project** | Honors/4th Year | | |  | Master’s  Mini-dissertation | | |  | Master’s  Full dissertation | | | | X | Doctoral |  | Departmental Projects |  |
|  | | | | | | | | | | | | | | | | | |
| **Research involves** | | | Human Health | | |  | Animals | | |  | Human Health and Animals | | | |  | Data collection from people |  |
| Children (Non-therapeutic research) | |  | Children (Therapeutic research) | | |  | Other vulnerable persons | | |  | Special health and safety considerations | | | |  | Desktop, fieldwork, or laboratory research only |  |
| Research on the environment | |  | Interference with nature | | |  | Hazards/ pollution | | |  | Conservation | | | |  | Intellectual Property (IP) |  |
|  | | | | | | | | | | | | | | | | | |
| **Is this a subsequence section of an umbrella project that has prior received a UZREC certificate?** | | | | | | | | | |  | **YES** | | | |  | **NO** |  |
| **If, YES on the above section please give details, eg:** *The title of the approved project and UZREC number:* | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | |
| **Conflict of interests** | | | (Researcher, funder, or participants) | | | | | | |  | **YES** | | | |  | **NO** |  |
|  | | | | | | | | | | | | | | | | | |
| **Risk Classification** | | | Low Risk | | |  | Medium Risk | | |  | High Risk | | | |  | Other |  |
|  | | | | | | | | | | | | | | | | | |

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|  | | | | | | |
| **Documents submitted for ethical clearance consideration** | Project proposal | | X | Letter requesting access to sites/ information/ participants | |  |
| Survey Instrument/Questionnaire | |  | Letter granting access approval | |  |
| Translation (where appropriate) | |  | Other documentation: | |  |
| Observation sheet | |  |  | |  |
| Research instrument permission | |  |  | |  |
| Participant Informed Consent | |  |  | |  |
| Guardian Informed Consent | |  |  | |  |
| Copyright permission | |  |  | |  |
|  | | | | | | |
| **Faculty REC comments:**   * Reasons for recommendation to the UZREC * Why/how the benefits outweigh the risks associated with the research * Special conditions to be attached to the approval | |  | | | | |
| **Faculty REC Chairperson’s Signature** | |  | | | **Date** | |
| **Print Name** | |  | | | | |