



## UP OPEN UNIVERSITY Institutional Research Ethics Committee

Date

**NAME**

Department and Position

Institutional Affiliation

Subject: Appointment as \_\_\_\_\_

Dear **Name**:

You are hereby appointed as \_\_\_\_\_ of the Research Ethics Committee (REC) effective (from) to (to). As member/ independent consultant, your responsibilities are as follows:

(As member)

1. Attend REC meetings consistently.
2. Participate in the ethical review of research proposals and other related reports. The non-scientific member shall give special attention to the Informed Consent Form and process to ensure that these are comprehensible by ordinary persons and are considerate of community values.
3. Participate in the after-review activities, e.g., continuing review, site visits, etc.
4. Declare any conflict of interest (COI) in the review of research proposals.
5. Maintain confidentiality of the documents and deliberations of the REC meetings.
6. Attend continuing ethics education and other related activities.

We look forward to partnering with you in ensuring that all health researches conform to local, national, and international ethical principles and standards towards respect for the rights, well-being and dignity of persons.

Thank you for accepting the invitation to be the member / Independent Consultant of the Research Ethics Committee. Kindly signify your acceptance by signing the conforme below.

Very truly yours,

**INSTITUTIONAL AUTHORITY**

Conforme:

\_\_\_\_\_  
Name and signature of Appointee