



UP OPEN UNIVERSITY
Institutional Research Ethics Committee

**APPLICATION FOR ETHICS
REVIEW OF A NEW PROTOCOL**

REC Form No.	6 (A)
Version No:	01
Date of Effectivity:	

Instructions to the Researcher: Please accomplish this form and ensure that you have included in your submission the documents that you checked below (in Section 3. Checklist of Documents).

1. General Information			
*Title of Study			
*REC Code (To be provided by UPOU IREC)		*Study Site	
*Name of Researcher		Contact Information	*Tel No:
			*Mobile No:
*Co-researcher (if any)			Fax No:
	*Email		
*Institution			
*Address of Institution			
*Type of Study	<input type="checkbox"/> Clinical Trial (Sponsored) <input type="checkbox"/> Clinical Trials (Researcher-initiated) <input type="checkbox"/> Health Operations Research (Health Programs and Policies) <input type="checkbox"/> Social/Behavioral Research <input type="checkbox"/> Public Health/Epidemiologic Research <input type="checkbox"/> Biomedical research (Retrospective, Prospective and Diagnostic Studies) <input type="checkbox"/> Stem Cell Research <input type="checkbox"/> Genetic Research <input type="checkbox"/> Others <hr style="border-top: 1px dashed black;"/>		
	<input type="checkbox"/> Multicenter (International) <input type="checkbox"/> Multicenter (National) <input type="checkbox"/> Single site		
*Source of Funding	<input type="checkbox"/> Self-funded <input type="checkbox"/> Government-funded <input type="checkbox"/> Scholarship/Research Grant		



UP OPEN UNIVERSITY
Institutional Research Ethics Committee

**APPLICATION FOR ETHICS
REVIEW OF A NEW PROTOCOL**

REC Form No.	6 (A)
Version No:	01
Date of Effectivity:	

	<input type="checkbox"/> Sponsored by Pharmaceutical Company _____ <input type="checkbox"/> Institution-Funded <input type="checkbox"/> Others _____
--	--

*Duration of the study	Start date: End date:	No. of study Participants	
*Has the Research undergone Technical Review?	<input type="checkbox"/> Yes (Please attach technical review results) <input type="checkbox"/> No		
*Has the Research been submitted to another REC?	<input type="checkbox"/> Yes <input type="checkbox"/> No		

2. Brief Description of the Study

3. Checklist of Documents

Basic Requirements:

- Letter request for review
- Endorsement/Referral Letter
- Full proposal/Study protocol
- Technical Review Approval
- Curriculum Vitae of Researcher/s
- Informed Consent Form
 - English version
 - Filipino version

Supplementary Documents:

- Questionnaire (if applicable)
- Data Collection Forms (if applicable)
- Product Brochure (if applicable)
- Philippine FDA Marketing Authorization or Import License (if applicable)
- Permit/s for special populations (please specify)



UP OPEN UNIVERSITY
Institutional Research Ethics Committee

**APPLICATION FOR ETHICS
REVIEW OF A NEW PROTOCOL**

REC Form No.	6 (A)
Version No:	01
Date of Effectivity:	

<input type="checkbox"/> Other _____ _____ <input type="checkbox"/> Assent form (If applicable) <ul style="list-style-type: none"> <input type="checkbox"/> English version <input type="checkbox"/> Filipino version <input type="checkbox"/> Other _____ _____	<input type="checkbox"/> Others (please specify) _____ _____
---	--

Accomplish _____
 Signature

Date Submitted: _____

-----To be filled by UPOU IREC Secretariat-----

Completeness of Document	<input type="checkbox"/> Complete <input type="checkbox"/> Incomplete	(Place stamp here)
Remarks		
Date Received		
Received by		