



Research Title:

Date of Submission:

Duration of study:

Researcher Information:

- Principal Investigator:
- Mailing Address:
- Email Address:

Co- Investigator(s):

Name of co- investigator	Institution	contact information

Proposed research description:

Type of the study:

1. Non-clinical (Preclinical /in vitro/basic science/ survey in non-clinical settings))
2. Clinical
 - Prospective
 - Retrospective
 - Observational
 - Interventional
 - Case report



- Case series
- Survey in clinical settings
- Other (Please specify)

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Application Submission Checklist

Activity	Yes	No	N/A	
Cover letter addressed to Sharik health Research Ethics Committee (IRB)				
Documents submitted to the IRB for review (e.g., Protocol, informed consent)				
Data collection form				
Current CVs for the PI and investigators				
PI Certificate for Research Ethics online course				

Objectives of the study: