

ANNEX III

Application Form for Institutional Ethics Review Committee Accreditation/ Renewal of Accreditation

1. Name of Institution

--

2. Name of Institutional Ethics Review Committee (IERC)

--

3. Institutional Ethics Review Committee Address

Physical:
E-mail:
Website:

4. IERC Contact Officer

Name:
Position:
E-mail:
Phone:

5. IERC Chairperson

Name:
Position:
E-mail:
Phone:

6. IERC Secretary

Name:

11. (a) If yes to above, attach the Standard Operating Procedures
(b) If no, explain

--

12. Has the IERC been accredited by the NACOSTI in the Past?

13. If yes in 12 above, indicate the date of notification and number (NACOSTI/

14. Declaration (to be signed by the Appointing Authority of the institution referred to in 1 above)

I hereby declare that the information given in this form and any attachments are correct;

Name of IERC:

--

Name of Institution:

--

Name and Designation

--

Signature: _____ Date: _____

Official Stamp of Institution:

For Official Use

Date Received: _____

Decision: _____

Notification Date: _____