



APPLICATION FORMAT FOR IEC-NRIAS CLEARANCE

To
The Convenor
IEC-NRIAS,
ChinnaKakani, Guntur,

Project Title:

Department:
(Place of study)

Principal Investigator

Name :
Affiliation :
Email :

Co-Investigator(s) / Guide (in case of Dissertation)

Name :
Affiliation :
Email :

Duration of the study :

Sponsors (if any) :

Approval from any other ethics / regulatory committee (if required) :

I shall follow the Good Clinical Practice guidelines and approved protocol in conducting my research project.

Signature of the
Principal Investigator

Signature of the
Co-Investigator(s) / Guide

Signature of the HOD
Name & Seal

Enclosures:

- (i). Synopsis of the project containing Introduction with aim(s) and objectives, Review of literature, Justification for study, Methodology describing the potential risks and benefits, Statistical analysis and Whether it is of national significance with rationale.
- (ii). Informed consent form.
- (iii). Case record form.
- (iv). Study flow chart.
- (v). Sponsor details (if any).

(For IEC office use)

Proposal No.

Date: