****

**Submission Checklist**

**INSTITUTIONAL ETHICS COMMITTEE (IEC)**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | New Submission |  | Resubmission |  | Post-approval Submission |  |  |  |  |

|  |  |
| --- | --- |
| **Title of Project:**  |  |
| **IEC Main Reference Code:**  |  |
| **Principal Investigator:** |  |
| **Type of Study:** |  |

**For new submission or resubmission:**

|  |  |
| --- | --- |
| **Documents** | **Reference Code** |
| [ ]  IEC Application Form |  |
| [ ]  Cover Letter |  |
| [ ]  Informed Consent Form (ICF) |  |
| [ ]  Participant Information Sheet (PIS) |  |
| [ ]  Conflict of Interest (COI) Declaration Form |  |
| [ ]  Proposal/Protocols |  |
| [ ]  Investigator’s Brochure |  |
| [ ]  Decision by other Ethics Committee |  |
| [ ]  Insurance/Protection of Subject for Any Medical condition  |  |
| [ ]  Curriculum Vitae |  |
| [ ]  Additional Documents1. Applicant Feedback Form (for resubmission)
 |  |

**For post-approval submission:**

|  |  |
| --- | --- |
| **Documents** | **Reference Code** |
| [ ]  Adverse Event Reporting (AER) Form |  |
| [ ]  Protocol Deviation Report (PVR) |  |
| [ ]  Continuing Review Form (CRF) |  |
| [ ]  Protocol Amendment Form |  |
| [ ]  Project Closure Form |  |

**Submitted by:**

|  |  |
| --- | --- |
| **PI Name** |  |
| **Email** |  |
| **Contact number** |  |
| **Date** |  |
| **Signature & stamp** |  |