**Ethical Approval Application Form**

**By OMSB Research and Innovation Committee**

If you are planning to conduct a research project among OMSB residents, trainers or staff, you need to complete this application then send it to the OMSB Research and Innovation Committee though email via ([research.ethics@omsb.org](mailto:research.ethics@omsb.org)) or to research section via ([research@omsb.org](mailto:research@omsb.org)).

|  |
| --- |
| Title of Research Project |
|  |
| Is this research |
| Medical Education Clinical Public Health |
| Abstract |
|  |
| Research Team |
| |  |  |  |  | | --- | --- | --- | --- | | **S.N.** | **Name of Research Team Member** | **Responsibility** | **Signature** | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |
| Expected duration for the study in months: |
|  |
| Timeline / work plan of the study: |
| |  |  | | --- | --- | | **Research activity** | **Time** | |  |  | |  |  | |  |  |   \*Please, give detailed activities and time |
| Complete Research Proposal |
| * Introduction and literature review: * Objectives and hypothesis of the study: * Methods * Research design: * Characteristics of study area and target population: * Sampling and sample size: * Variable definitions and measurements: * Data collection tools and methods: * Pilot study:      * Data quality and entry: * Data analysis: * Ethical considerations: * Results Dissemination: |
| Limitations and difficulties of the study |
|  |
| If other health institutions involved in this research project, kindly list them |
| \* Please, enclose the ethical approval from of these institutions if available. |
| If research funding required: |
| Potential funding institution:  Required budget is ……………………………….(O.R) |
| List of abbreviations |
|  |
| References |
|  |

**Declaration:** I agree to submit this final draft of ethical approval application form for ethical approval by OMSB Research and Innovation Committee. I will have full responsibility to manage the project and to follow up various activities in order to finish it in expected time. I will ensure that the research will not deviate from the protocol described. If significant protocol amendments are required as the research progresses, I shall submit these to the OMSB Research and Innovation Committee for approval. Singed contribution table by all team members ensure that they are aware of ethical aspects of this research project. Also, I will be responsible to provide final report.

**Signature of**  the Principle investigator Date: DD / MM /Year