

## Application for Approval to Conduct Research at MNU

To be filled by researchers from other institution to collect data from MNU

Personal details						
APPLICANT'S DETAILS						
Date of application	1 1					
Full name of applicant						
Contact address						
Phone number	Email					
Institution/ Organisation		Faculty/Centre				
SUPERVISOR DETAILS		•				
Principal Supervisor			Phone number			
Institution/ Organisation			Email.			
PROJECT DETAILS						
Title of the project						
Proposed date of commencement of data collection		Expected date of completion of data collection				
Ethics approval number						

## Documents to be submitted with the form:

- Information sheet (as per MNU guideline)
- Consent form
- Ethics approval letter/ document
- Official letter from Institution

## FOR OFFICIAL USE (Approval by Committee):

Committee:	MEMBER FROM MNU RESEARCH DEVELOPMENT OFFICE	MEMBER FROM RELEVANT FACULTY OR CENTRE	MEMBER EXTERNAL TO THE RELEVANT FACULTY OR CENTRE
Name:			
Signature:			