

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
- Consent form and data collection instruments
- 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: | | | |