

**Form A-Application Blanket Approval  
*For the Course Coordinators***

***Information and Instructions***

*Please fill this application form and attach all the required documents along with the application form addressed to research ethics secretariate to* [***research.ethics@mnu.edu.mv***](mailto:research.ethics@mnu.edu.mv)

*Kindly please refer to research ethics policy available at* [*https://mnu.edu.mv/research-development/*](https://mnu.edu.mv/research-development/)

# Section A: Details of Subject

|  |  |
| --- | --- |
| Course Name | Click here to enter text. |
| Subject Code | Click here to enter text. |
| Credit points | Click here to enter text. |
| Subject Coordinator | Click here to enter text. |
| Email Address of subject coordinator | Click here to enter text. |
| **If the course has been previously given blanket approval, please complete the below information**  *(Please note: Blanket approval for courses is granted for a period of five (5) years, during which coordinators are not required to re-submit for blanket approval for the same course.)* | |
| Approval Number: | |
| Approved Year: | |

**Section B: Details of Assessment/Research based component**

|  |  |
| --- | --- |
| Give a brief description of the research based  component | Click here to enter text. |
| Aims / Objectives |  |
| Research procedures are involved | Click here to enter text. |
| Description of research participants | Click here to enter text. |

**Section C: Ethical Consideration**

Ethical consideration of the project: Describe how each of the given concerns (if any) will be addressed by the students. If the risk/concern is low indicate so.

|  |  |
| --- | --- |
| Voluntary, informed consent | Click here to enter text. |
| Privacy & confidentiality | Click here to enter text. |
| Risk to Participants | Click here to enter text. |
| Permission for access to participants from other individuals or bodies | Click here to enter text. |
| Storage and subsequent destruction of data | Click here to enter text. |
| Dissemination of research | Click here to enter text. |

**Declaration by Coordinator**

**Section C: Declaration by Coordinator**

I hereby undertake the responsibility of ensuring that relevant ethical considerations are addressed in this research-based component of the course. I specifically will ensure the lecturers and students involved in this subject:

* are made aware of the need for seeking ethics approval for all research involving human participants and that a blanket approval has been taken for this course
* follow the ethical considerations required in the involvement of human subjects and the students are asked to document all ethics procedures followed in the submission of their assessed work.
* understand that although blanket approval has been granted for this course, any student whose research project requires **Ethics B or Ethics C** form approval will be required to obtain **individual ethics approval** based on the specific requirements of their research project.

**Section D: Students list and their project title**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| # | Student Name | Student Number | Course Name | Project Title |
|  | Click here to enter text. | Click here to enter text. |  | Click here to enter text. |
|  | Click here to enter text. | Click here to enter text. |  | Click here to enter text. |
|  | Click here to enter text. | Click here to enter text. |  | Click here to enter text. |

|  |  |  |  |
| --- | --- | --- | --- |
| Applicant’s Name |  | | |
| Faculty/Centre Name |  | | |
| Signature of the Applicant |  | | |
| Faculty Dean/HOD Signature |  | Date |  |

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| --- |
| CHECK LIST |
| Before submitting this form to the MNU Research Ethics Committee, please **ensure that all sections are fully completed.** Incomplete submissions such ***as missing information or required signatures*** will be returned to the applicant for revision. |