



**DIRECTORATE OF ORIC
BACHA KHAN UNIVERSITY
CHARSADDA**

ETHICAL INSTITUTION REVIEW BOARD

Application Form (For Social Sciences, Arts and Humanities)

Title of Research Project/ Proposal: _____

Applicant Information

1	Name	
2	Registration #	
3	Department	
4	Program (MS/M.Phil/ PhD)	
5	Any other relevant information	

Supervisor/PI

1	Name	
2	Designation	
3	Department	
4	E-mail address	
5	Mobile/WhatsApp	
6	Any other relevant information	

Co-Supervisor/ Co-PI (if applicable)

1	Name	
2	Designation	
3	Department	
4	University	
5	E-mail address	
6	Mobile/WhatsApp	
7	Any other relevant information	

Study Details

1. Brief study design (Protocol/Methodology)

2. Sample Size and Detail of Study Sites

3. Primary Outcomes

4. Inclusion and Exclusion Criteria

5. Potential Risks (if any)

Major Ethical Concern (for which ethical approval is required)

Work Plan

	DD/ MM/ YYYY
Expected starting date of the study:	___/___/___
Expected completion date of the study:	___/___/___

Declaration

I/we solemnly declare that the information provided in the above application form are true and correct and I/we 'agree to uphold the protection of research subjects, rights and safety'. I/we declare to submit annual and final report upon completion of the study.

1. Name of Scholar

Signature with Date

2. Name of Supervisor/PI

Signature with Date

3. Name of Co-Supervisor/Co-PI (if applicable)

Signature with Date

4. Head of the Department/Institution

Name: _____

Signature: _____

Date: _____

Official Seal: _____

Checklist

S.# Checklist

- | | | |
|---|--------------------------------|--------------------------|
| 1 | Application form | <input type="checkbox"/> |
| 2 | Research Proposal | <input type="checkbox"/> |
| 3 | Copy of Questionnaire (if any) | <input type="checkbox"/> |
| 4 | Copy of Consent Form (if any) | <input type="checkbox"/> |