

ภาควิชา ...............Department..........

โทร. .... Telephone of department............ โทรสาร.....Fax number of department…....

ที่ อว....................................................

วันที่ ..................Date.............................

เรื่อง **ขอเสนอโครงการวิจัยเพื่อขอรับการพิจารณารับรอง**จริยธรรมการวิจัยในคน

เรียน ประธานคณะกรรมการจริยธรรมฯ

 ด้วยข้าพเจ้า..........Name principal investigator......... นักศึกษาหลักสูตร........ Course............คณะ.............. Faculty name ......................มีความประสงค์ดำเนินโครงการวิจัยเรื่อง“.................................Title of project.............................” เพื่อขอรับการพิจารณา**รับรอง**จริยธรรมการวิจัยในคนจากคณะกรรมการจริยธรรมการวิจัยในคนประจำคณะทันตแพทยศาสตร์และคณะเภสัชศาสตร์ **มหาวิทยาลัยมหิดล** (MU-DT/PY-IRB)

 จึงเรียนมาเพื่อโปรดพิจารณา

ลงชื่อ .............................................................

(……..........Name principal investigator ……….)

 หัวหน้าโครงการวิจัย

ลงชื่อ ............................................................

 (...Name thesis Advisor/ or Name head of department...)

 อาจารย์ที่ปรึกษา/หัวหน้าภาควิชา

**Submitted documents**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Sending** | **List of Documents** | **Original** | **Copy** | **Attach File** |
| □ | 1. Form 1 Cover letter for MU-DTPY-IRB
 | 1 | - | - |
| □ | 1. Form 2 Cover letter for MU-DTPY-IRB fee
 | 1 | - | - |
| □ | 1. Form 3 Cover letter for MU-DTPY-IRB fee waiver
 | 1 | - | - |
| □ | 1. Form 4 Cover letter for MU-DTPY-IRB fee exempt for exemption review project
 | 1 | - | - |
| □ | 1. Form 5 Exemption
 | 1 | - | - |
| □ | 1. Form 6 MU-DT/PY-IRB Submission form
 | 1 | 3 | Word |
| □ | 1. Proposal / Protocol
 | 1 | 3 | PDF |
| □ | 1. Form 7 Assent form
 | 1 | 19 | Word |
| □ | 1. Form 8 or Form 9 Participant Information Sheet
 | 1 | 19 | Word |
| □ | 1. Form 10 Informed Consent Form
 | 1 | 19 | Word |
| □ | 1. Form 11 Participant information sheet for questionnaire subject
 | 1 | 19 | Word |
| □ | 1. Form 12 Commitment for Research Conduct
 | 1 | 3 | - |
| □ | 1. Principal Investigator’s Curriculum Vitae
 | - | 4 | - |
| □ | 1. The research tools used for collecting data; i.e. questionnaires, interview/observation guide
 | 1 | 3 | PDF |
| □ | 1. Case record form/case report forms
 | 1 | 3 | PDF |
| □ | 1. Advertisement
 | 1 | 3 | PDF |
| □ | 1. Documents to be given to participant
 | 1 | 3 | PDF |
| □ | 1. In case of drug trial. Specify the registration number by the Food and Drug Administration Ministry of Public Health or document to bring drug research and other necessary documents relating to the drug (Drug Registered Number, IND, Investigator Brochure, Other Forms or Reports required by the MU-DT/PY-IRB)
 | - | 4 | - |
| □ | 1. Draft / Copy document permission from authorized person to use stored specimen (In case of stored specimen)
 | - | 4 | - |
| □ | 1. Draft / Copy document permission from authorized to use medical records (In case of retrospective medical record review)
 | - | 4 | - |
| □ | 1. Draft / Copy document permission from authorized to collect data
 | - | 4 | - |
|  | 1. Draft / Copy document permission from authorized to use research area
 | - | 4 | - |
| □ | 1. Draft/ Copy document Material Transfer Agreement (MTA)
 | - | 4 | - |
|  | 1. **The researcher is a student; please attach the following documents more.**
 |
| □ |  24.1 The Faculty of Graduate Studies' Administrative Order for the thesis topic and the appointment of the Thesis Advisory Committee or Form GR.39 if the thesis proposal examination is ongoing. | - | 4 | - |
| □ |  24.2 Advisor’s Curriculum Vitae | - | 4 | - |
| □ |  24.3 The certificate of attendance or the certificate of achievement from the conference on Ethics in Human Research | - | 4 | - |
| □ | 1. Certificate of Approval (Being subproject of the large project that has been approved by the Ethics Committee)
 | - | 4 | - |
| □ | 1. Certificate of Approval (The project has been approved by the Ethics Committee of the data collecting site)
 | - | 4 | - |