

Research Proposal Approval Format

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IRB Kanti Children's Hospital

Maharajgunj, Kathmandu – 3, Nepal. Phone: +977-1-4411140.

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For Official Use Only

(Please see the check list before Registration of the application form)

Registration No.:	Registration Date:
Approved Date:	
Name of PI:	
Total Budget of the Project:	IRB Processing Fee:
Research Site:	
Tentative Date of Initiating the Project:	
Duration of the Research Project:	
Name of Internal Reviewer:	
Expedited review: yes/No	Full House Review yes/NO
Name of External Reviewer:	
Signature & Seal of IRB kanti Hospital:	

Part – I

Passport size
photograph

Administrative Information

1. Research Title:

2. Name and Title of Principal Investigator responsible for the proposed research:

Last (Surname)

Middle (if any)

First name

Nationality:

Nepali

Citizenship Number with district name from where it was obtained (only for Nepali)

Passport Number (only for non Nepali citizen):

Signature:

Date:

Postal Address:

Telephone No.:

Mobile No.:

Fax No.:

e-mail:

Alternate e-mail:

3. Full name of the Institution associated with the Principal Investigator (if

applicable) :

Designation:

Postal Address (if different from the address given above):

Telephone No.:

Fax No.:

e-mail:

Website:

4. Declaration of the head of the Institution (if applicable)

If the proposed research is approved, we will allow him/her to conduct the research in this institution.

Signature: Date:

Last (Surname)

Middle (if any)

First name

Designation:

Name of the Institution

Contact/Postal Address:

Telephone No.:

Fax No.:

Institutional e-mail:

Website:

5. Name and Title of Co-investigators responsible for the proposed research

(Use the similar format if more than one):

Last (Surname)

Middle (if any)

First name

Passport size
photograph

Nationality:

Citizenship Number with district name from where it was obtained (only for Nepali)

Passport Number (only for non Nepali citizen):

Affiliated Institution (if applicable):

Designation:

Signature: Date:

Postal Address (if different from the address given above):

Telephone No.:

Fax No.:

e-mail:

(Use additional sheet if necessary)

6. List the name(s) and institutional affiliation to the researcher(s) (other than co-investigator) to assist your project in Nepal and abroad (if any)

Name

Institution and Address

- | | | |
|-----|----------------------|----------------------|
| (a) | <input type="text"/> | <input type="text"/> |
| (b) | <input type="text"/> | <input type="text"/> |

(Use additional sheet if necessary)

7. List the name(s) of Nepali researcher(s) (other than co-investigator) or Nepalese Institution/hospital/NGO(s) etc. from whom you may seek co-operation (if any)

- | | |
|-----|----------------------|
| (a) | <input type="text"/> |
| (b) | <input type="text"/> |

(Use additional sheet if necessary)

8. List major equipment(s) in relation to your research project you plan to bring/import to Nepal (If applicable)

- | | |
|-----|----------------------|
| (a) | <input type="text"/> |
| | <input type="text"/> |

(b)

(Use additional sheet if necessary)

8.1 List details of all specimen(s) (if any) that you may transport from Nepal in relation to your research.

- (a)
- (b)
- (c)
- (d)

8.2 Country of Destination:

Name of Institution:

8.3 Mode of Transportation of Specimen

8.4 How will you ensure duplicate specimens remain in the country?

(If necessary use additional sheet)

9. Is this research part of your Thesis?

Yes ☐

No ☐

If yes,

For what degree and in which subject?

From which university?

From which country?

Part – II

Financial Information

10.Name of the funding organization:

Contact information of funding organization or agency:

Postal Address:

Telephone No.:

Fax No.:

e-mail:

Contact person at the funding organization or agency:

Last (Surname)

Middle (if any)

First name

Designation:

Total amount of funds (in NRs / US \$) allocated for the proposed research project:

Itemized budget (in detail) and justify the resources required for the proposed research work (*use additional sheet*)

Part – III

Research Proposal Description

11. Research Title:

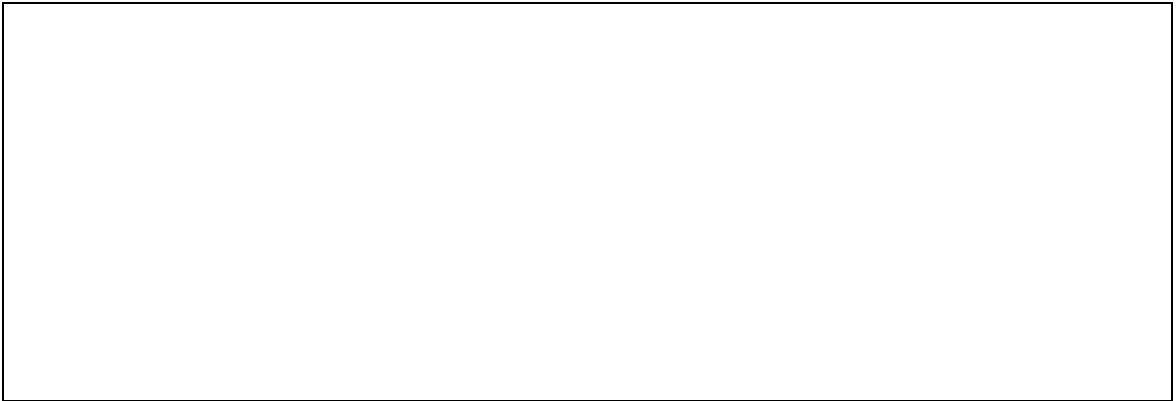
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12. Proposal Summary (maximum 500 words):

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13. Introduction:

13.1 Background of Study (maximum 500 words):



13.2 Statement of the Problem and Rationale / Justification (maximum 500 words)



13.3 Conceptual framework

13.4 Research Objectives / purpose / aim of the study:

General

Specific

14. Research Design and Methodology

Research Method

Qualitative ☐ Quantitative ☐ Combined ☐

Study Variables:

Type of Study (Specify):

Study Site and Its Justification:

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Study Population (Specify):

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Study Unit:

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Sampling Methods / Techniques (Specify):

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Sample size (with justification):

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Data Collection Technique / Methods (Specify):

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Data Collection Tools: (please attached in annex)

Pre-testing the Data Collection Tools (if applicable):

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Validity and Reliability of the Study Tools:

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Potential Biases (if applicable):

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Limitation of the Study:

15.

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16. Plan for Data Management and Analysis:

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17. Expected Outcome of the Research:

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18. Plan for Dissemination of Research Results:

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19. Plan for Utilization of the Research Findings (optional):

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How is the research project going to strengthen the research capability of the host institution: Nepali Researcher (if submitted from abroad):

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20. Work Plan (*should include duration of study, tentative date of starting the project and work schedule / Gantt chart*):

Part – IV

Ethical Consideration

22. Regarding the human participants:

Are human participants required in this research? If yes, provide justification.

☐ Yes (*provide justification*) No ☐

How many participants are required for the research? Explain.

What is the frequency of the participant's involvement in the research? Explain.

Clearly indicate the participant's responsibilities in the research. What is expected of the research participants during the research?

Are vulnerable members of the population required for this research? If yes, provide justification.

Are there any risks involved for the participants? If yes, identify clearly what are the expected risks for the human participants in the research and provide a justification for these risks.

Are there any benefits involved for the participants? If yes, identify clearly what are the expected benefits for the participants.

References:

Part – V

ACCEPTANCE OF GENERAL CONDITIONS AND DECLARATION BY THE PRINCIPAL INVESTIGATOR

I hereby certify that the above mentioned statements are true, I have read and understood the regulation of the IRC kanti children's Hospital on the approval of research proposal and will act in conformity with the said regulation in all respects.

If the research is terminated, for any reason, I will notify IRC of this decision and provide the reasons for such actions. I will provide IRC kanti Hospital with a written notice upon the completion of the research as well as a final summary/full report of the research study. If I publish the results in a journal, I shall acknowledge the IRC and shall provide the Council with three copies of any such articles.

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Signature of Applicant

Date: