**REQUEST FOR****PERMISSION TO CONDUCT RESEARCH RELATING TO UNIVERSITY OF PRETORIA POPULATIONS AND DATA**

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| Name of researcher: |  |
| Student/Personnel number: |  |
| Project title: |  |
| Department: |  |
| Staff research |  | Doctorate |  | Masters |  | Honours |  |
| Brief description of the overall aim, objectives and methodology of the research: |  |
| Will the research findings be published in a scientific journal? Yes |  | No |  |
| UP population from whom primary data will be collected: |  |
| UP secondary data: |  |
| Proposed period for data collection: |  |
| Signed: Researcher | Date: |
| **For office use:** |
| **Approved: Faculty EMS Research Ethics Committee** | Date: |
| Permission granted: Yes |  | No |  | Conditional |  |
| Conditions (if applicable): |  |
| **Signed: Registrar / Dean** | Date: |