LETTER OF INTENT AND SUBMISSION OF RESEARCH PROTOCOL

Date.
To: Prof A G Nienaber
The Chairperson: Research Ethics Committee: Faculty of Law
University of Pretoria
PRETORIA
0002
Dear Prof Nienaber
SUBMISSION OF RESEARCH PROTOCOL FOR EVALUATION:
NAME OF PROTOCOL:
NATURE OF STUDY:
ARE SUFFICIENT FACILITIES/FUNDS/RESOURCES AVAILABLE TO COMPLETE STUDY? (If applicable)
Yes / No
If no, indicate if application for outside funding was done:
Name of possible funding institution:

RESEARCH PARTICIPANTS/VOLUNTEERS/FILES/SAMPLES (Select applicable)

State the type of samples to be collected and source of research participants or nature of information/data to be accessed:

Information obtained from (which persons / class of persons):

IS THE PROTOCOL SUPPORTED BY THE LECTUTRER SUPERVISOR/PROMOTER?

Yes / No / N/A				
If no, explain:				
IS THE STUDY FOR DEGREE PURPOSES?				
Yes / No				
If no, explain the nature of research:				
Please declare all interests in sponsor company or products e.g. shareholding, congress sponsorships, etc: (only if applicable)				
Signed on: at Pretoria Signature of researcher:				
Signature of Lecturer / Supervisor / Promoter:				
Print name:				
Contact details:				
Telephone: Cell:				
E-mail:				
NB: PLEASE FIND THE ATTACHED DOCUMENTATION (IN COMPLETED FORM) IN SUPPORT OF THE SUBMTITED RESEARCH PROPOSAL:				

ATTACHED DOCUMENTATION IN SUPPORT OF RESEARCH PROPOSAL:

[STATE WHICH DOCS ARE ATTACHED]

PROTOCOL FOR ALL REVIEWABLE RESEARCH IN THE FACULTY OF LAW AS PER PARAGRAPH 4.1 OF THE STANDARD OPERATING PROCEDURES:

All applicable research protocols (undergraduate/postgraduate/others) should be accompanied by a letter of the supervisor/promoter/applicant and should contain the following information:

Interviewer name and surname:	
Student number:	
Contact telephone number:	
Title of the study:	
Supervisor/Promoter name and surnan	ne:
DECISION OF RESEARCH ETHIC	CS COMMITTEE:
After perusal/review of the submitte documentation ETHICAL CLEARA APPROVED/REJECTED/REFERR	ANCE for the proposed research is hereby
Signed:	(Chairperson of the committee)
Date:	
In the case of undergraduate research	ch relevant supervisor notified.
In the case of postgraduate research as the Chairperson of the Postgradu	relevant supervisor/promoter notified as well ate Committee.

ANNEXURE "A"

PARTICIPANT INFORMATION LEAFLET AND INFORMED CONSENT:

Dear Participant

Title of project: [INSERT TITLE]

Introduction

You are invited to volunteer for a research study. This information leaflet is to help you decide if you would like to participate. Before you agree to take part in this study you should fully understand what is involved. If you have any questions, which are not fully explained in this leaflet, do not hesitate to ask the researcher. You should not agree to take part unless you are completely happy about all the procedures involved.

What is the purpose of the study?

[GIVE A SHORT OUTLINE OF PURPOSE, NATURE AND DURATION STUDY]

How will the study be conducted?

[DESCRIBE YOUR METHODS HERE]

What is the duration of the study?

Has the study received ethical approval?

This research protocol was submitted to the Faculty of Law Research Ethics Committee, University of Pretoria, and written approval has been granted by the Committee. The study has been structured in accordance with ethical considerations such as the protection of the identity of all participants.

What are my rights as a research participant in this study?

Your participation in this research is entirely voluntary and you can refuse to participate or stop at any time without stating any reason. The investigator retains the right to withdraw you from the study if considered to be in your best interest.

May any of the research procedures result in any discomfort?

[Yes / No / Give details]

What are the benefits involved in the study?		
Are there any restrictions concerning my participation in this study?		
Insurance and financial arrangements: [leave out if n/a]		
Source of additional information		
The study will be conducted by way of [eg interviews/observations] by Should you have any questions, please do not hesitate to contact her. The telephone number is, through which you can reach her or another authorised person.		
Confidentiality		
All information obtained during the course of this research is strictly confidential. Data that may be reported in law or scientific journals will not include any information which identifies you as a participant in this study. Data / information will be published anonymously. No information will be disclosed to any third party without your written permission.		
INFORMED CONSENT CLAUSE		
I hereby confirm that I have been informed by the researcher (state particulars) about the nature, conduct, benefits and risks of the proposed research. I have also received, read and understood the above written information (informed consent) regarding the study.		
I am aware that the results of the study, including personal details regarding sex, age, marital status etc (state) of myself will be anonymously processed into the research report. (See in particular the definition of opersonal information in the Promotion of Access to Information Act 2 of 2000.)		
I may, at any stage, without prejudice, withdraw my consent and participation in the study. I have had sufficient opportunity to ask questions and (of my own free will) declare myself prepared to participate in the study.		
Participantos name:		
Participantos signature:		

I, herewith confirm that the above participant has been informed fully about the nature and scope of the above study.			
Investigatorgs name:			
Investigatorøs signature:			
Witnessøs name:			
Witnessøs signature:			
Date:			