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| **BASIC INFORMATION** |
| Reference Number:[[1]](#footnote-1) |  |
| REC Code:[[2]](#footnote-2) |  |
|  Title: |  |
| Researcher’s Name / Project Leader and Designation/Affiliation: |  |
| Research Team Members: (If Team Research) |  |

**INSTRUCTIONS:**

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| ***To the Researcher/Research Team:***Please indicate in the column whether or not each of the given criteria is applicable to your research report or research article. If applicable, please provide the page and paragraph where each of the criteria was addressed by your report/article. |
| ***To the Reviewer:***Please review how the set of criteria has been appropriately addressed by the research report by placing your rating in the space provided and putting your comments if found appropriate. Finalize your review by indicating your conclusion under “RECOMMENDED ACTION” and signing in space provided for the reviewers.  |

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| **CRITERIA FOR REVIEW** | **To be filled out by the Researcher /Lead Researcher** | **To be filled out by the Reviewer** |
| **Not Applicable**(NA)No particular ethical issue to be addressed  | **Applicable**(A)Page and paragraph where it is found in the proposal | **REVIEWER’S RATING** **3 = (NA) No particular ethical issue to address** **2 = (A) Adequately addressed in the proposal****1 = (A) Needs revisions so as to address the ethical concern** |
| **Rating** | **Comments and Suggestions** |
| 1. All data collected in the study are openly stated together with the specific details and sources (e.g. proper referencing and citations) to guarantee replicability of the research in the future.
 |  |  |  |  |
| 1. Disclosure of any or other substantive conflict of interest that might be construed to influence the results or interpretation of the report (e.g. employment, consultancies, honoraria, paid expert testimony, patent application or registration, and grants and other funding).
 |  |  |  |  |
| 1. Protection of privacy and confidentiality of participants' information are shown.
 |  |  |  |  |
| 1. Informed consent process was observed. (i.e. application of the principle of respect, who may solicit consent, how and when it will be done, who may give consent especially in case of special population like minors, or indigenous people which require additional clearances).
 |  |  |  |  |
| 1. If the study involved vulnerable population (e.g. children, the elderly, ethnic and racial minority groups, the homeless, prisoners, people with incurable diseases) a discussion which addressed ethical issue/s with the vulnerable population is shown.
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| **CRITERIA FOR REVIEW** | **To be filled out by the Researcher /Lead Researcher** | **To be filled out by the Reviewer** |
| **Not Applicable**(NA)No particular ethical issue to be addressed  | **Applicable** (A)Page and paragraph where it is found in the proposal | **REVIEWER’S RATING** **3 = (NA) No particular ethical issue to address** **2 = (A) Adequately addressed in the proposal****1 = (A) Needs revisions so as to address the ethical concern** |
| **Rating** | **Comments and Suggestions** |
| 1. If the study involved the participation of children, the procedure of obtainingassent is provided.
 |  |  |  |  |
| 1. Authorship was limited to those who have significantly contributed to the conception, design execution, or interpretation of the reported study. Individuals who have made significant contribution should be listed as co-authors. Others who have participated in certain substantive aspects of the project were acknowledged or listed as contributors.
 |  |  |  |  |
| 1. Information about the impact of the research on the community where the research occurs and/or to whom findings can be linked is presented.
 |  |  |  |  |
| **TOTAL SCORE:** |  |  |
| **RECOMMENDED ACTION** |
| * APPROVED FOR THE ISSUANCE OF ***CERTIFICATE OF COMPLIANCE*** WITHOUT REVISION IN THE REPORT
* FOR REVISION/S (Please see specifics in the “Comments and Suggestions” column)

AND TO SUBMIT THE REVISED REPORT TO THE ***REC SECRETARIAT*** WITHIN SEVEN (7) WORKING DAYS* FOR INTERVIEW BY THE RESEARCH ETHICS COMMITTEE
 |
| **REVIEWER**  |
| Signature over printed name Date: | Designation in the REC |

1. To be issued upon submission of this form [↑](#footnote-ref-1)
2. To be issued upon release of review results [↑](#footnote-ref-2)