APPENDIX 5A: MIRERC ETHICS REVIEWER'S COMMENTS FORM

This form is for use when ethically reviewing a research ethics application form.

1. Name of Ethics Reviewer(s):				
2. Research Project Title:				
3. Principal Investigator (or Supervisor):				
4. Name of Student (if applicable):				
5. Academic Department / School:				
6. I confirm that I do not have a conflict of interest with the project application				
7. Loopfings that in many independent the application abouted.				
7. I confirm that, in my judgment, the application should:				
Be approved:	Be approved with suggested amendments in '8' below:	or or	e approved providing requirements specified in '9' below are met:	NOT be approved for the reason(s) given in '10' below:
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8. Approved with the following suggested, optional amendments (i.e. it is left to the discretion of the applicant whether or not to accept the amendments and, if accepted, the ethics reviewers do not need to see the amendments):				
9. Approved providing the following, compulsory requirements are met (i.e. the ethics reviewers need to see the required changes):				
10. Not approved for the following reason(s):				
11. Date of Ethics Review:				