**SELCUK UNIVERSITY FACULTY OF PHARMACY**

**SCIENTIFIC RESEARCH ETHICS COMMITTEE**

**̶ APPLICATION CHECKLIST ̶**

**.../.../202.**

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| --- | --- |
| 1. Application Petition | **□** |
| 1. Scientific Research Ethics Committee Application Form | **□** |
| 1. Privacy Agreement and Conflict of Interest Declaration | **□** |
| 1. Work Permit Document (Signed approval document to be provided from the laboratory / institution / organization / center where the project work will be carried out) | **□** |
| 1. Questionnaire etc. Forms to be used (All forms should be given as attachments) | **□** |
| 1. Proforma Invoices (Must be received within 1 month at the latest) | **□** |
| 1. 3 Current Publications Related to the Project Subject (First page printout is sufficient) | **□** |

**All the documents mentioned above;**

* **Sending a single file converted to PDF format to the e-mail address of the Ethics Committee Secretariat (**[**ecz.etikkurul@selcuk.edu.tr**](mailto:ecz.etikkurul@selcuk.edu.tr) **and** [**ekacarkutlu@selcuk.edu.tr**](mailto:ekacarkutlu@selcuk.edu.tr)**) and**
* **It must be submitted to the document registration unit of the Faculty Dean's Office at least seven (7) working days before the date of the Committee meeting.**

**I hereby commit to deliver all documents in full.**

***Signature***

**Name, Surname**

Project Coordinator/Principal Investigator