**Taught Student PROFORMA**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Taught Student Applications Considered for Ethical Approval** | | | | | | |
| **\* School:** | | |  | | | |
| **\* Level of Study:** | | |  | | | |
| **\* Course:** | | |  | | | |
| **\* Module Title:** | | |  | | | |
| **\* Programme Lead:** | | |  | | | |
| **\* Programme Administrator:** | | |  | | | |
| **\* Academic reviewers on panel**  ***(x 2 exclusive of supervisor):*** | | | *1.*  *2.* | | | |
| **\* Date completed:** | | |  | | | |
| **No.** | **\* Student Name**  (First name - Last name) | **\* Supervisor** | **\* Title of proposed study** | Has the student identified the study as **sensitive research?**  - See Q12 on application | **\* Decision**  Approved / Declined | **\* Level of Risk**  Low / Medium  See RECoP |
| **1.** |  |  |  |  |  |  |
| **2.** |  |  |  |  |  |  |
| **3.** |  |  |  |  |  |  |
| **4.** |  |  |  |  |  |  |
| **5.** |  |  |  |  |  |  |

**\* Please ensure all fields are completed and forms are completed electronically**

**To be submitted with completed applications from each named student with separate HLS FREC reviewer forms from both academic reviewers**

|  |  |  |  |
| --- | --- | --- | --- |
| **Approval** (for Medium only) | **Print Name:** | **Signature:** | **Date:** |
| **Chair of the Faculty Research Ethics Committee**:  I ratify that these applications should be approved subject to the satisfactory completion of any revisions indicated. |  |  |  |