

Faculty of Medicine, Wayamba University of Sri Lanka

Check list for applicants seeking ERC approval, at submission of proposals.

| Ref No: | |
|---------------------------|--|
| New/Major/Minor/Amendment | |

Compare this check list against your documents before submission of your proposal

| | pare this check list aga | • | ıments | before | submi | ssion of your pro | posai | | | |
|---|--|--|--------|----------|--------|-------------------|------------|--------|--------|-----|
| 1. | Complete application for | | | ard cop | , | | Yes Yes | | | |
| 2. | <u> </u> | gle paged summary - 15 copies (in the correct format) | | | | | | | | |
| 3. | 4 separate sets of protoc | | Englis | sh) | Date: | | | | | |
| 4. | Are the following included in the protocol | | | | | | | | | |
| | Participant information | sheet En | glish | Yes | NA | Version: | Date: | | | |
| | | Sin | nhala | Yes | NA | Version: | Date: | | | |
| | | Tai | mil | Yes | NA | Version: | Date: | | | |
| | Consent Form | | glish | Yes | NA | Version: | Date: | | | |
| | | | nhala | Yes | NA | Version: | Date: | | | |
| | | | mil | Yes | NA | Version: | Date: | | | |
| | Questionnaire/Data coll | ection En | glish | Yes | NA | Version: | Date: | | | |
| | instrument | Sin | nhala | Yes | NA | Version: | Date: | | | |
| | | Tai | mil | Yes | NA | Version: | Date: | | | |
| 5. | Hard copy of the short CV of Principal investigator (Signed and dated) | | | | | | | | | |
| 6. | Soft copy of all above documents and short CVs of other investigators (CD) | | | | | | | | | |
| 7. | Is the title in the application, summary and proposal same? | | | | | | | | | |
| 8. | Budget | | | | | | | | | |
| 9. | ERC fee | | | | | | | | | |
| University of Wayamba undergraduate project | | | | | | | Free | | | |
| Industry sponsored intervention study /observational study | | | | | | | | | \$ 1 | 000 |
| | Other applications a | ecording to buc | dget | | | | | | | |
| - <rs.100,000< td=""><td></td><td></td><td>Rs. 1</td><td>000</td></rs.100,000<> | | | | | | | | Rs. 1 | 000 | |
| - Rs. 100,000 - 300,000 | | | | | | | | Rs. 2 | 000 | |
| - Rs. 300,000 - 1,000,000 | | | | | | | | | Rs. 5 | 000 |
| - Rs. 1,000,000 - 5,000,000 | | | | | | | | Rs.10, | 000 | |
| - >Rs. 5,000,000 | | | | | | | | | Rs.20, | 000 |
| | Application for establishment of database | | | | | | | | Rs. 1 | |
| | Annual renewal of Industry sponsored studies | | | | | | İ | | | 500 |
| | Significant amendments to Industry sponsored studies | | | | | | İ | | | 250 |
| | Significant amendments to other projects | | | | | | İ | | Rs. 2 | |
| 10. | | of GCP Training (compulsory for clinical trial applications) | | | | | Yes | No | | |
| | Research for | Supervisors I | - | | 1 | , | Yes | No | | |
| 11. | Postgraduate Degree requirement | Approval Let | | n Post (| Gradua | te Institute | Yes | No | | |
| | | | | | | | | | | |

| 1 | | | | | | | |
|-----------------------------------|-------|--|--|--|--|--|--|
| Investigator's Name/ Designation: | | | | | | | |
| Investigator's Signature: | Date: | | | | | | |
| Recipient's Signature: | Date: | | | | | | |