**T.C.**

**SELÇUK UNIVERSITY**

**FACULTY OF HEALTH SCIENCES**

**NON-INTERVENTIONAL CLINICAL RESEARCH ETHICS COMMITTEE**

**APPLICATION CHECKLIST \***

|  |  |
| --- | --- |
| 1. Application Letter (signed) |  |
| 1. Good Clinical Practices Commitment (signed) |  |
| 1. Commitment That No Conflict of Interest (signed) |  |
| 1. Funding Commitment (signed) |  |
| 1. Approval Institutional Permission (An approval letter from the institution where the research will be conducted or a signed undertaking stating that the approval letter will be submitted within 6 months at the latest) |  |
| 1. Informed Consent Form (If necessary-Must be specially prepared for the study-) |  |
| 1. Non-Interventional Clinical Research Ethics Committee Form (Completely completed)\*\* |  |
| 1. Survey used, Forms etc. (All forms must be attached as an attachment) |  |
| 1. Three articles about study (Full text) |  |
| 1. **Sending all documents as a digitally scanned pdf file to the ethics committee secretary (in a single file)** |  |
| 1. **Applied according to the current form on the Selçuk University Faculty of Health Sciences Ethics Committee website.** |  |

\* Applications are made via the specified e-mail address. **(etikkurulusbf@gmail.com)**

\* Mark the relevant boxes with a cross.

\* Applications with missing checklist will not be evaluated.

\* The Application Checklist should be placed on the first page and the forms should be added after it, taking into account the order in this list.

\*\*When filling out the form, spelling and referencing rules in the thesis writing guide which in Selçuk University Institute of Health Sciences is valid.

**I commitment that I have submitted all documents completely.**

**Project Coordinator:**

**Signature:**