**ER7 – ETHICS: CONFIRMATION OF COMPLETION OF RESEARCH**

*Please submit this document in Word format*

1. **RESEARCHER’S DETAILS**

|  |  |
| --- | --- |
| Name |  |
| Student Number |  |
| Campus |  |
| Programme |  |
| Email |  |
| Phone number |  |
| Title of the research report |  |

1. **SUPERVISOR OR SUPPORTING MEMBER OF ACADEMIC STAFF**

|  |  |
| --- | --- |
| Name |  |
| Email |  |

1. **ISSUES THAT AROSE DURING THE CONDUCT OF THE RESEARCH**

Please indicate below any issues, concerns or difficulties which arose during the conduct of your research. This should include information relating to any research which was conducted outside the permission granted by the Ethics Committee.

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1. **CONFIRMATION THAT RESEARCH HAS BEEN COMPLETED**

|  |  |
| --- | --- |
| Please sign and date this form below to confirm you have completed the research and that the research was conducted *in accordance with the permission granted by the Ethics Committee* | |
| **Signed:** | **Date:** |

**Version history**

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| --- | --- | --- | --- |
| Version | Amended by | Revision summary | Date |
| V1.0 |  | Publication |  |
| V1.1 | Deputy Academic Registrar and Senior Quality Officer | Review | April 2020 |