



Research Ethics Committee

RESUBMISSION FORM

REC Form No.	1.9
Version No.	Ø
Date of Effectivity <i>(to be provided by REC)</i>	

General Information

*Title of Study			
Version number/date			
*REC Code <i>(To be provided by REC)</i>		*Study Site	
*Name of Researcher		Contact Information	Tel No:
			*Mobile No:
*Co-researcher/s <i>(if any)</i>			Fax No:
			*Email:
*Institution of researcher			
*Address of Institution			

REC Recommendations	Response of Researcher	Section and page number of revisions

Signature of Researcher: _____

Note: Researcher must **PRINT** the form and place fresh signature (use blue ballpoint pen) above. **DELETE** this note in the actual Form..

Date: _____