



(Annexure 2)

## Application Form for Exemption from Review

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(Name of the Institution)

EC Ref. No. (For office use):

Title of study: .....

.....

..... Principal

Investigator (Name, Designation and Affiliation): .....

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1. Choose reasons why exemption from ethics review is requested<sup>14</sup>?

- i. Research on data in the public domain/ systematic reviews or meta-analyses
- ii. Observation of public behavior/ information recorded without linked identifiers and disclosure would not harm the interests of the observed person
- iii. Quality control and quality assurance audits in the institution
- iv. Comparison among instructional techniques, curricula, or classroom management methods
- v. Consumer acceptance studies related to taste and food quality
- vi. Public health programmes by government agencies<sup>15</sup>
- vii. Any other (please specify in 100 words): .....

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.....

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Signature of PI: ..... 

dd	mm	yy
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Comments of EC Secretariat: .....

Signature of Member Secretary: ..... 

dd	mm	yy
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<sup>14</sup>Select the category that applies best to your study and justify why you feel it should be exempted from review. For a detailed understanding of the type of studies that are exempt from review, refer to National Ethical Guidelines for Biomedical & Health Research Involving Human Participants 2017, Page 51 Table 4.2.

<sup>15</sup>Such as programme evaluation where the sole purpose of the exercise is refinement and improvement of the programme or monitoring (where there are no individual identifiers)