

INSTITUTIONAL ETHICS COMMITTEE (IEC)

Seth G. S. Medical College and KEM Hospital, Mumbai.

Annexure 6 AX 06/SOP 05-A/V 7 Document Receipt Form for initial review

IEC No. of the Project:		Project	Project Submitted date:	
Project Title		·		
Principal Investigator				
Department				
Communication with the IEC E-mail address:				
	Phone No.:			
For office use only				
Documents submitted		e, will submit on		
Documents to be subm	itted	nical trial	Check what documents are received later on.	
later	agreement	with final	$\hfill\Box$ final signed clinical trial agreement with	
	budget allocat	tion	final budget allocation	
	☐ informed cor	nsent form	\square informed consent form (Local 3 rd	
	(Local 3 rd	Vernacular	Vernacular language)	
	language)		□ DCGI	
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	☐ Other sites EC	permission	☐ Others	
	☐ Others			
Received by (Name	and			
signature with date)				

Current Contact Details:

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