**Research Proposal Format**

Institutional Review Committee (IRC)

Rapti Academy of Health Sciences, Ghorahi, Dang

Please download the “word” version of IRC PROPOSAL FORMAT, complete by inserting relevant information in the blank space below.

1. The text of the proposal is single-spaced, uses a 12-point font, Times New Roman font.
2. Do not leave information blank, write YES, NO or NA (not applicable)
3. Do not modify the proposal format.
4. Electronic submission is must (irc-rahs@rahs.edu.np)
5. Consent form, Data collection tool, Proforma, Conceptual Framework, and Work Plan can be attached separately.
6. To avoid preliminary rejection, please go through the proposal in detail, follow it strictly and prepare your proposal accordingly.
7. Heading or sentence with \* mark is mandatory

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| --- | --- | --- |
| **Checklist to upload the documents for research proposal submission** | | **YES/ NO/ NA** |
| 1 | Updated Curriculum Vitae with photo of Principal Investigator and co-investigators\* |  |
| 2 | Cover letter by Principal Investigator\* |  |
| 3 | COI Declaration by each investigator\* |  |
| 4 | Approval letter from concern authority\* |  |
| 5 | Research Proposal\* |  |
| 6 | Data Collection Tool\* |  |
| 7 | Flow chart\* |  |
| 8 | Informed Consent Form |  |
| 9 | Assent Form |  |
| 10 | Work Plan\* |  |

\*Mandatory document

|  |
| --- |
| Financial Details |
| Human Resource Cost: |
| Field Cost: |
| Laboratory Cost: |
| Data Management Cost: |
| Report Writing and Dissemination Cost: |
| Logistic Management Cost: |
| Monitoring and Evaluation Cost: |
| Miscellaneous Cost: |
| Total Budget of the Research: |
| Ethical Approval Cost (NA for student): |
| Is This Funded Research? Yes/ No, If Yes Please Specify. |
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| --- |
| **RESEARCH TITLE** |
|  |
| INVESTIGATORS DETAILS |
| PRINCIPAL INVESTIGATOR  Name:  Affiliation:  Email:  Contact Number: |
| CO-INVESTIGATOR  Name:  Email:  Contact Number: |
| CO-INVESTIGATOR  Name:  Email:  Contact Number: |
| CO-INVESTIGATOR  Name:  Email:  Contact Number: |
| CO-INVESTIGATOR  Name:  Email:  Contact Number: |

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| Summary of the Proposal Maximum words 500\* |
|  |
| Background of the Study (Maximum words 300)\* |
|  |
| Rationale / Justification\* |
|  |
| Conceptual Framework |

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| General Objective\* |
|  |
| Specific Objectives\* |
|  |
| Research Hypothesis/ Research Questions\* |
|  |
| Study Variables\* |
|  |
| Research Method\* |
|  |
| Research Design\* |
|  |
| Description of Research Design\* |
|  |
| Study Site and its Justification\* |
|  |
| Study Population\* |
|  |
| Sampling Unit\* |
|  |
| Sample Size (Please enter Sample Size formula if applicable)\* |
|  |
| Number of Participants\* |
|  |
| Sampling Technique\* |
|  |
| Inclusion Criteria\* |
|  |
| Exclusion Criteria\* |
|  |
| Data Collection Technique\* |
|  |
| Data Collection Tool\* |
|  |
| Pretesting\* |
|  |
| Validity and Reliability of Tool\* |
|  |
| Potential Bias\* |
|  |
| Limitation of the Research\* |
|  |
| Plan for Supervision and Monitoring\* |
|  |
| Plan for Data Management and Analysis\* |
|  |
| Expected Outcome of Research Results\* |
|  |
| Plan for Utilization of Research Results\* |
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| **Ethical Consideration\*** |
| Are human participants required in this research? Yes/ No |
|  |
| How many participants are required for the research? |
|  |
| What is the frequency of the participant’s involvement in the research? |
|  |
| Responsibility of the research participants |
|  |
| Are vulnerable participants involved? |
|  |
| Are there any risks involved for the participants? |
|  |
| Expected benefits for human participants |
|  |
| How informed consent is obtained from the research participants? |
|  |
| Who is responsible for obtaining informed consent? |
|  |
| Is there anything being withheld from the research participants at the time the informed consent is being sought? |
|  |
| Does lab investigation required for the research? (Yes/No) |
|  |
| If Yes, is investigation going to be conduct in Nepal |
|  |
|  |
| Name of investigation lab |
|  |
| Type of sample/specimen |
|  |
| Detail description of laboratory and other Investigation |
|  |
| Main person involved in laboratory investigation |
|  |
| Is there going to be a transfer of any biological materials outside the country? |
|  |
| Does the study involve transfer of DNA sample outside the country? |
|  |

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| **References (Vancouver style)** |
|  |

Thank You