



No.:

Date:

RESEARCH ETHICS APPROVAL / DECISION

Ethical Approval No.:

Approval Statement

Following review of the research protocol described in this application, the Committee for Scientific Research Ethics has evaluated the proposed study according to applicable institutional, national and international ethical standards. Where approval is granted, the research must be conducted according to the approved protocol. Significant amendments require prior Committee approval. The Committee may request reports, require corrective action, or suspend or withdraw approval for non-compliance or unacceptable risk. Serious adverse events and significant protocol deviations must be reported promptly. osafety or regulatory authorization.

Prof. Dr. Monyer A. A. Al-Fatlawi
Dean, College of Veterinary Medicine

Electronic Signature

Date

SIGN

Committee Electronic Signatures

Committee Decision - Internal Use

- Approved

● Revision Required
- Approved with Conditions

● Rejected

Decision date

Valid from

Valid until

Approval

Asst. Prof. Dr. Amjed T. Alsultan
Committee Member

Electronic Signature

Date

SIGN

Asst. Prof. Dr. Ishtar Adnan Mohammed Alethari
Committee Member

Electronic Signature

Date

SIGN

Asst. Prof. Dr. Dhama Kadim Alsallami
Committee Member

Electronic Signature

Date

SIGN

Prof. Dr. Ali H. D. Janabi
Committee Chairman

Electronic Signature

Date

SIGN

Applicant / Principal Investigator Information

Full Name (PI or Corresponding author) *

Affiliation (with Country) *

Project Name *

Applicant Contact and Confirmation

Email address *

Phone No. *

Applicant confirmation signature *

SIGN

Click to sign electronically

Project Information

Project Type *

☐ Experimental Study	☐ Field Study
☐ Survey Study	☐ Molecular Study
☐ Clinical Study	☐ Epidemiological Study
☐ Other	

If Other, specify:

Project Expected Dates *

Start Date (DD/MM/YYYY)	End Date (DD/MM/YYYY)	
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Project Location *

☐ College Laboratory	☐ Farm / Field
☐ Hospital / Clinic	☐ External Institution
☐ Other	

Specific site / institution / city:

Study Scope Screening

☐ Living human participants	☐ Human samples/records/data
☐ Questionnaire/interview	☐ Living vertebrate animals
☐ Living invertebrates	☐ Fish/aquatic animals
☐ Microorganisms/biological hazards	☐ Environmental/field sampling

Complete the dedicated Human and/or Animal sections later in this form when applicable.

Project Summary

Short project summary / rationale *

Study Aims, Objectives and Design

Study Aims & Objectives *

Aim

Specific Objectives

Study Design *

Experimental	Observational
Cross-sectional	Case-control
Cohort	Laboratory-based
Field-based	Retrospective
Randomized Controlled Trial	Other

If Other, specify:

Control/comparator group (if applicable)

Study duration / follow-up

Methods Overview

Provide the main procedures, interventions/exposures, measurements and sampling schedule.

Investigators / Participants and Sample Size

Investigators / Participants *

Single investigator	Team (2-5)
Team (>5)	Multi-institution collaboration
Students involved	Technicians involved
Other	
Research team / collaborator names and roles:	

Sample Size & Collection *

< 20	20-50
51-100	> 100
Other	
Exact proposed sample/participant/animal number:	
Sample size justification / power / replication basis:	

Sampling / Group Allocation

Number of groups / cohorts / treatment arms	Number per group
Sampling / recruitment strategy	
Randomization / allocation method (if applicable)	

Sample Collection

Sample Collection Method *

- Blood sampling

Swab collection

Environmental sampling

Other
- Tissue sampling

Stool/urine collection

Questionnaire/interview

If Other, specify:

Describe collection frequency, volume/amount and handling:

Blood Collection Type

- Tail vein

Heart puncture (terminal)

Cephalic vein

Orbital sinus
- Jugular vein

Wing vein (poultry)

Saphenous vein

Other

Other / species-specific site:

Volume / frequency:

Specimen Handling and Storage

Collection container / preservative

Storage temperature

Transport / chain-of-custody procedure

Final disposition of samples

Data Collection Methods and Data Analysis

Data Collection Methods

Laboratory tests	PCR/Molecular
Biochemical assays	Imaging
Interviews	Surveys
Observational	Other

Laboratory / assay / instrument details:

Data Analysis

Descriptive statistics	ANOVA
Regression	Chi-square
SPSS	R software
GraphPad	Bioinformatics tools
Other	

Planned statistical/data analysis and significance threshold:

Data Quality and Reproducibility

Quality control / calibration / positive-negative controls / replication:

Missing data / exclusions / outlier handling:

Data access / responsible person:

HUMAN STUDIES ONLY - Participants, Recruitment and Risk

Human Study Applicability *

- ☐ Yes - the study involves human participants, human samples, records or identifiable data
- ☐ No - this section is not applicable

Participant Population

Population / source

Expected number

Age range

Recruitment location

Inclusion criteria

Exclusion criteria

Ethical Considerations (Human Studies Only)

No risk

Minimal risk

Moderate risk

High risk

Other

Describe foreseeable physical, psychological, social, privacy or other risks:

Recruitment and Vulnerability

Children/minors

Pregnant women

Patients dependent on investigator

Students/employees subordinate to investigator

Impaired decision-making capacity

None

Other

Recruitment process and safeguards:

HUMAN STUDIES ONLY - Consent, Confidentiality and Benefits

Risk Mitigation

Monitoring

Safety guidelines

Protective equipment

Immediate withdrawal option

Counseling available

Not applicable

Other

Informed Consent *

Written consent

Verbal consent

Guardian consent

Waived consent

Not applicable

Other

Consent process / waiver justification:

Confidentiality Measures *

Anonymized data

Coded data

Password-protected

Restricted access

Secure digital storage

Other

Data storage location / access / retention period:

Expected Benefits *

Direct benefit

Scientific knowledge

Social/health benefit

No direct benefit

Other

Conflict of Interest *

None

Funding-related

Institutional collaboration

Supervisor-student relation

Other

If present, describe and state how it will be managed:

ANIMAL STUDIES ONLY - Species, Numbers and Justification

Animal Study Applicability *

- ☐ Yes - the study involves living animals, fish or invertebrates
- ☐ No - this section is not applicable

Animal Species *

Rats	Mice
Rabbits	Poultry
Cattle	Sheep/Goats
Fish	Dogs/Cats
Wildlife	Invertebrates
Other	
Common name	Scientific name

Animal Numbers and Characteristics

Total number	No. per group	Sex	Age / stage
Weight range (if applicable)		Source of animals / organisms	
Scientific justification for number of animals:			

Potential Risks

No risk	Minimal risk
Moderate risk	High risk
Other	

Justification For Animal Species Use *

ANIMAL STUDIES ONLY - Housing, Procedures and Pain Management

Housing & Care *

Standard cages	Aquatic tanks
Farm housing	Controlled environment
Isolation room	Other

Housing details (temperature, photoperiod, density, water quality, food, acclimatization):

Procedures / Interventions *

Blood sampling	Drug administration
Surgery	Behavioral tests
Imaging	Injections (IM/SC/IP/IV)
Oral gavage	Exposure/challenge
Whole body tissue	Other

Procedure details / frequency / duration:

Pain & Distress Management *

None expected	Mild discomfort
Analgesics provided	Anesthesia used
Close monitoring	Humane endpoints defined
Other	

Monitoring frequency / distress scoring / action threshold:

Anesthesia Used *

Isoflurane	Ketamine/Xylazine
Propofol	Local lidocaine
MS-222	Eugenol
Not used	Other

Dose / concentration / route (if applicable)

ANIMAL STUDIES ONLY - Drug Administration, Endpoints and Euthanasia

Drug Administration Type *

Oral gavage	Intramuscular
Subcutaneous	Intravenous
Intraperitoneal	Topical
In feed/water	Other

Substance / dose / frequency / duration (if applicable):

Endpoints *

Weight loss criteria	Physical condition score
Behavioral signs	Ataxia/weakness
Organ failure signs	Inability to eat/drink
Moribund state	Other

Define objective humane/scientific endpoint criteria:

Euthanasia Method *

CO2 inhalation
Overdose of anesthetic
Cervical dislocation (small rodents only)
Stunning followed by bleeding/slaughter (farm animals)
MS-222 overdose (fish)
Potassium chloride (under anesthesia)
Other

Full euthanasia procedure / agent / concentration / confirmation of death:

Adverse Events / Emergency Action

Describe immediate action if unexpected morbidity, mortality, severe distress or protocol deviation occurs:

Alternatives Considered, 3Rs and Research Safety

Alternatives Considered *

None available

Reduction techniques used

Refinement applied

Replacement attempted

In vitro alternatives explored

Computer modeling considered

Other

Other / explanation:

3Rs Justification (for applicable animal studies)

Replacement - why non-animal methods cannot fully meet the objectives:

Reduction - how the minimum scientifically valid number will be used:

Refinement - measures to minimize pain, distress and adverse effects:

Biosafety / Biological Material (if applicable)

Pathogenic/potentially pathogenic microorganisms

Clinical isolates

Recombinant DNA/GMO

Human biological material

Animal biological material

Cell lines

Hazardous chemicals

Not applicable

Containment / PPE / decontamination / waste disposal / exposure response:

Applicant Declaration and Certification

Applicant Declaration *

☐ I declare that all information provided in this form is accurate and complete.

☐ I confirm that the study will be conducted according to the approved protocol and applicable ethical requirements.

☐ I understand that significant protocol changes require prior ethical review/approval.

Applicant / PI Electronic Signature

Printed Name *

Date Signed *

Applicant / Principal Investigator

Applicant certification

Click to add digital/electronic signature

Supervisor Certification (for student projects, if applicable)

Supervisor Name

Role / Title

Supervisor / Academic Adviser

Optional when applicable

Click to add digital/electronic signature

Internal Administrative Review

Administrative completeness: ☐ Complete ☐ Correction Required

Comments / required revisions:

Administrative reviewer

Review date

Final approval/decision and committee signatures are recorded on Page 1.