This appendix is **not necessary** if the Applicant has attached the statement by a competent ethics committee referred to in the Medical Research Act in to the application. In that case FHRB will lay it assessement on the existing documents.

## Name of the project

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## Applicant information

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| **Applicant (person in charge of the project)**  Name:  Address :  **Contact person (if other than applicant)**  Name:  Address : | Telephone number:  Email:  Telephone number:  Email: |
| **Organisation for the study (Signatory of Material Transfer Agreement (MTA))**  Name of organisation:  Organisation’s address:  Business ID: | |
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## Ethics review of the project

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| 1. Scientific rationale of the proposed project (expected scientific benefits, rational of a necessity of the project). 2. The reasoning for selected research methods. 3. Estimation of risks and benefits to the patients with the same disease. 4. Possibility to clinically relevant incidental findings, how the reporting of these findings to FHRB is planned to carry out? |
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## 8. Signature

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| **Principal investigator**  Signature:  Printed name: | Date and place: | |
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