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| **ENDORSEMENT**  *This section should be signed by the administrative authority legally empowered to sign on behalf of the* School/Department/Institution*. This section is required only for initial submission.* | | |
| STUDY PROTOCOL TITLE: |  | |
| Principal Investigator: |  | |
| \* Please tick [ ̸ ] in the following boxes.  [ ] I confirm that this application has been peer reviewed.  [ ] I have checked and confirmed that all the comments made during the peer review have been addressed by the researchers.  [ ] I have read this Application and agree that this research will be implemented under the supervision of this School/Department/Institution in accordance with the conditions of approval by the JEPeM-USM. I also confirm that the Principal Investigator is a student or staff in this institution. | | |
| Issuing School/Department/Institution: |  | |
| Name of Endorsing Official School/Department/Institution: |  | |
| Signature and Stamp: | | Date of Signature: |