**IRB SYNPOSIS PROFORMA FOR UNDRGRADUATE STUDENTS**

**To,**

**The Convener, IRB-SIBAR,**

**Takkellapadu, Guntur.**

**Project title:**

**Department of:**

**Purpose of the study:**

**Principal Investigator:**

 **Name:**

 **Affiliation:**

 **Email id:**

 **Mobile no:**

**Guide (Co-investigator) name:**

 **Affiliation:**

 **Email id:**

 **Mobile no:**

**Approval from any other IRB/ IEC regulatory committee (if any)**

**We shall follow the Good Clinical Practice guidelines and the approval protocol in conducting the research project. Further, we declare that any sort of inclusion of text or pictorial material which amounts to plagiarism will be avoided. In case of any serious adverse events, I / We shall bring it to the notice of IRB/ IEC – SIBAR**

**Signature of Investigator Signature of Guide**

 **Signature of the Head of the Department**

 **SYNOPSIS OF THE PROPOSAL**

**Title:**

**Principal investigator:**

**Department of :**

**Introduction:**

**Review of Literature:**

**Aim:**

**Objectives:**

**Materials and Methods:**

**Inclusion and Exclusion criteria:**

**Potential risks and Benefits:**

**Statistical analysis:**

**References:**