**University of the Witwatersrand, Johannesburg**

**Human Research Ethics Committee (Non-Medical), Progress Report**

A condition of receiving a protocol number from the HREC (Non-Medical) is that a progress report is supplied at regular intervals for the duration of the ethics clearance certificate (3 years duration or until the project is completed and/or submitted). **For Minimal and Low Risk studies, this report is due annually on 31 December. For Medium and High Risk studies, this report is due twice annually on 30 June and 31 December. PLEASE BE AWARE OF THIS REQUIREMENT.** If progress reports are not received, the project will be considered to be in violation of its ethics clearance, and the clearance will be suspended with immediate effect.

*Please complete this progress report form and email to* *Shaun.Schoeman@wits.ac.za* *at the appropriate intervals for your project, according to the risk level stated on your clearance certificate.*

**TO BE COMPLETED BY THE RESEARCHER:**

|  |  |
| --- | --- |
| Ethics clearance number (as given on the clearance certificate) |  |
| Date of clearance approval (as given on the clearance certificate) |  |
| Researcher name |  |
| Project title |  |
| Supervisor’s name (if the researcher is a student) |  |
| Project risk level determined by the Ethics Committee (as given on the clearance certificate) |  |
| Period of time which this progress report covers (give precise dates) |  |
| Brief description of your progress in the project over this time period |  |
| Did you encounter any ethical issues during this period? (please circle) |  YES / NO |
| If YES, brief description of these ethical issues and how these were managed/resolved |  |
| Was any distress experienced by participants? If yes, please elaborate |  |
| Is the study now completed? (please circle) |  YES / NO |

**TO BE COMPLETED BY THE SUPERVISOR:**

*If these activities were not applicable during this part of the project, please indicate NA.*

|  |  |
| --- | --- |
| Where relevant, please describe any oversight or monitoring of the data collection process that you have done, e.g. did you coach the student in data collection procedures, did you visit the data collection site?  |  |
| Where relevant, please describe any oversight or monitoring of the data analysis process, e.g. did you see the raw data, can you confirm that the student completed their own collection and analysis of the data? |  |

**By signing this form, the researcher and supervisor of this project state that the above responses on project ethics and monitoring are correct and true.**

|  |  |  |  |
| --- | --- | --- | --- |
|  | Date | Name | Signature\* |
| Student |  |  |  |
| Supervisor  |  |  |  |

\* Electronic signature is permitted

For office use:

|  |  |
| --- | --- |
| Date the progress report was received |  |
| Comments from chair |  |
| Signature of chair |  |
| Date approved  |  |

Updated March 2024