

Form 2: Application Form for Fisheries and Aquaculture Research Ethical Clearance



**THE UNITED REPUBLIC OF TANZANIA
MINISTRY OF LIVESTOCK AND FISHERIES
TANZANIA FISHERIES RESEARCH INSTITUTE
(TAFIRI)**



**APPLICATION FORM FOR FISHERIES AND AQUACULTURE RESEARCH
ETHICAL CLEARANCE**

1. Applicant Personal Particulars

Surname

First Name

attach applicant's
passport size photo

Title (Mr./Mrs./Ms./Miss./Prof./Dr.) (*delete whichever is not applicable)

Nationality.....

Passport Number / National ID Number* (*delete whatever is not applicable)

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Date of birth.....

Highest academic qualification.....

Institutional Affiliation

Town/City.....

Region/Province/State.....

Country.....

Permanent address.....

Phone

Email address.....

Contact address while in Tanzania (Foreign Researchers)

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2. Title of proposed research project

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3. Theme

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4. Purpose of research: Institutional Activity / Contractual Research / R&D /
 To attain a degree PhD/MSc/B.Sc/BA/ others (specify) (delete the
 inapplicable).....

5. Research objectives

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6. Field sites where research will be conducted

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7. Duration of research (months)

8. Expected start date (Day/Month/Year)

9. Expected end date (Day/Month/Year)

10. Source of funds

11. Which live aquatic fauna/flora species will you focus on during your
 research?

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12. What is the status of the species under the IUCN Red List?

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13. Name of the species and how many live aquatic fauna do you expect to include (Species name & Number of specimens)

Species names: and numbers in brackets

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14. Have you ever obtained a Fisheries and Aquaculture Ethical Clearance
Yes/No

15. If Yes in 6 above explain briefly

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16. Will you have a focus on any biological material? Blood /DNA extract, or any other materials during the research? Yes / No

17. If yes, how do you intend to treat/sacrifice the aquatic fauna?

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18. How do you intend to dispose of the materials?

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19. I agree to abide by the data transfer agreement (DTA) and material transfer agreement (MTA) of TAFIRI. Yes/No...

20. References (provide names and addresses /telephone number/email of two referees, one of whom should be based in Tanzania)

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21. Name and address of local collaborator (for foreign
researchers).....
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22. Declaration: I
Declare that the information provided herein is true and I will be
accountable for any information that will be found to be false or untrue.

Signature of applicant

Date (Day/Month/Year)