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| **Health and Safety Compliance Declaration for Ethics Applications** | | | |
| Sponsoring School/ Faculty | |  | |
| Title of the Research Project | |  | |
| Applicant | |  | |
| Who is providing health and safety supervision for this project  (DoS/ Supervisor if a Student application; Applicant if staff application) | |  | |
|  | | | |
| The person providing health and safety supervision must complete the following declaration:  (Please tick the box)  I am satisfied that the health and safety hazards and risks associated with this project have been identified and a suitable and satisfactory risk assessment has been conducted to identify the control measures necessary to ensure statutory compliance and compliance with the University health and safety policy. I am aware that if I have any queries or the project is considered to be high risk I can consult with the University Health and Safety Office to provide an opportunity to comment or provide advice to the project team.    Health & Safety Office consulted: Yes  No – not considered to be necessary | | | |
| **Please give the Risk Assessment Reference Number**  **(please access the link** [**HERE**](https://portal.roehampton.ac.uk/information/healthandsafety/Pages/risk-assessment.aspx) **to find out who to contact to obtain this)** | | |  |
| Date Risk assessment completed and signed | | |  |
| Is a copy of this risk assessment attached / being submitted with the application? | | |  |
|  | | | |
| Approved by:  (DoS or Supervisor if a student application; Applicant if a staff application) | Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
| Name, Job Title & Capacity in which signing (DoS/ Supervisor/ Applicant) |  | | |
| Date |  | | |
| Comments: | | | |
| This is associated with an  Original Application  Amendment | | | |

*All sections of this form must be completed*

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| ***(For office Use Only)***  *Ethics Application Reference:*  *Date Received by Ethics Officer:* |

*July 2021*