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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*