

**Ethics Confirmation Form**

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| **Personal Information:**Full Name:Email address:Telephone number: |

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| **Name of Programme:**(e.g. MPhil in African Studies): |

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| **Supervisor Details:** Name:Department Email address: |

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| **Dissertation Title:** |

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| **Description of Research:** (Please explain why ethical approval is not necessary): |

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| **Student Signature:****Date:** |

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| **Supervisor Signature:****Date:** |

**Once completed and signed, please send to your programme administrator**