



STUDENT'S REQUISITION FOR NO OBJECTION CERTIFICATE TO PURSUE RESEARCH

[TO BE APPLIED TO THE OFFICE OF THE DEAN-RAKCOMS BY THE PRINCIPAL INVESTIGATOR,
UPON APPROVAL OF PROPOSAL BY THE UNIVERSITY RESEARCH & ETHICS COMMITTEE]

Date: ___/___/20___

To
The DEAN-RAKCOMS

Dear Sir,

I Mr. / Ms. _____ hereby kindly request you to issue
me/us a 'No Objection Certificate' as per the details mentioned below:

'NOC' to be addressed to **Head of the Institution/To Whomsoever It May Concern**

Write the address of the hospital/health institution:

Title of the Study/Research: _____

Period of Study/Research: _____

Name/s of Faculty Supervisor/s: _____

Signature/s of Faculty Supervisor/s: _____

Signature of Principal Investigator

College ID No.:

--	--	--	--	--	--	--	--	--	--

Mobile No.:

0	5								
---	---	--	--	--	--	--	--	--	--

Note for Principal Investigator:

In case of Co-Investigator/s being included in the study/research, kindly mention their details in the enclosed format.

FOR OFFICE USE

Executive Assistant, RAKCOMS to process the request.

**DEAN
RAKCOMS**



CONFIRMED LIST OF STUDENTS PARTICIPATING IN RESEARCH STUDY AS A GROUP

[ENCLOSURE TO STUDENT'S REQUISITION FOR NO OBJECTION CERTIFICATE TO PURSUE RESEARCH]

Name of Principal Investigator:

S.No.	Name of Student	College IDNo.	Year of Study

List of Co-investigators [Max 7]:

S.No.	Name of Student	College ID No.	Year of Study

Name/s of Faculty Supervisor/s

Signature of Principal Investigator

Signature/s of Faculty Supervisor/s