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 **Human Research Ethics Committee**

**Complaints Form**

Kindly complete this form by providing a detailed description of the complaint. Please send this completed form to research@lifehealthcare.co.za

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| **Your contact details** |
| Name:  | Email:  | Phone number and best time for Human Research Ethics Committee to contact you: |
| **Details of research project you wish to make a complaint about** |
| Name of researcher (if known): |  |
| Title of research project (if known), or topic of the project: |
| Insert the name of the site where this study is being conducted: |
| **Nature of complaint (please be as specific as you can)** |
|  |
| Your signature:  | Date:  |

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| *Office use only* |
| **Description of action taken by Chairperson** |
|  |

**Chairperson**

**Life Healthcare Human Research Ethics Committee**