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| **Approval Statement Investigator's profile** | **Name**:  **Place of work:** Institute for Research in Fundamental sciences (IPM)  **Phone number:**  **Email address:** | | | |
| **Research Title** |  | | | |
| **Research Category** | **Human research:**  Healthy individuals 🞏 Patients 🞏  Psychophysics: 🞏 EEG: 🞏 fMRI: 🞏 Others: 🞏  **Animal Experiment:**  Behavioral study: 🞏 Invasive Rec.: 🞏 Non-invasive Rec.: 🞏  **Surgery**:  Headpost:🞏 Recording Chamber:🞏 Craniotomy:🞏 Others:🞏  **Animal species:**  Rat:🞏 Cat:🞏 Non-human primates:🞏 Others:🞏  Awake experiment:🞏 Anesthetized experiment:🞏 | | | |
| **Ref. No.** | **Ref. No.SCS.** |  | **Ref. NO.SCS.REC.** |  |
| **Date** | Receipt date |  | Meeting date |  |
| **Decision** | Approved 🞏 Revision 🞏 | | | |
| **Approval Statement** |  | | | |

« **SCS Research Ethics Committee of IPM**»