|  |  |  |
| --- | --- | --- |
|       | **National Committee of Bioethics** |  |
| **Biological Samples Exportation Form (Human) 3.0** |

|  |
| --- |
| **Request for sending biological samples outside Kingdom of Saudi Arabia**  |
|       | Name of Estaiblshment :  |
|       | Location of Establishment :  |
|       | Regesitration Number: |       | Name of IRB :  |

|  |  |
| --- | --- |
|       | Title of Research : |
|       | Specaility :  |       | Name of PI : |
|       | Name of the Department : |
|       | Name of Establishment that samples will send to : |
|       | Country : |       | Adress : |
| [ ]  Research ([ ]  Clinical trail [ ]  Other )  | Purpose of sending samples outboard :  |
|       | Number of SFDA approval for clinical trail : |
| [ ]  Other Specifiy (     ) | [ ] Urine  | [ ] Saliva  | [ ]  Tissue  | [ ]  Blood  | Type of Specmien : |
|       |       |       |       |       | Number of Samples : |
|       |       |       |       |       | Amount of Samples (L/Kg) : |
|       | Port of Export : |
|       | The carrier company : |
| Note  | No | Yes |  |
|       | [ ]  | [ ]  | Have you read and understood the regulations of biological samples exportation, in the law and regulation of ethics of research on living creature , Article (6/4). |
|       | [ ]  | [ ]  | Can the test/s done inside the Kingdom of Saudi Arabia ? If yes, explain the reason of sending samples outboard:       |

* I, the principal investigator, attest to the correctness of the above information and pledge to provide the Local Ethics Committee with any changes once it occur and before I apply it.

Name:

Signature: Date:      /     /

|  |
| --- |
| For local ethics committee use only  |
| The above information has been verified, and it compliance with the Research Ethics law and regulations |
| Did the IRB approve the research proposal: [ ]  Yes [ ]  No  |
|  Date :   /  /      | Minutes Number :       |
| Note :       |
| Date :   /  /      | Signature:       | Chairman:       |

* National Committee of Bioethics must be notified with any approval from local ethics committee via these contact channels :
	+ - Fax : 0114813860
		- Email : bioethics@kacst.edu.sa