(Annexure 3)

CRC SUBMISSION CHECKLIST

 Name of Principal investigator:

|  |  |
| --- | --- |
| **DOCUMENT NAME** | **TICK (**  **)** |
| **Covering letter**(Forwarded by the HOD) |  |
| **CRC Form**(Completely filled) |  |
| **Letter of intent from the collaboration institute/agency** |  |
| **Justification of collaboration**  |  |
| **HMSC/BioRRAP**(If applicable) |  |
| **Study protocol**(Including signatures of all Investigators) |  |
| **Soft copy via e-office to Dean (Research)** |  |
| Any other document(s): |  |