**Vote Summary Form**

1. **Details of Application:**

|  |  |  |  |
| --- | --- | --- | --- |
| Name of Applicant | Click here to enter text. | | |
| Department/College | Department of Click here to enter name in Foundation Program | | |
| Type of Application | Choose type of appliation | | |
| Title of Research | Click here to enter text. | | |
| Journal Title *(If Applicable)* | Click here to enter text. | | |
| Conference Title *(If Applicable)* | Click here to enter text. | | |
| Place of Conference *(If Applicable)* | Click here to enter text. | | |
| Start Date | Click here to enter a date. | End Date | Click here to enter a date. |
| Application Received on | Click here to enter a date. | | |

1. **Details of Votes:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name** | **Department** | **Proceed to URB (Yes/No)** | **Signature** |
| Click here to enter text. | Click here to enter text. | **Yes/No** |  |
| Click here to enter text. | Click here to enter text. | **Yes/No** |  |
| Click here to enter text. | Click here to enter text. | **Yes/No** |  |
| Click here to enter text. | Click here to enter text. | **Yes/No** |  |
| Click here to enter text. | Click here to enter text. | **Yes/No** |  |
| Click here to enter text. | Click here to enter text. | **Yes/No** |  |
| Click here to enter text. | Click here to enter text. | **Yes/No** |  |
| Click here to enter text. | Click here to enter text. | **Yes/No** |  |

1. **Final Vote:**

|  |  |
| --- | --- |
| Final Vote |  |
| Decision Taken in FPRC Meeting Dated | Click here to enter a date. |
| Signature of FPRC Chair |  |