



SRI DEVARAJ URS ACADEMY OF HIGHER EDUCATION & RESEARCH

SRI DEVARAJ URS MEDICAL COLLEGE

Tamaka, Kolar

ETHICS COMMITTEE



Application No: / /2023

ETHICS COMMITTEE REVIEW FORM

Accepted – (Yes ___ / No ___), Dt. _____

Reviewer Comments	Response By Applicant (Mention the modified changes page numbers)
	<p>Signature of Applicant Date:</p>

***Note:** Submit the suggestions made by the committee within five days



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