AN4-V1/KSSSCISOP 03/V1

Undertaking by the Principal Investigator

1.	Name of the project:	
2.	Name, designation and Department of the principal investigator:	
3.	Other members of the research team:	
4.	Name and address of any other medical college, hospital or institution where parts of the study will bedone:	
5.	Number of ongoing projects/clinical trials in which you arePI:	
a.	Number of sponsored clinical trials with active enrolments:	
b.	Number of sponsored clinical trials with follow up only:	
c.	Total number of ongoing projects (any) (Projects+a+b):	
1.	I confirm that I will initiate the study only after obtaining all regulatory clearances.	
	I confirm that I will initiate the study only after obtaining all regulatory clearances. I will not implement any deviation from the approved protocol without prior consent of the sponsor nature and it will be intimated to the IEC at the earliest.	
2.	I will not implement any deviation from the approved protocol without prior	
2.	I will not implement any deviation from the approved protocol without prior consent of the sponsor nature and it will be intimated to the IEC at the earliest. I confirm that the Co-PI and other members of the study team have been informed about their obligations and are qualified to meet them.	

6. I will inform the IEC and the sponsors of any unexpected or serious adverse event at

the earliest and definitely as per the national regulatory guidelines.

- 7. I will maintain confidentiality of the identity of all participating Participants and assure security and confidentiality of study data.
- 8. I and my colleagues will comply with statutory obligations, requirements and guidelines applicable to such clinical studies.
- 9. I will inform IEC if there is change in funding agency/status.
- 10. I will inform IEC of the date of starting the study within 2 weeks of initiation of the trial and submit annual progress reports and final report to Member Secretary, IEC within 4 weeks of the due date.

Signature of PI		
Name	Date	

Department_____