



UmNyango WezeMaphilo

1. Study Details	
1.1 Name of Applicant	
1.2 Contact Number:	
1.3 Study Title:	
1.4 Data collection period:	Start: End:
1.5 Research summary and how data was collected (answer should <b>not</b> be more than the space provided):	

Please note that this letter is not an approval to undertake a study, but a support letter from identified facility/district.  
i.e. the CEO/District Manager acknowledges to have been consulted on the study

2. Resources Required from Facility/Sub-district/Community		
2.1 Was this study presented internally?	Yes	NO
	When? Directorate/Districts represented:	
2.2 Was a proposal submitted to the department concerning this study?	Yes When?	No
2.3 Does the study have ethical clearance?	Yes Clearance Number:	NO
2.4 Were DOH Co – Authors engaged in this study	Yes How and when?	NO
How was data collected:		
2.5 Interviewing Patients/ participants at Facilities	Yes	NO
2.6 Interviewing Patients/ participants at Home	Yes	NO
2.7 Other, please specify:		
3 Resource flow/benefits to the Provincial Department		
3.1 This research is responsive to which National/Provincial/departmental priority/strategy/research agenda?  • State your response:		
3.2 Resource Flow (Are there benefits to Patients/community)	Yes	NO
	Please list: all potential remedial ideas emanated from research will be taken up for healthcare practice and policy	
3.3 Resource Flow (Are there benefits to Facility/District)	Yes	NO
	Please list: to create a linkage between all research stakeholders	
Signature of Applicant: _____ Date: _____		
To be signed by a Senior Manager/District Manager in the Department:  Supported/ Not Supported _____ _____ _____		
Name: _____ Date: _____		
Signature: _____		