

**BATANGAS MEDICAL CENTER
 RESEARCH ETHICS REVIEW COMMITTEE**

**LETTER OF APPEAL
 TO
 BATANGAS MEDICAL CENTER
 RESEARCH ETHICS REVIEW COMMITTEE**

DATE: mm/day/ year

To PI : Please bring all documents relevant to the activity during the scheduled meeting.





Title of study	
BATMCE RERC CODE:	
Principal Investigator:	
Date of Initial Submission:	
Date of Last Review:	
Sponsor	

Dear (Chairman):

(entity: PI, or Sponsor, or Institution) wish to appeal the following BATMC RERC decisions:

Specify RERC decision for appeal:	Indicate the points in question and provide justification for the request for reconsideration or repeal of the decision by providing evidences or corrective measures for a RERC CONSIDERATION.

PRINCIPAL INVESTIGATOR/SPONSOR/HEAD OF INSTITUTION

	<p>Republic of the Philippines Department of Health, Center for Health Development (CHD) IV-CALABARZON BATANGAS MEDICAL CENTER Batangas City ISO 9001:2015 CERTIFIED</p>  	
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 RESEARCH ETHICS REVIEW COMMITTEE**

<p><i>Received by: BATMC RERC personnel</i></p>	<p><i>NAME and SIGNATURE</i></p>
<p><i>DATE RECEIVED</i></p>	