



HEALTH RESEARCH ETHICS COMMITTEE 1 AND 2 PAYMENT INSTRUCTION: HEALTH/HUMAN RESEARCH

RECIPROCAL REVIEWS - 2025

(INFORMATION SHOULD BE TYPED)

Please submit this completed form and proof of payment (or internal requisition number) with your HREC application

SECTION 1: DETAILS OF APPLICANT/PRINCIPAL INVESTIGATOR		
Title, First name, Surname:	SU Number:	PROJECT ID NUMBER/ETHICS REFERENCE NO (HREC office use only)
University DIVISION or DEPARTMENT:		
SECTION 2: TITLE OF STUDY		
Title of Research Project:		
SECTION 3: FUNDING SOURCE (Please check [X] the relevant funding source and indicate funder and project budget)		
☐	A. NIH/US government funded research	
☐	B. Other international grant funded research (e.g. Wellcome Trust)	
☐	C. National grant funded research (e.g. NRF, MRC, CSIR, etc.)	
☐	D. Harry Crossley funded research (exempt from HREC review fees)	
☐	E. Research funded solely from SU departmental budget (exempt from HREC review fees)	
☐	F. Self funded research (exempt from HREC review fees)	
☐	G. Non-sponsored student research for degree purposes at Stellenbosch University (exempt from HREC review fees)	
FUNDER:		
TOTAL PROJECT BUDGET:		
SECTION 4: SUBMISSION FOR HREC REVIEW (Please circle/highlight the appropriate HREC fee for either section A + B: International grant <u>or</u> C: National grant)		
Submission for HREC review	HREC FEE	
	A + B	C
1. New application (research budget > R10million)	R16 885.00	R4 230.00
2. New application (research budget > R5million)	R11 155.00	
3. New application (research budget R1million to R5million)	R7 600.00	
4. New application (research budget R500,000 to R1million)	R3 975.00	R2 270.00
5. New application (research budget R100,000 to R500,000)	R2 040.00	R1 135.00
6. New application (research budget < R100,000)	940.00	R570.00
7. Extension / Roll-over study / Sub-study	940.00	R570.00
8. Annual re-certification / Progress report	940.00	n/a
9. Protocol amendment: Major (changes to study aims/methods/procedures)	940.00	R570.00

10. Protocol amendment: Minor (small changes that do not affect study design)	680.00	n/a
11. Informed consent amendment	680.00	R400.00
12. Additional investigator (per investigator)	485.00	n/a
SECTION 5: HREC PAYMENT <i>(Insert the amount you circled in Section 4 above)</i>		
..... Print Name	 Date	 Signature
		R..... Amount Paid

PAYMENT PROCESS:

Stellenbosch University applicants

1. Submit a completed and signed *Payment instruction form: health/human research* **AND** proof of payment/internal requisition number along with your HREC application for a new project, progress report, amendment etc.
2. Interdepartmental requisitions are payable to: **IDO00035 FMHS HREC Services**
3. Payment reference: **"Principal Investigator's surname and initials: Ethics reference number and Project ID"**
4. Research applications with outstanding HREC review fees will not enter the review process.

External applicants

1. Submit a completed and signed *Payment instruction form: health/human research* along with your HREC application for a new project, progress report, amendment etc.
2. You will receive an HREC invoice.
3. Payment reference: **"Principal Investigator's surname and initials: Ethics reference number and Project ID"**
4. Research applications with outstanding HREC review fees will not receive their HREC letter.

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