**Commitment for research conduct after protocol approval**

**The Institutional Review Board, Faculty of Nursing, Mahidol University**

 I am ………………………………………………as the principal investigator and

🞏 Instructor at the (institution’s name)……………………………………………

🞏 Researcher at the (institution’s name)………………………………………….

🞏 Master student in the department of …………………………………………

 Faculty of … ………………………University……………………………….

🞏 Doctoral student in the department of …………………………………………

 Faculty of … ………………………University……………………………….

 has submitted the research protocol title “…………………” I hereby certify that I will start to conduct the research after the project has approved from the Institutional Review Board, Faculty of Nursing, Mahidol University.

Signature

 (…………………………………)

 Principal investigator

 Date……………….

Signature

 (…………………………………)

🞏 Dean/Director of the institute

🞏 Direct superior authorized to approve the project

🞏 Thesis advisor

 Date……………….