



Māori Partnership Board, Capital & Coast DHB

RESEARCH ADVISORY GROUP – MĀORI (RAG-M)

Checklist for RAG-M Applicants

Please attach with your RAG-M application form.

Before emailing your application form, please check to make sure that all relevant information has been attached. Please send all attachments to ragm@ccdhb.org.nz.

If not applicable to the application write N/A (not applicable).

Please note: Incomplete applications may not be considered by RAG-M.

Item	Yes or N/A
RAGM application form	
All patient information and consent forms	
Documentation for collecting patient information	
Study protocol	
Ethics application form(s) / documentation	
Payment of fees <ul style="list-style-type: none">✓ <u>Internal researchers:</u> completed CCDHB funds transfer form✓ <u>External researchers:</u> fees payment form✓ <u>External researchers from Otago or Auckland University:</u> completed Purchase Order number form <p><i>Note: A RAG-M # will not be allocated until application has been submitted, so if you do not have one, please include study title in funds transfer / purchase order number forms.</i></p>	
Other documentation – please describe:	