RESEARCH PARTICIPANT'S TIME COMPENSATION TEMPLATE

Research study title: …….

Study Reference number……..

Investigator (s)……

Study site:……..

Time Compensation amount in the approved study informed consent form (UGX)……

S/N	Name of Participant	Amount Received (UGX)	Date	Signature	Telephone number

S/N	**Name of Participant**	**Amount Received (UGX)**	**Date**	**Signature**	**Telephone number**