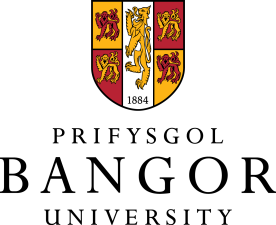
College of Arts, Humanities and Business



APPLICATION FOR APPROVAL BY RESEARCH ETHICS COMMITTEE

**RESEARCH PROJECT**

**NOTE:**

* **Data collection cannot begin without approval from the Research Ethics Committee or the School’s Ethics Officer as its representative.**
* **Once you have completed this form, you should discuss it with your supervisor and then email it, along with any relevant materials, to your School’s Ethics Officer, who will advise you further.**
* **Project approval will be significantly delayed if the application is incomplete, lacks detail, or was submitted during vacation periods.**

**Obtaining approval can take 4 – 6 weeks.**

**1 Researcher’s Details**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Staff:** | | Yes |  | | No |  | | **Student:** | | Yes |  | No |  |
| **If Student, please select from the below:** | | | | | | | | | | | | | |
| **Undergraduate** |  | | | **Postgraduate Taught** | | |  | | **Postgraduate Research** | |  | | |

|  |  |  |  |
| --- | --- | --- | --- |
| Forename: |  | Surname: |  |
| E-mail address: | |  | |
| School in which research is being conducted: | |  | |

**2 Project Information**

|  |  |
| --- | --- |
| Title of the research project: |  |
| **Proposed research start date:** |  |
| **Proposed research end date:** |  |

**3 Supervisor details** (if relevant)

|  |  |  |  |
| --- | --- | --- | --- |
| Title: |  | Full name: |  |
| E-mail address: | |  | |

**4 Aims and objectives of the research project**

|  |
| --- |
|  |

**5 Source of Research Funding (if any):**

|  |
| --- |
|  |

**6 Participants**

|  |
| --- |
| Describe the participant sample who will be contacted for the project and how many participants are you planning to recruit (e.g. 15-25 adult Welsh-English bilinguals). |
|  |
| How are you going to recruit subjects? Be as specific as possible. If applicable, please also indicate whether the necessary permissions have been obtained (e.g. from school headmaster). |
|  |
| **Note: You need to consider how you will consider anonymity of all participants.** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Will any of the participants be under the age of 18? | Yes |  | No |  |
| **If** **YES**, have ALL members of the research team who are collecting data from minors been checked by the Disclosure and Barring Service? | Yes |  | No |  |
| **Note: You need to show a copy of the DBS approval when submitting your ethics application.** | | | | |

|  |
| --- |
| **Potential Offense/Distress to Participants**.  Is there a possibility that participants will become distressed or offended as a result of your research? If so, how do you plan to mitigate their distress or offense? Justify why this offense or distress is necessary for your research. |
|  |
| **Note: You must state that all participants have the right to withdraw at any point.** |
| **Payments.**  In this section please specify if the participants/investigators are being paid and if so, state the payment source. |
|  |

**8 Research Tools**

|  |
| --- |
| Describe the research tools that will be used to elicit data from the sample  (e.g. tests, questionnaires, interviews, observation). |
|  |
| **Note: You should submit a copy of all tool(s) you intend to use (e.g. questionnaire/s) - where practical with this completed form** |

**9 Data storage**

|  |
| --- |
| Describe where, how and for how long sensitive data will be stored, and what security measures are in place to ensure the data is protected? |
|  |
| Describe who will have access to the data (and why)? |
|  |
| **Note: All research data should be stored on the University ‘M’ drive and or suitably encrypted laptop (if necessary please consult with IT support)** |

**10 Data publication**

|  |
| --- |
| Explain by what method it is expected that the data will be published - e.g. journal article, report for a public body - or whether it is intended to be used solely for a Bangor University assignment (e.g. dissertation). |
|  |
| **Note: Participants should be made aware of how the data will be managed and published. The information should be stated on the consent form.** |

**11 Research location**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Does the project involve research at sites other than Bangor University? | | | Yes |  | | No |  |
| **If NO then proceed to 12** | | | | | | | |
| **If YES then complete the following:** | | | | | | | |
| Name and address of non-Bangor University site | | | | | | | |
|  | | | | | | | |
| Details of contact person on non-Bangor University site: | | | | | | | |
| Full name: |  | Telephone | | |  | | |
| Post: | | | | | | | |
| Address: |  | | | | | | |
| E-mail: |  | | | | | | |
| Please list any additional external research sites beyond the first: | | | | | | | |
|  | | | | | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Has written agreement been given by the appropriate person/body on the non-BU site for the research to be conducted? | Yes |  | No |  |
| **Note:**  **Research on sites other than Bangor University may NOT be**  **started until such written agreement has been given AND copies of that agreement submitted to the CAHB Research Ethics Committee**. | | | | |

**12 Ethical considerations**

|  |
| --- |
| Make a clear and concise statement of the ethical considerations raised by the project (e.g. preservation of anonymity, safe data storage, voluntary participation, etc). Explain how you intend to deal with each of the ethical considerations throughout the duration of the project. |
|  |

**13**  **Consent form and participant information sheet**

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| --- |
| Please attach a copy of;   * The consent form * The participant information sheet.   A standard CAHB Consent Form is available on our webpage. We suggest you add detailed information on how subjects can withdraw from the study. The participant information sheet should describe, in 1-3 paragraphs, the aims of the study. |

**14 Declaration**

I confirm that the information in this form is accurate to the best of my knowledge.

|  |  |
| --- | --- |
| Signature of Researcher: |  |
| Print name: |  |
| Date of submission: |  |

**Supervisor’s agreement (required if the researcher is a student):**

I confirm that I have reviewed this form and all ancillary materials (e.g. participant information sheet, consent form) and that I will notify the CAHB Research Ethics Committee in case of unethical conduct.

|  |  |
| --- | --- |
| Signature of Supervisor: |  |
| Print name: |  |
| Date: |  |