EC1/2020

GLASGOW CALEDONIAN UNIVERSITY

**School of Computing, Engineering & Built Environment**

**Applications for Ethical Approval for Research**

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| 1. **Reason for Submission to Committee (tick as many as appropriate)** 2. minor method or procedure 3. minor extended method or procedure 4. major invasive research method or procedure involved 5. submission to School Committee 6. to place an appeal before the University Committee subsequent to School refusal 7. failure to reach agreement at School level 8. School seeks advice and/or guidance | | | | |  | | |
| 1. **School:** | | | | | | | |
| 1. **Category of Researcher**   Staff PostgraduatePost-Doctoral Contract  Other |  | Temporary |  | Permanent | |  | |
| 1. **If contract staff please give date of termination of contract:** | | | | | | | |
| 1. **Researcher’s Name:**  Dean of School:  **Director of Studies (where appropriate):** | | | | | | | |
| 1. **Title of Study:** | | | | | | |
| 1. Outline the aims and objectives of the study: | | | | | | |

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| 1. **Research Participants:** 2. Approximate numbers: 3. Inclusion criteria: 4. Recruitment method: |
| **9 (a). Methods/Procedures to be used – non-invasive procedures**  *(for definition see guidelines paragraph 2.3.2(a))*   1. Non-invasive Procedure: 2. Non-invasive Procedure: 3. Non-invasive Procedure: 4. Non-invasive Procedure: 5. **Name of Approved Supervisor (if the researcher is a student)** |
| **10 (a). Methods/Procedures to be Used – Minor invasive research method**  *(for definition see guidelines paragraph 2.3.2 (b))*   1. Minor Invasive Method: 2. Minor Invasive Method: 3. **Name of Approved Supervisor (if the researcher is a student)**   k |
| 1. **Implications of any of the above non-invasive/ minor invasive procedure(s):**   (Outline any stress or discomfort to research participants which may be involved in any of the above minor/extended minor procedures which have not been approved) |
| 1. **Major Invasive research methods and procedure(s):** *(for definition see guidelines paragraph 2.3.2(c)*   (Please describe each procedure and state number of times it is to be performed on each subject and over what time period) |

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| 1. **Potential hazards of major invasive research methods and procedures, and precautions taken to meet them:** | | | | | |
| 1. **Please state the name of a qualified and suitably experienced person who will be available during the conduct of the major invasive research methods and procedures.** | | | | | |
| **15. Will the participants be paid?**  (for research involving major invasive procedures only) | Yes | No | | |
| **If yes, please state amount:** | £ |  | | |
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| 1. **Start Date:** **Estimated Completion Date:** | | | | |
| 1. **Location(s) in which study/project will be undertaken:** | | | | |
| 1. **Ethical principles incorporated into the study:** | | | | |
| 1. **Explanation of the aims and benefits of the study for research participants:** | | | | |
| 1. Written explanation (please enclose copy for major procedures) | | | Yes | No |
| 1. Oral explanation | | | Yes | No |
| 1. If the procedure involves justifiable deception will explanation be offered following participation? \* | | | Yes | No |
| 1. Consent form (please enclose a copy for major procedures) | | | Yes | No |
| 1. Oral consent | | | Yes | No |
| \*For example of justifiable deception please see guidelines paragraph xxx | | |  |  |

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| 1. **Safeguarding the rights of subject in respect of participation:** | | | | | |
| 1. Subject offered opportunity to decline to take part | | Yes | | | No |
| 1. Subject offered opportunity to withdraw at any stage | | Yes | | | No |
| 1. Expert advice available if required | | Yes | | | No |
| 1. Participants informed there may be no benefit to them | | Yes | | | No |
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| 1. **Safeguarding the rights of subject in respect of participation:** | | | | | |
| 1. Subject guaranteed confidentiality | | Yes | | | No |
| 1. Subject guaranteed anonymity | | Yes | | | No |
| 1. Provisions of the Data Protection Act met <https://www.gov.uk/data-protection> | | Yes | | | No |
| 1. Safe data storage secured | | Yes | | | No |
| 1. **Has this application been considered by a School Ethics Committee?** | | | | | |
|  | Yes | | | | No |
| 1. **Protection for the researcher:** | | | | | |
| Will the researcher be at any risk of sustaining either physical or psychological harm as a result of the research? | | Yes | | No | |
| If yes, please specify and give details of precautions which will be taken to protect the researcher: | | | | | |
| 1. **Academic scrutiny of the research proposal:** | | | | | |
| Will the research proposal be submitted to the Research Degrees Committee? | | Yes | No | | |
| If no, will the research proposal be subject to peer review within the School? | | Yes | No | | |

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| 1. **Data Storage & Data Protection/Privacy:**   How will you ensure that participants are informed about how their personal data will be used/processed? How will you ensure that information collected is limited to what is adequate, relevant and necessary for your project.  Please provide a short statement on data storage. This should include your steps to securely store your data, control access to the data, the length of time you expect to retain data, and your plans for its eventual destruction. |
| 1. **Declaration:**   I declare that the proposed investigation described in this application will be carried out as detailed and that if any changes to the procedures are planned, written permission will be sought from the School Ethics Committee/Glasgow Caledonian University Ethics Committee. *(Delete as appropriate).* Signature of Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: |
| 1. **School Approval:**  This study was considered by the School Ethics Committee on (Date): Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Position: |
| 1. **University Ethics Committee Approval:**  This study was approved by the University Ethics Committee on (date): Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Position: |