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| **EA2**  **Ethical Approval Form:**  **Human Research Projects** | | **Please word-process this form, handwritten applications will not be accepted** | | | | MS WORD - Black Portrait |
| This form must be completed for each piece of research activity whether conducted by academic staff, research staff, graduate students or undergraduates. The completed form must be approved by the designated authority within the Faculty.  **Please complete all sections**. If a section is not applicable, write N/A. | | | | | | |
| **1 Name of Applicant** | Tom Kirby | | | | | |
| Department:  Games | | | | Faculty:  School of computing | |
| **2 Position in the University** | Student | | | | | |
| **3 Role in relation to this research** | Modorator and research analyist | | | | | |
| **4 Brief statement of**  **main Research Question** | My aim is to investigate if the Oculus rift virtual reality headset, adds to the experience of fear in a horror genre game compared to conventional methods of play.  To do so, I am hoping to create a horror game in which set pieces are created to be used for analysis and evaluation. I will then get test subjects to play the game. Some test users will play on the oculus rift, other players will use conventional methods to play the game  An anonymous questionnaire will be carried out to create quantitative data then a focus group to create qualititative data.  Once this has been established, the data will be reviewed, analyised and evaluated and put into a report. | | | | | |
| **5 Brief Description of Project** |  | | | | | |
| Approximate Start Date: | | | Approximate End Date: | | |
| **6 Name of Principal Investigator  or Supervisor** | Doctor Duncan Rowland | | | | | |
| Email address: [drowland@lincoln.ac.uk](mailto:drowland@lincoln.ac.uk) | | Telephone: | | | |
| **7 Names of other researchers or student investigators involved** | N/A | | | | | |
| **8 Location(s) at which project**  **is to be carried out** | TBC – the university computer labs where my research and design will be created. I shall seek permission to use the Labs as the place to conduct the play testing and focus group if not, I shall book a room in the library to conduct the test and focus group. | | | | | |

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| **9 Statement of the ethical issues**  **involved and how they are to**  **be addressed –including a risk assessment of the project based on**  **the vulnerability of participants, the**  **extent to which it is likely to be harmful and whether there will be**  **significant discomfort.**    **(This will normally cover such issues as whether the risks/adverse effects**  **associated with the project have**  **been dealt with and whether the benefits of research outweigh the**  **risks)** | This project will not contain any controversial or ethical issues that may cause discomfort for the user. Though there maybe some minor issues as listed below that have be thought of to minimise any issues   1. Participant consent   The participant shall be made aware at each stage of the testing and data collection that they are in a study.  The participents will be made aware of this at every stage to minimise any confusion. Allowing the participant the option to leave the study is clearly communicated to the participant.  A form with all the relevant information on the study and why it is being proformed is made available to the participant.   1. Privicy and confidencitalty   On the form given to the participant it shall be made aware that they and their results are anonymus and have anonmimity from the study.  Though the focus group will be recorded, it will be a sound record so that any recognisation will not be available. the recordings are only for data collection and will not be released with the project.  The participants will be made are of this in the form given to them at each stage. If they do not wish to participate they have the option to do so at the start and are clearly told they may leave if they wish not to continue at any time.   1. Risk and adverse effects   I do not believe this study presents any danger, being psyically or mentaly to the user or researchers. |

**Ethical Approval From Other Bodies**

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| **10 Does this research require the**  **approval of an external body ?** | **No** |
| **If “Yes”, please state which body:-** |
| **11 Has ethical approval already been**  **obtained from that body ?** | **Yes  Please append documentary evidence to this form.**  **No**  **If “No”, please state why not:-**  **Please note that any such approvals must be obtained and documented before the project begins.** |

**APPLICANT NAME**

**I hereby request ethical approval for the research as described above.**

**I certify that I have read the University’s ETHICAL PRINCIPLES FOR CONDUCTING RESEARCH WITH HUMANS AND OTHER ANIMALS.**

Tom Kirby Date 28/10/2013

**PRINT NAME**

**FOR COMPLETION BY THE CHAIR OF THE FACULTY RESEARCH COMMITTEE**

Please select ONE of A, B, C or D below:

**A. The Faculty Research Committee gives ethical approval to this research.**

**B. The Faculty Research Committee gives conditional ethical approval to this research.**

|  |  |
| --- | --- |
| **12 Please state the condition (inc.**  **date by which condition must be**  **satisfied if applicable)** |  |

**C. The Faculty Research Committee cannot give ethical approval to this research but refers the application**

**to the University Research Ethics Committee for higher level consideration.**

|  |  |
| --- | --- |
| **13 Please state the reason** |  |

**D. The Faculty Research Committee cannot give ethical approval to this research and recommends**

**that the research should not proceed.**

|  |  |
| --- | --- |
| **14 Please state the reason** |  |

**Signature of Chair of Faculty Research Committee (or nominee)**

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**Signed Date**