

# EA1

[doc version 09.02]



UNIVERSITY OF  
LINCOLN

## Ethical Approval Form: Library/Desk/Lab/Studio-based Research Projects

This form must be completed for each piece of research activity whether conducted by academic staff, research staff, graduate students or undergraduates. Applications by students must be endorsed by an academic member of staff acting as Principal Investigator/supervisor. The completed form must be sent to the designated Ethics Committee within the College.

Please complete all sections. If a section is not applicable, write N/A.

1 Name of Applicant	Immanuel Greenfeld
2 School	Computer Science
3 Position in the University	PhD Student (part-time)
4 Role in relation to this research	Principal Investigator
5 Name(s) of collaborators/co-workers and their relationship to the project (e.g. supervisor, assistant etc.)	<i>Name, and role in project:</i> 1. Dr. John Shearer (PhD Supervisor) 2. Dr. Patrick Dickinson (2 <sup>nd</sup> PhD Supervisor) 3. Dr. Mike Mangan (leading a wider project that this projects contributes to) 4. 5.
6 Brief statement of main Research Question or Project Title	Optimisation of rendering a complex 3D scene, as an ant (with 1,200+ simple eyes) would see it. (no contact with real ants)
7 Ethical checklist	<p>Does the research involve living human participants, or human tissue? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> <i>If you answered "yes", submit form EA2 for Ethical Approval.</i></p> <p>Does the research involve living animals, or animal tissue? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> <i>If you answered "yes", submit form EA3 for Ethical Approval.</i></p> <p>Does the research involve confidential data, or data not in the public domain? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p> <p>Does the project potentially put you or your collaborators at physical or psychological risk? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p> <p>Could the topic or results of this research be seen as illegal, or attract legal action against the University from an outside agency? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p> <p>Could the topic or results of this research attract unwelcome media attention, or affect the reputation or standing of the University? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p> <p>Could the topic, results or conduct of this research be regarded as offensive, immoral or destructive by some reasonable people? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p> <p>Does this research need to be undertaken under a relevant professional code of conduct? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p> <p>Are there any potential conflicts of interest in conducting this research, including financial gain for the researchers, or for individuals or external organizations affiliated with the researchers? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p> <p>Are there any factors inhibiting the application of the University's ethical guidelines, including those on proper treatment of data, research design and publication of results? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p>

Does the research require the approval of any external body?

Yes ☐ No ☒

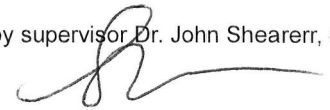
*If the answer to all questions above is "No", you may complete section 8 to certify that there are no ethical issues, submit this form to the relevant Ethics Committee, and proceed with the research immediately. You accept professional responsibility for this decision, and if unsure should instead submit to the Committee.*

*If the answer to any of the above questions is "Yes", complete the rest of the form, submit to the relevant Ethics Committee, and await approval before proceeding with the research. Answering "Yes" does not necessarily imply that the research is problematic, only the Ethics Committee needs to consider the research to ensure that it can proceed, and that the research design conforms to best practice.*

**8 Self certification of Ethical Review**

*Having reviewed the ethical implications of this research, I certify that there are no issues requiring Ethical Approval. I certify that the research will be carried out in compliance with the University's ethical guidelines for library/desk/laboratory/studio-based research, with Health and Safety regulations, and with all other relevant University policies and procedures. If there are any changes to the research requiring ethical clearance, I shall apply for such clearance before continuing with the research.*

Signed: **Imanuel Greenfeld (by email)**, signed by supervisor Dr. John Shearerr, on page 4



Principal Investigator

**Note.** This section must be endorsed by the member of academic staff responsible for the project. In the case of research by students, the supervising member of academic staff must sign. The signed form should then be submitted to the relevant Ethics Committee within the College, and the research may proceed.

**9 Does the research comply with the University's key ethical principles for library/desk/lab/studio-based research ?**

Yes ☐ No ☐

If "No", provide an ethical justification for your project and explain why you wish to continue with the research in breach of normal ethical principles:-

n/a

**10 If applicable, please state the relevant professional code(s) under which the research is being conducted and confirm compliance**

n/a

**11 Does this research require the approval of an external body ?**

Yes ☐ No ☒

If "Yes", please state which body:-

**FOR STUDENT APPLICATIONS ONLY –**

**Academic Support for Ethics**

Academic support should be sought prior to submitting this form to the designated Ethics Committee within the Faculty.

**Undergraduate / Postgraduate Taught application**

**Academic Member of staff nominated by the School  
(consult your project tutor)**

**Postgraduate Research Application**

**Director of Studies**

*I support the application for ethical approval*

\_\_\_\_\_  
Academic / Director of Studies Signature

\_\_\_\_\_  
13<sup>th</sup> October 2016  
Date

John Shearer  
PRINT NAME

**FOR COMPLETION BY THE DESIGNATED ETHICS COMMITTEE WITHIN THE COLLEGE**

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

- ☐ A. Ethical approval to this research.
- ☐ B. Conditional ethical approval to this research.

10 Please state the condition (inc.  
date by which condition must be  
satisfied if applicable)

- ☐ C. Ethical approval cannot be given to this research but the application is referred on to the University Research Ethics Committee for higher level consideration.

11 Please state the reason

- ☐ D. Ethical approval cannot be given to this research and it is recommended that the research should not proceed.

12 Please state the reason, bearing in  
mind the University's ethical framework,  
including the primary concern for  
Academic Freedom.

Signature of the Chair of the designated ethics committee within the College

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Chair of \_\_\_\_\_  
Key ethical guidelines for library/desk/laboratory/studio-based research

12 Has ethical approval already been obtained from that body ?

Yes

☐

-Please append documentary evidence to this form.

No

☐

If "No", please state why not:-

na

Please note that any such approvals must be obtained and documented before the project begins.

13 If there are any other ethical issues, to which the attention of the approving committee should be drawn, please state them in this section, and explain how you have taken the issues into account, so that the research should be approved. Please consult the University's ethical guidelines for advice.

Please also include here, or attach separately, a brief description of the research, to allow the approving committee to reach judgement.

na

#### APPLICANT SIGNATURE

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

I certify that I have read the University's ethical guidelines for library/desk/laboratory/studio-based research.

\_\_\_\_by email\_\_\_\_  
Applicant Signature

\_\_\_\_13<sup>th</sup> October 2016\_\_\_\_  
Date

\_\_\_\_IMANUEL GREENFELD\_\_\_\_  
PRINT NAME

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