School of Computer Science
Preliminary UG & PGT Research Ethics Checklist

This form is required for all UG and Taught MSc research projects to determine whether the proposed research requires ethical review. The module convener or project supervisor is responsible for exercising appropriate professional judgement when completing this form.

SECTION I. Applicant Details

1. Name	TEAM2024.09 Lik Wei CHAN Ziyu JIA Minghe XU Aijia YU Peifeng LIU Jey Vi TAN
2. Status	**Undergraduate Student**
3. Email address	scylc5@nottingham.edu.cn scyzj7@nottingham.edu.cn saymx1@nottingham.edu.cn shyay2@nottingham.edu.cn scypl5@nottingham.edu.cn hcyjt5@nottingham.edu.cn

SECTION II. Module Details

4. Module name/number or MA/MSc/MPhil course and department	Software Engineering Group Project (COMP2043 UNNC)
5. Supervisor's name	Ning Xue
6. Supervisor's email address	Ning.Xue@nottingham.edu.cn

SECTION III. Project Details

Project title	[P2024-18] Dynamic Restaurant Staff Scheduling Tool
Proposed start date	21st October 2024

	Please answer each question by ticking the appropriate box:	Yes	No
1.	Does the study involve human participants?		✓
2.	Does the study involve personal data, and/or include the processing of data in the public domain in such a way as to invade the privacy of the individuals concerned? (see Moodle for guidance on what constitutes personal data.)		✓
3.	Does the study involve the use of biological materials?		✓

I confirm that the information provided is an accurate description of the proposed project and I understand that if any elements of the project should change, I will need to submit a revised form.

Signature of Applicant: *(signatures)*

SECTION IV. For completion by the Supervisor

- The answer to all questions in Section III is **NO** and no further ethics approval is required ☑

OR

- The answer to at least one question in Section III is **YES** and a **UG & PGT Research Ethics** ☐
Checklist (available from link **here**) must be submitted to the Faculty Office for further clearance.

Submit a scan of the completed and signed form to Moodle.

Supervisor's Signature: ....

Supervisor's Name: ....Ning Xue....................... Date: 10/17/2024