

Click here to read how participants need to be warned of pain or mild discomfort resulting from the study and <u>what do about it.</u>		
14. Will the study involve prolonged or repetitive testing or does it include a physical intervention?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Click here to discover what constitutes a physical intervention and <u>here to read how any prolonged or repetitive testing needs to managed for participant wellbeing and safety</u>		
15. Will participants to take part in the study without their knowledge and informed consent? If yes, please include a justification.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Click here to read about situations where research may be carried out without informed consent		
16. Will financial inducements (other than reasonable expenses and compensation for time) be offered to participants?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Click here to read guidance on payment for participants		
17. Is there an existing relationship between the researcher(s) and the participant(s) that needs to be considered? For instance, a lecturer researching his/her students, or a manager interviewing her/his staff?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Click here to read guidance on how existing power relationships need to be dealt with in research procedures		
18. Have you undertaken Risk Assessments for each of the procedures that you are undertaking?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
19. Is any of the research activity taking place outside of the UK?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
20. Does your research fit into any of the following security sensitive categories: <ul style="list-style-type: none"> • commissioned by the military • commissioned under an EU security call • involve the acquisition of security clearances • concerns terrorist or extreme groups If Yes, please complete a Security Sensitive Information Form	<input type="checkbox"/>	<input checked="" type="checkbox"/>

I understand that if granted, this approval will apply to the current project protocol and timeframe stated. If there are any changes I will be required to review the ethical consideration(s) and this will include completion of a 'Request for Amendment' form.

- ☒ have attached a Risk Assessment
☒ have attached an Insurance Checklist

If the applicant has answered **YES** to **ANY** of the questions **5a – 17** then they must complete the [MMU Application for Ethical Approval](#).

Signature of Applicant: Joshua Bridge Digitally signed by Joshua Bridge
Date: 2017.10.27 15:48:32
+01'00' Date: 27/10/17 (DD/MM/YY)

Independent Approval for the above project is (please check the appropriate box):

Granted

☐ I confirm that there are no ethical issues requiring further consideration and the project can commence.

Not Granted

☐ I confirm that there are ethical issues requiring further consideration and will refer the project protocol to the Faculty Research Group Officer.

Signature: _____ Date: _____ (DD/MM/YY)

Print Name: _____ Position: _____

**Approver: Independent Scrutiniser for UG and PG Taught/ PGRs RD1 Scrutiniser/
Faculty Head of Ethics for staff.**