**RESEARCH ETHICS APPLICATION FORM**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Research Project Title | Referral Networks Software Development With Applicant Tracking and Data Analytics Enhancing Recruitment for Bonafide Trainology Placement Services | | | |
| Category | X Full-blown research  ☐ Action research | | | |
| Duration of the research project | 2-3 months | | | |
| **Proponents** | **Name** | **Email Address** | **Contact Number** | **Department** |
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|  |  |  |  |
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**DECLARATION OF CONFLICT OF INTEREST**

☐ I do not have a conflict of interest in any form (personal, financial, proprietary, or professional) with the sponsor/grant-giving organization, the study, the researchers/personnel, or the site.

☐ I do have a conflict of interest, specifically:

☐ I have a personal/family or professional interest in the results of the study (family members who are co-proponents or personnel in the study, membership in relevant professional associations/organizations). Please describe the personal/family or professional interest: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

☐ I have propriety interest vested in this proposal (with the intent to apply for a patent, trademark, copyright, or license) Please describe propriety interest: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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☐ I have significant financial interest vested in this proposal (remuneration that exceeds P250,000.00 each year or equity interest in the form of stock, stock options or other ownership interests). Please describe financial interest: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**CERTIFICATION FROM THESIS ADVISER (FOR UNDERGRADUATE AND GRADUATE THESIS ONLY)**

I confirm that the student(s) is/are capable of undertaking this research in a safe and ethical manner.

Evangelina Magaling

Name and signature of the Thesis Adviser

Date

**PART 1. GENERAL CHECKLIST**

*In accordance with our commitment to promoting ethical research practices, we require researchers to complete a detailed checklist for any category that they answered "YES" to. It is important to note that a "YES" answer does not necessarily mean that the research proposal will be disapproved. Rather, this serves as an indicator that potential ethical concerns have been identified, and that further attention and adherence to the University Research Ethics is required.*

*The University shall ensure that all potential ethical concerns are identified and addressed, and that research activities are conducted in a responsible and ethical manner. This checklists help to ensure that our University upholds the highest ethical standards in research involving human participants/subjects, and that research activities are conducted in a manner that respects the rights, welfare, and dignity of research participants.*

| **Question** | **YES** | **NO** | **Action Point** |
| --- | --- | --- | --- |
| Does your research involve human participants (this includes new data gathered or using pre-existing data)? |  |  | If yes, answer Part 2 of this checklist |
| Will you be conducting Action Research in an existing business, company, or school? |  |  | If yes, answer Part 2 of this checklist |
| Does your research involve online communities (this includes culling data from social media platforms, online forums and blogs)? |  |  | If yes, answer Part 3 of this checklist |
| Does your research involve human participants who are situated in a community and may necessitate permission to acquire access to them? |  |  | If yes, answer Part 4 of this checklist |
| Will your research make use of documents which are not in the public domain and, thus, require permission for use from the custodian of such documents? |  |  | If yes, please attach a certification that permission from the custodian of the data was sought and granted |
| Will your research make use of secondary data (e.g., surveys, inventories, plans, official documents, etc.) from an institution, organization, or agency, which are not in the public domain and, thus, require permission for use from the custodian of such documents? |  |  |
| Does your research involve animals (non-human subjects)? |  |  | If yes, answer Part 5 of this checklist |
| Does your research involve toxic/chemicals/ substances/materials? |  |  | If yes, answer Part 6 of this checklist |

**PART 2. RESEARCH ETHICS CHECKLIST FOR RESEARCHES INVOLVING HUMAN PARTICIPANTS**

*Attachments:*

☐ A copy of the informed consent form to be used in the study.

☐ A copy of the instrument/tool that will be administered to the participants.

☐ If applicable, a copy of the letter seeking permission to collect data from participants who are under the supervision of an agency, institution, department, or office.

☐ If applicable, a copy of the parental consent form for participants below 18 years old

| **Questions** | | | |
| --- | --- | --- | --- |
| Source of Data.  ☐ New data will be collected from human participants | How will the new data be gathered? Please check all that apply  ☐ Experimental procedures  ☐ Focus Group Discussions  ☐ Personal interviews  ☐ Self-administered questionnaires  ☐ Survey  ☐ Observations  ☐ Others, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
| Number of Participants/Subjects |  | |
| Location where the participants will be recruited/ where subjects will be obtained? |  | |
| How long will the data collection take place? |  | |
| Who will perform the data collection? |  | |
| Location(s) where data collection will take place |  | |
| What procedures will be employed to ensure voluntary consent from participants? | ☐ Written consent  ☐ Audio-recorded consent  ☐ Online/Email recorded consent | |
|  | How long will data with participant identifiers be kept after the publication of the first paper from the project? |  | |
| How long will anonymized data be kept after the publication of the first paper from the project? |  | |
| ☐ Use of Pre-existing data collected from human participants | Question | YES | NO |
| Does the original dataset have personal identifiers? |  |  |
| Is the data publicly available, i.e., the access to which does not necessitate an approval process? |  |  |
| Was the original dataset originally collected for the present study’s purpose? |  |  |

| **Question** | **YES** | **NO** | **Action Point** |
| --- | --- | --- | --- |
| Will the research involve students who will be receiving course credits for their participation? |  |  |  |
| Does the study involve participants below 18 years old or those who are unable to give their informed consent? |  |  | If YES, please attach a copy of the parental consent form. |
| Is there a possibility that the research can induce physical and/or psychological harm to the participants? Will they experience pain or some discomfort as a result from their participation in the research? |  |  | If YES, please attach an acceptable argument that outlines the benefits of doing the research and how they outweigh the cost of harming the participants. |
| Will the participants be deliberately falsely informed or made unaware that they are being observed? Will they be misled in a way that they will possibly object to or show unease when told of the real purpose of the study? |  |  | If YES, please attach an acceptable argument that outlines the benefits of doing the research and how they outweigh the cost of harming the participants. |
| Will the research involve the discussion of, or questions on, sensitive topics (e.g. sexual activity, substance abuse, or mental health)? |  |  | If YES, please make sure that the informed consent form explicitly states that sensitive questions will be posed and that you will safeguard the anonymity of the participants and ensure confidentiality. Please attach a copy of your informed consent form and your instrument. |
| Will the research involve the administration of drugs, or other substances to the participants? |  |  | If YES, please attach an acceptable argument that outlines the benefits of doing the research and how they outweigh the cost of harming the participants. Please also attach a description of the procedure that will ensure that the participants will be brought back to their physical and psychological states prior to their participation in the research. |
| Will biological samples (e.g. blood, saliva, urine) be obtained from the participants? |  |  | If YES, will this involve invasive procedures? Please attach a description of these procedures. |
| Will financial inducements (other than reasonable expenses, like transportation or meal allowances) be offered to the participants for their participation in their research? |  |  | If YES, the researcher(s) should be mindful of how the inducements can influence the participants’ responses or behaviors during the research. Indicate the financial inducements offered to the participants: |
| Is there a possibility for groups or communities to be harmed by the dissemination of the research findings? |  |  | If YES, please attach a description of procedures to ensure the anonymity and confidentiality of the research findings. |
| Will the results of this study have a commercial value? |  |  | If yes, do you intend to apply for a patent for the output of this research?  ☐ Yes ☐ No |
| Will your research involve the participation of vulnerable stakeholders? Vulnerable stakeholders are persons whose situation or characteristics may make them unable to provide free and informed consent to participate in the research. This group includes children, institutionalized, persons, students, those who have cognitive impairments, customers, employees in subordinate positions, suppliers, students, etc. |  |  | If yes, attach Informed Consent Form |
| Is there a probability that a participant will drop out from the study? |  |  | If yes, present a course of action in the methodology section of your research proposal. |

**PART 3. RESEARCH ETHICS CHECKLIST FOR RESEARCHES CONDUCTING INTERNET RESEARCH**

*Attachments:*

☐ A copy of the informed consent form to be used in the study.

☐ If applicable, a copy of the parental consent form for participants below 18 years

| **Questions** | |
| --- | --- |
| Which of the following online data will you be using in your research? Check all that apply: | ☐ Social Media Platform (e.g. Twitter, Facebook, Tiktok)  ☐ Blogs & Forum including Comments  ☐ E-mails & Chats  ☐ Video Blogs (e.g. YouTube)  ☐ Collaborative (e.g. Wikipedia)  ☐ Websites  ☐ Online Recruitment Platform  ☐ Others, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| What type of data will be collected? | ☐ Text  ☐ Audio  ☐ Video/Film  ☐ Photo  ☐ Metadata (e.g. Profile, Geographic Location, Tags)  ☐ Presentations (e.g. downloaded PowerPoint or Keynote presentations)  ☐ Contents of an application such as input, output, log files for analysis software, simulation software, schemas  ☐ Correspondence, including electronic mail |
| What is the period coverage of data collection? (indicate in years and months) |  |
| How many participants will you collect data from? |  |
| What are all the websites you will source your data from? Please list all URLs: |  |
| What procedures will be employed to ensure voluntary consent from participants? | ☐ Written consent  ☐ Audio-recorded consent  ☐ Online/Email recorded consent |
| How will the participants obtain a copy of the informed consent form? Please check. | ☐ Hard copy  ☐ Online copy |
| How long will data with participant identifiers be kept after the publication of the first paper from the project? |  |
| How long will anonymized data be kept after the publication of the first paper from the project? |  |

| **Question** | **YES** | **NO** | **Action Point** |
| --- | --- | --- | --- |
| Is the data you are planning to gather publicly available? |  |  | If NO…attach a letter of support from the website or server owner/moderator indicating approval to use this for data gathering |
| Will the participants be compensated for participating? |  |  | If YES, indicate the type of compensation to be provided and provide information on how appropriate and just compensation |
| Will you have minors as participants in your study? Minors are individuals under the age of 18 years old |  |  | Attach Parent Consent Form |
| Will data collection involve students? |  |  | Attach Informed Consent Form |
| Will data collection involve persons who belong to a vulnerable group (PWDs, minorities, abuse victims, students, etc.) |  |  | Attach Informed Consent Form |
| Will the results of this study have a commercial value? |  |  | If yes, do you intend to apply for a patent for the output of this research?  ☐ Yes ☐ No |

**PART 4. RESEARCH ETHICS CHECKLIST FOR RESEARCHES CONDUCTING COMMUNITY RESEARCH**

*Attachments:*

☐ A copy of the informed consent form to be used in the study.

☐ If applicable, a copy of the parental consent form for participants below 18 years

| **Question** | **YES** | **NO** | **Action Point** |
| --- | --- | --- | --- |
| Will you be conducting research in an indigenous community that has or is found inside an ancestral domain? |  |  | If YES, provide a Certification Precondition issued by the National Commission on Indigenous Peoples (NCIP) allowing collection of data with the members of the indigenous community |
| Have the research activities been explained to and approved by the community in which the research will be undertaken? |  |  | Attach the letter of approval |
| Will your presence as a researcher and the research team pose major disruptions to the community’s daily activities? |  |  |  |

**PART 5. RESEARCH ETHICS CHECKLIST FOR RESEARCHES INVOLVING ANIMALS**

| **Question** | **Details** | |
| --- | --- | --- |
| Animal Information | Common Name of the Laboratory animal: |  |
| Scientific name: |  |
| Strain: |  |
| Number of animals to be used in the study: |  |
| Source (e. g. local supplier, pet owner, impounding facility): |  |
| (If imported: please state the country and laboratory/company.) |  |
| Please provide a brief description of the data collection procedure to be undertaken in the research: |  | |

| **Question** | **YES** | **NO** | **Action Point** | **Response** |
| --- | --- | --- | --- | --- |
| Will the animals be transported from the source place to the research site/laboratory? |  |  | If yes, please describe the conditions that the animals will be subjected to during the transport |  |
| Will the animals be housed inside the University during the conduct of the experiment? |  |  | If yes, please describe the preparations/arrangements that have been made with the Laboratory for the housing of the animals |  |
| Does your study involve manipulation of the animal’s environment using a procedure that is not normally being performed in husbandry or habitat management? |  |  | If yes, please describe why the manipulation is needed and how it will be done |  |
| Does your study involve the introduction of an infectious agent on the animal? |  |  | If yes, please identify this infectious agent and describe how this is going to be introduced to the animal. |  |
| Is there a risk that these animals will transmit this infectious agent to other animals or humans? |  |  | If yes, what measure will be done to avoid this? |  |
| Is there a risk of causing pain, suffering, or psychological stress/change in the animal as a consequence of this research? |  |  | If yes, what measures are in place to lessen this physical/psychological outcome? |  |
| Will the animals be disposed of after they are killed? |  |  | If yes, please describe the procedure for the disposal and where these animals will be disposed. |  |

**PART 6. RESEARCH ETHICS CHECKLIST FOR RESEARCHES INVOLVING USE OF TOXIC SUBSTANCES**

If a special permit is required, please secure permit from the Department of Environment and Natural Resources-Environmental Management Bureau (DENR-EMB) indicating that permission was granted. Please attach the documents to the research proposal

| **Questions** | |
| --- | --- |
| How would you classify the toxic chemicals that will be used in your study (see last page for list of chemicals that require special permits): Check all that apply: | ☐ Corrosive (can injure body tissue or corrode metals)  ☐ Flammable (have the potential to catch fire readily and burn in air)  ☐ Oxidizer and reactive (chemicals that can explode or react violently with water or atmospheric oxygen)  ☐ Toxin (substances that even in small amounts can injure body tissues)  ☐ Mutagen/Carcinogen (can cause mutation or cancer)  ☐ Allergen (can cause adverse reaction to the immune system)  ☐ Irritant (can cause inflammatory effects on living tissues)  ☐ Neurotoxin (can induce adverse effect on the central or peripheral nervous system) |
| Please provide a brief description of the data collection procedure to be undertaken in the research: |  |

| **Question** | **YES** | **NO** | **Action Point** | **Response** |
| --- | --- | --- | --- | --- |
| Will the experiment require your exposure to the toxic chemical for a long period of time? |  |  | If yes, please indicate the duration of exposure: |  |
| Will you need to treat, store and dispose toxic/hazardous waste generated by your research? |  |  | If yes, please describe the preparations/arrangements that have been made with the Laboratory |  |