When undertaking a research or enterprise project, Cardiff Met staff and students are obliged to complete this form in order that the ethics implications of that project may be considered.

**If the project requires ethics approval from an external agency such as the NHS or MoD**, you will not need to seek additional ethics approval from Cardiff Met. You should however complete Part One of this form and attach a copy of your NHS application in order that your School is aware of the project.

The document ***Guidelines for obtaining ethics approval*** will help you complete this form. It is available from the [Cardiff Met website](http://www3.uwic.ac.uk/English/uwicresearch/Students/Pages/UsefulDocuments.aspx).

Once you have completed the form, sign the declaration and forward to your School Research Ethics Committee.

**PLEASE NOTE:   
Participant recruitment or data collection must not commence until ethics approval has been obtained.**

**PART ONE**

|  |  |
| --- | --- |
| Name of applicant: | Click here to enter text. |
| Supervisor (if student project): | Click here to enter text. |
| School: | Click here to enter text. |
| Student number (if applicable): | Click here to enter text. |
| Programme enrolled on (if applicable): | Click here to enter text. |
| Project Title: | If using a working title, it should convey what the project is about |
| Expected Start Date: | Click here to enter a date. |
| Approximate Duration: | Click here to enter text. |
| Funding Body (if applicable): | Click here to enter text. |
| Other researcher(s) working on the project: | If your collaborators are external to Cardiff Met, include details of the organisation they represent. |
| Will the study involve NHS patients or staff? | If yes, attach a copy of your NHS application to this form |
| Will the study involve taking samples of human origin from participants? | Choose an item. |

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| In no more than 150 words, give a non technical summary of the project |
| Click here to enter text. |

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| --- | --- |
| Does your project fall entirely within one of the following categories: | |
| Paper based, involving only documents in the public domain | Choose an item. |
| Laboratory based, not involving human participants or human tissue samples | Choose an item. |
| Practice based not involving human participants (eg curatorial, practice audit) | Choose an item. |
| Compulsory projects in professional practice (eg Initial Teacher Education) | Choose an item. |
| If you have answered YES to any of these questions, no further information regarding your project is required.  If you have answered NO to all of these questions, you must complete Part 2 of this form | |

|  |  |
| --- | --- |
| **DECLARATION:**  **I confirm that this project conforms with the Cardiff Met Research Governance Framework** | |
| Signature of the applicant: | Date: |
| **FOR STUDENT PROJECTS ONLY** | |
| Name of supervisor: | Date: |
| Signature of supervisor: | |

|  |  |  |  |
| --- | --- | --- | --- |
| **Research Ethics Committee use only** | | | |
| Decision reached: | Project approved | |  |
| Project approved in principle | |  |
| Decision deferred | |  |
| Project not approved | |  |
| Project rejected | |  |
| Project reference number: Click here to enter text. | | | |
| Name: Click here to enter text. | | Date: Click here to enter a date. | |
| Signature: | | | |
| Details of any conditions upon which approval is dependant:  Click here to enter text. | | | |

**PART TWO**

|  |  |
| --- | --- |
| **A RESEARCH DESIGN** | |
| A1 Will you be using an approved protocol in your project? | Choose an item. |
| A2 If yes, please state the name and code of the approved protocol to be used[[1]](#footnote-1) | |
| Click here to enter text. | |
| A3 Describe the research design to be used in your project | |
| In this section, include details (as appropriate) of: - research method(s); - sample and sampling; - recruitment of participants; - analytical techniques If your project does involve the use of an approved protocol, much less detail will be required but you should indicate which areas of the project are covered by the protocol. | |
| A4 Will the project involve deceptive or covert research? | Choose an item. |
| A5 If yes, give a rationale for the use of deceptive or covert research | |
| Click here to enter text. | |

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| --- |
| **B PREVIOUS EXPERIENCE** |
| B1 What previous experience of research involving human participants relevant to this project do you have? |
| Click here to enter text. |
| B2 **Student project only** What previous experience of research involving human participants relevant to this project does your supervisor have? |
| Click here to enter text. |

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| --- |
| **C POTENTIAL RISKS** |
| C1 What potential risks do you foresee? |
| Include details of risks to the participants, the researcher and the project as a whole. |
| C2 How will you deal with the potential risks? |
| Click here to enter text. |

When submitting your application you **MUST** attach a copy of the following:

* All information sheets
* Consent/assent form(s)

Refer to the document ***Guidelines for obtaining ethics approval*** for further details on what format these documents should take.

1. An Approved Protocol is one which has been approved by Cardiff Met to be used under supervision of designated members of staff; a list of approved protocols can be found on the Cardiff Met website here [↑](#footnote-ref-1)