

Human Research Ethics Committee

**Modification Form for Research Project**

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| Please complete, sign, date and email this form to [Res.Ethics@acu.edu.au](mailto:Res.Ethics@acu.edu.au) or send to:   |  |  | | --- | --- | | Research Services  Australian Catholics University  Melbourne Campus  Locked Bag 4115  FITZROY VIC 3065  Tel. +61 (03) 9953 3158  Fax +61 (03) 9953 3315 | Research Services  Australian Catholics University  Brisbane Campus  Locked Bag 456  VIRGINIA WLD 4014  Tel. +61 (07) 3623 7429  Fax +61 (07) 3623 7328 |   For additional information visit the ACU Research Ethics website or  contact the Ethics Officers on [Res.Ethics@acu.edu.au](mailto:Res.Ethics@acu.edu.au) or +61(02) 9739 2646.  Your request will be processed in approximately 20 working days  Answer all questions. If a question does not apply, indicate N/A.  This form is also available from the ACU Ethics web pages.  **Modifications to the protocol may NOT be introduced prior to written approval of the ACU HREC** |

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| HREC Register No. | 2014250N |
| Approval End Date | 31/12/2015 |
| Principal Investigator/Supervisor | Herbert W. Marsh |
| Student Researcher (if applicable) | Levi Brackman |
| Protocol Title | Fostering Purpose Across the Life Span |

# Proposed modifications to the Protocol:

NOTE: Such modifications may include changes in the aim, procedures or direction of the protocol, sources or manner of recruitment of subjects, number or age of participants, changes to the questionnaire, survey instruments, Letter(s) to the Participants, Consent Forms or changes to personnel.

## State what the proposed modification is:

We would like to add one more school to the list of schools where we are planning to do our study. The design is identical at the study being conducted Fort Morgan High School. That school is:

Model Farms High School, Gooden Dr, Sydney NSW 2153. The principle is also requesting passive consent based on their school policy.

## State what was originally approved:

The exact same study at Fort Morgan High School.

# Reasons for the modifications

New school that has agreed to be a part of this study has been added to study.

# Certification by Principal Investigator (or Supervisor) and Student Researcher

* I/We certify that the information provided above is an accurate and full account of the modification proposed to the protocols for this research project.
* I/We understand that the proposed modification is not to be introduced until the written approval of the Human Research Ethics Committee has been received.

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| **Name *(block letters)*** | **Signature** | **Date** |
| Herbert Marsh |  |  |
| Principal Investigator/Supervisor | | |
| Levi Brackman |  |  |
| Student Researcher | | |

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| **Approval By CHAIR / PANEL CHAIR OF HREC** | | | |
|  | Modification Approved. | | |
|  | The application needs to be referred to the next HREC meeting. | | |
|  | I approve the modification of the Research Protocol as described by the applicant subject to the following conditions:  Click here to enter text. | | |
| **Name *(block letters)*** | | **Signature** | **Date** |
| Click here to enter text. | |  |  |
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