

Section B: Project Information

Project Title:	Expected Start Date:	Expected End Date:

Summary of Proposed Research Project

State your research question(s) and briefly describe how your project links to the assignment outcomes.

Describe the research methods you intend to use. Please add a copy of the questionnaire(s), surveys, focus group questions, or interview scripts.

Note: *Research must demonstrate respect for the participant and should be sensitive to the needs and characteristics of the participant(s), such as age, gender, sexuality, ethnicity, culture, religion, disability, or social class. Please consider that it is possible some questions may be triggering to participants.*

Where will the research be conducted?

Note: *If the research is taking place outside of Cambrian College, you are responsible for any approvals required by the site and proof of approval must be included with this application.*

Participants Involved in Research

Describe the characteristics of participants.
(i.e., age range, gender, institutional affiliation).

Describe how the participants will be recruited.
Attach recruitment notice, letter, or poster if applicable.

Describe the relationship between investigator(s) and participant(s).
(e.g., student peers, relatives, no relationship).

Will participants be compensated for their participation? If so, how?

Section C: Risks & Conflict of Interest

Will there be any perceived or anticipated conflicts of interest or potential for conflicts of interest?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are there physical risks for the participants? <i>(Is there any chance a person might get physically injured?)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are there any psychological risks? <i>(Might a participant feel demeaned, embarrassed, worried, or upset? Could participants be fatigued or stressed?)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are there any social risks? <i>(Possible loss of status, privacy and/or reputation?)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are the overall risks greater to those encountered by participants in everyday life?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Note: If the answer is **YES** to any of the questions, please consult with your professor/instructor.

You may be required to submit a full application to the Cambrian College Research Ethics Committee.

Section D: Consent Process & Feedback to Participants

How will the participants be informed of any risks, procedures, and information about the research project? Attach all final forms, letters, email text, scripts to participants.

Will participants have the right to stop participating at any time without penalty?

Yes No - If **NO**, please provide details why.

Section E: Privacy & Confidentiality

Can any participant be identified by the collection of data?

Yes No - If **YES**, please describe the identifiable data to be collected and why it is required.

How will confidentiality and privacy of the participants be protected?

(Consider how you will collect your information, store your research documents, and report on your findings)

Section F: Documents for Submission

To avoid delays, the following documents shall be submitted along with this application:

<i>Required Documents Attached</i>	<i>Attached</i>
Final letters of information/consent forms	<input type="checkbox"/> Yes <input type="checkbox"/> No
Final Recruitment Materials <i>(e.g., posters, email, telephone scripts)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
Final Research Instruments <i>(e.g., surveys, questionnaires, tests)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<i>Below list any other documents being submitted not listed above</i>	
	<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> Yes <input type="checkbox"/> No
<i>Please provide an explanation if any of the above-mentioned documents are not attached.</i>	

Section G: Signature

By checking this box and sending an electronic copy to your professor/instructor; I, _____, certify that it will serve as my official digital signature; and that I acknowledge, understand, and agree to the statements below.

Please check to acknowledge that you agree with the following:

- The information provided in this form is accurate.
- My research team and I will not begin the recruitment and or collection of data prior to receiving approval from my professor/instructor.
- I will report any changes to the research project/final documents or unanticipated events immediately to my professor/instructor.
- I will conduct research with the highest ethical standards according to the College's and TCPS 2 (2022) guidelines.
- I will seek the guidance, advice, and assistance from my professor/instructor regarding the ethical conduct of research.

Submission Instructions: Please submit the completed application and all supporting documentation to your instructor by the specified due date.