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|  |  **ETHICS**  **APPLICATION FORM**  (Taught Student) Nov 2019  |

*The completion of this form should not be seen as an end in itself but as a vehicle to ensure that you have gone through a process of considering the ethical implications of your research in detail and that you are able to communicate this clearly.*

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| **PLEASE CHECK THE RELEVANT BOX** *(NB: double click on the box and select ‘checked’)*UNDERGRADUATE [ ]  MA/MSc [ ]  OTHER [ ]  *(please specify)*  |
| **SECTION 1: PERSONAL DETAILS & DECLARATION** |
| Name:  |  |
| Student Number: |  |
| Email: |  |
| Programme of Study & Department/ School: |  |
| Supervisor: |  |
| **APPLICANT’S SIGNATURE**  |
| ***I confirm that this submission accords with the University Code of Conduct / BPS / Other Body / and that all information supplied on this form is correct***  |
| Applicant’s Signature: | *Please use an electronic signature or type your name*  |
| Date: |  |
| **SUPERVISOR’S SIGNATURE**  |
| *[ ]  Please tick the box to confirm that you have approved the application as ethically sound,*  *and the participant-facing documentation as appropriate**[ ]  Please tick the box to confirm that student has contacted Finance if travelling overseas* *[ ]  Please tick the box to confirm that the appropriate DBS (Disclosure and Barring Service)* *check via Roehampton has been applied for (if appropriate – please contact the DBS team in Student Admissions at* dbs@roehampton.ac.uk *if you are unsure whether this is required).*  |
| Signature: | *Please use an electronic signature or type your name*  |
| Print Name: |  |
| Date: |  |
| **SECTION 2: PROJECT DETAILS** |
| Title of project: | (Include name of project on participant documents if different) |
| Proposed start date & duration:  |  |
| Purpose of the proposed investigation (500 – 1000 words):This section should include the material which outlines the rationale for the project, i.e. why this study needs to be done. This should be done in a way that is both accessible and scholarly, i.e. have proper cited sources. |
|  |
| Outline of the project:This section should include the details of methodology i.e. what will be done, how, where and how long. Please also confirm:* that if the study requires lab and/or technician support, the allocation of resources has been/will have to be agreed by the Subject Head via your supervisor
* whether any University Ethics Approval is already in place for the whole (or part) of this study (please discuss with supervisor)
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| **SECTION 3: ETHICS ISSUES** |
| Ethical issues raised by the project and how these will be addressed:Points that should be considered include:* Participants and consent. Please include consent form (and information sheet if applicable)
* Confidentiality and anonymity
* Whether any special/vulnerable populations are involved (including under 18s)
* Whether sole research with a child is involved (in this case confirmation of insurance cover from Finance would be required)
* Right to withdrawal
* Deception
* Permissions from organisations involved
* Please complete a Health & Safety Risk Assessment Form for Ethics Applications and a Health & Safety Compliance Declaration for Ethics Applications
* Please complete an Ethics Overseas Background Information Form if researching overseas.
* Please also mention Health & Safety issues in the section below, including any risks to participants and/or researcher, sole working and working overseas (Please discuss this with your Supervisor, who should contact the Health, Safety & Environment Office if there are any queries regarding this)

Please note that if your project includes overseas travel (including travel to your home country, if that is overseas) then you should submit an ATO (Authority to Travel Overseas) form to Finance Department at least eight weeks prior to the departure date |
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| **SECTION 4: RESEARCH INVOLVING PARTICIPANTS**  |
| * You should download the attached Participant Consent Form template and amend as necessary; you should also attach any other information to be given to participants
* You should consider carefully what information you provide to participants, e.g. scope of study, number of participants, duration of study, risks/benefits of the project. It is recommended that the participant has two copies of the consent form so they can retain one for information.
* If images or anything else which might allow the identification of participants is to be publicly accessible (e.g. on the web), a separate section regarding this should be included on the participant consent form
 |
| Give details of 1) the method of recruitment, and 2) potential benefits or incentives to participants if any (include any financial benefits where appropriate). *(NB: Please remember that written permission – or in some cases ethics approval – will have to be sought from any organisations where recruitment is carried out or posters placed (e.g. if you recruit in GP’s surgeries you will require NHS approval)* |
| Will your research involve participants who are aged under 18? YES [ ]  NO [ ] Will you be approaching participants who might be considered to be vulnerable (please give details if not addressed elsewhere on this form)? YES [ ]  NO [ ] If you have answered ‘Yes’ please refer to the Ethics Guidelines (especially section 3.4.j) if your research involves participants who are aged under 18 and highlight the particular issues raised by working with these participants and how these issues have been addressed.If you have answered yes to either of the above you may need to obtain DBS clearance through Roehampton. Please contact the DBS team in Student Admissions at dbs@roehampton.ac.uk regarding this. |

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| **SECTION 5: STORAGE OF DATA** |
| Data for Undergraduate, MA and MSc projects should be stored according to programme requirements (e.g.18 months); however, if work is to be published data should be stored in line with the University’s [Record Retention Schedule](https://www.roehampton.ac.uk/globalassets/documents/corporate-information/policies/uor-retention-schedule-april-2018.pdf). Data should be collected and processed in accordance with the General Data Protection Regulation, the Data Protection Act 2018, the University’s [Data Protection Policy](https://www.roehampton.ac.uk/globalassets/documents/corporate-information/policies/uor-data-protection-policy-230518.pdf), [IT Policy](https://www.roehampton.ac.uk/globalassets/documents/corporate-information/policies/roehampton-it-policy.pdf) and [Data Protection Guidance for Researchers](https://www.roehampton.ac.uk/globalassets/documents/corporate-information/policies/data-protection-guidance-for-researchers-v1.1-august-2018.pdf). |
| Describe how and where the following data will be stored and how they will be kept secure: |
| What types of personal data will be processed as part of the research project?Will any special category personal data be used as part of the project (see [Data Protection Policy](https://www.roehampton.ac.uk/globalassets/documents/corporate-information/policies/uor-data-protection-policy-230518.pdf) for definitions)?How will the personal data be stored?Will the personal data be transferred to any third party organisations or individuals outside of the University? |

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| **SECTION 6: CHECKLIST** |  |
| Please read through the checklist and check the box to confirm:1. **Documentation - have you provided the following (as applicable):**
2. Ethics Application form
3. Participant Consent form
4. Data Privacy Notice for Research Participants
5. Research Participant Info Sheet for indirectly collected/ re-used data
6. Participant Information Sheet
7. Participant Debrief
8. Translations of participant documents
9. Overseas Background Information form
10. H & S Risk Assessment for Ethics Applications
11. H & S Compliance Declaration
12. Copies of questionnaires being used
13. Sample interview questions
14. Advertising material (posters/ flyers)
15. OR no human participants therefore most items above do not apply

 1. **Guidelines/ training – have you consulted/ completed the following (as necessary):**
2. [Ethics Guidelines](https://www.roehampton.ac.uk/globalassets/documents/ethics/ethics20guidelines20may20201420-20v22.docx)
3. [Data Protection and Storage Guidance for Researchers](https://www.roehampton.ac.uk/globalassets/documents/corporate-information/policies/data-protection-guidance-for-researchers-v1.1-august-2018.pdf)
4. [Records Retention Schedule](https://www.roehampton.ac.uk/globalassets/documents/corporate-information/policies/uor-retention-schedule-april-2018.pdf)
5. Guide to Research Integrity and Misconduct (forthcoming – currently [Code of Good Research Practice](https://www.roehampton.ac.uk/globalassets/documents/ethics/code20of20good20research20practice2001.05.10.docx))
6. [Lone & Remote Working Policy](https://www.roehampton.ac.uk/globalassets/documents/corporate-information/policies/loneworkingpolicy_june2019.pdf)
7. [Safeguarding Policy](https://www.roehampton.ac.uk/globalassets/documents/corporate-information/policies/safeguarding-policy-dec17.pdf)
8. Subject-specific ethics guidelines (e.g. from a professional body)
9. [Animal Experimentation – Guide to Research and Ethics](https://www.roehampton.ac.uk/globalassets/documents/ethics/animal-experimentation-guide-to-research-and-ethics-march-2018.docx)

   | (*double click on the check box and select ‘checked’)*YES [ ]  NO [ ]  N/A [ ] YES [ ]  NO [ ]  N/A [ ] YES [ ]  NO [ ]  N/A [ ] YES [ ]  NO [ ]  N/A [ ] YES [ ]  NO [ ]  N/A [ ] YES [ ]  NO [ ]  N/A [ ] YES [ ]  NO [ ]  N/A [ ] YES [ ]  NO [ ]  N/A [ ] YES [ ]  NO [ ]  N/A [ ] YES [ ]  NO [ ]  N/A [ ] YES [ ]  NO [ ]  N/A [ ] YES [ ]  NO [ ]  N/A [ ] YES [ ]  NO [ ]  N/A [ ] YES [ ]  NO [ ]  N/A [ ] YES [ ]  NO [ ]  N/A [ ] YES [ ]  NO [ ]  N/A [ ] YES [ ]  NO [ ]  N/A [ ] YES [ ]  NO [ ]  N/A [ ] YES [ ]  NO [ ]  N/A [ ] YES [ ]  NO [ ]  N/A [ ] YES [ ]  NO [ ]  N/A [ ] YES [ ]  NO [ ]  N/A [ ]    |

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| **SECTION 7: ETHICS DECISION** |
|  *[ ]* Application approved *[ ]* Application approved subject to conditions  *[ ]* Applicant to make substantial revisions and resubmit the application  *[ ]* Application to be referred to the Ethics Committee  |
| Details ofDecision Making Panel: |  |
| Signature & Position: | *Please use an electronic signature or type your name*  |
| Print Name: |  |
| Date: |  |

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# PARTICIPANT CONSENT FORM

**Title of Research Project:**

**Brief Description of Research Project:**

This should include:

What participation involves

Where it will take place

How long it will take

How many participants there are likely to be (if appropriate)

How long any personal data will be kept for

That personal data will be kept indefinitely in an anonymised form

How the research will be disseminated (seminars, conferences, journals etc

Whether any data will be shared with third parties

**For interview based studies: State any limits on confidentiality**

Please use wording along the lines of:

The interview will be tape recorded, and transcribed with any identifying details removed. The transcript, or extracts from, may appear in my report and in publications arising from it. The tapes may be heard by my supervisor and others who might be involved in examining the report.

Everything you say will be treated confidentiality, but there is a limit to this: if you disclose a risk of serious harm then I may need to take appropriate action (this adheres to the ethical guidelines of the …………).

**For questionnaire based studies:**

State that the data will be collected in a way that makes it fully anonymous.

Please use wording along the lines of:

No identifying details will be recorded on your questionnaire response so that your data will be completely anonymous and it will therefore not be possible to link your consent form to your questionnaire response or to the data arising from it. You will be asked to assign a code number to your data which only you will know, so if you wish to withdraw your data you will be able to do this by providing the research with your code number

**Investigator Contact Details:**

Name

Department

University Address

Postcode

Email

Telephone

**Consent Statement:**

I agree to take part in this research, and am aware that I am free to withdraw at any point without giving a reason by contacting Name of Contact. I understand that if I do withdraw, my data may not be erased but will only be used in an anonymised form as part of an aggregated dataset. I understand that the personal data collected from me during the course of the project will be used for the purposes outlined above in the public interest.

By signing this form you are confirming that you have been informed about and understand the University’s [Data Privacy Notice for Research Participants](https://www.roehampton.ac.uk/globalassets/documents/ethics/dec-2019/data-privacy-notice-for-research-partcipants.docx).

The information you have provided will be treated in confidence by the researcher and your identity will be protected in the publication of any findings. The purpose of the research may change over time, and your data may be re-used for research projects by the University in the future. If this is the case, you will normally be provided with additional information about the new project.

Name ………………………………….

Signature ………………………………

Date ……………………………………

Please note: if you have a concern about any aspect of your participation or any other queries please raise this with the investigator or the Supervisor. However, if you would like to contact an independent party please contact the Head of Department.

**Supervisor Contact Details:** **Head of Department** **Contact Details:**

Name Name

Department Department

University Address University Address

Postcode Postcode

Email Email

Telephone Telephone

**\*\*\* Form to be used if appropriate \*\*\***



 Participant Number: ­\_\_\_\_\_\_\_\_\_\_

# PARTICIPANT DEBRIEF

**Title of Research Project:**

Thank you very much for taking part in our study, we greatly appreciate your contribution.

This study is designed to examine the factors that might … **Brief Description of Research Project,** and your participation is extremely valuable.

All data gathered during this study will be held securely and anonymously. If you wish to withdraw from the study, contact us with your participant number (above) and your information will be deleted from our files.

Should you have any concern about any aspect of your participation in this study, please raise it with the investigator in the first instance or with the Project Supervisor or Head of Department.

**Investigator Project Supervisor Head of Department**

Name Name Name

Department Department Department

Address Address Address

Email: Email: Email:

Tel: Tel: Tel :

If you are a student at Roehampton University and are troubled or worried about any aspect of the study, or issues it may have raised, you may find it helpful to contact one of the following who will be able to advise you on agencies that can deal with your particular concern:

**Student Welfare Officers:**

…………….

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…………….

If you feel your concerns are more serious or complex you may wish to contact the

**Student Medical Centre** on **Ext 3679,** or the **Health & Wellbeing** service via health&wellbeing@roehampton.ac.uk

If you are a non-student you may find it helpful to contact your GP or one of the following who will be able to advise you on agencies that can deal with your particular concern:

**[Agree with supervisor on appropriate agencies]**