

**Research Ethics Board**

**Request for Ethics Approval of Student Course-based Research Involving Humans**

Faculty supervisors who wish to oversee the conduct of student research must complete this form following the Guidelines for Ethics Review of Course-Based Research Projects Involving Human Participants. For multiple sections of the same course, one instructor should take on the role of faculty supervisor as described in the Course Based Research guideline.

If you have questions about this form, please contact the Research Ethics Coordinator at [reb.coordinator@mohawkcollege.ca](mailto:reb.coordinator@mohawkcollege.ca)

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| DATE: Click here to enter text. | | | |
| COURSE TITLE AND NUMBER: Click here to enter text. | | | |
| DEPARTMENT OR PROGRAM: Click here to enter text. | | | |
| FACULTY SUPERVISOR: Click here to enter text. | | | |
| For courses with more than one section, please list all course instructors. | | | |
| Instructor | Location | Ext. | Email address |
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1. Has an Approval for a Course-Based Research Project been obtained for this course before?

YES  NO

If yes, please provide the following:

Instructor who received approval: Click here to enter text.

Department: Click here to enter text.

Name of Course if different from the above: Click here to enter text.

Date of the approval and approval number if known: Click here to enter text.

1. Please describe the type of research required in the course and attach a copy of the assignment sheet.

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| Click here to enter text. |

1. Please provide written instructions that will be given to the student researchers in the space below or as an attachment. These instructions should include the following information:
   1. The purpose of the project;
   2. Recommended recruitment method(s) and instructions to ensure that there is no coercion or undue influence if there is likely to be a relationship between the student researchers and the participants;
   3. Recommendations to the students related to the procedure(s) for obtaining participants’ consent;
   4. Suggested procedure(s) for dealing with participants who wish to withdraw from the research project;
   5. Participant feedback/debriefing requirements or recommendations if applicable;
   6. What provisions to guarantee participant anonymity or confidentiality should be considered by the students;
   7. A statement confirming that all projects to be conducted:
      1. Involve no more than minimal risk. The standard of minimal risk is defined in TCPS2; Chapter 2, p. 23:

*If potential participants can reasonably be expected to regard the probability and magnitude of possible harms implied by participation in the research to be no greater than those encountered by the subject in those aspects of his or her everyday life that relate to the research then the research can be regarded as within the range of minimal risk.*

* + 1. The student project must not involve any personal, sensitive or incriminating topics or questions that could place participants or researchers at risk.
    2. The student project must not manipulate behaviour of participants beyond the range of “normal” classroom activity or daily life.
    3. The student project must not involve physically invasive contact with research participants.
    4. The student project must not involve deception.

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| Click here to enter text. |

**Note**: If your student project(s) will not meet all of the criteria listed in g, please contact the REB Coordinator at [reb.coordinator@mohawkcollege.ca](mailto:reb.coordinator@mohawkcollege.ca).

1. Please indicate the procedures or methodologies that will be utilized by the students for data collection (action research, interviews, focus groups, questionnaires, etc.).

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| Click here to enter text. |

1. If you have taught this course previously, please describe the type of questions and themes elaborated by students in the past. You may wish to attach a sample of a questionnaire or interview guidelines developed by a student or student group.

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| Click here to enter text. |

1. Please attach a copy or a model of the following materials where applicable:
   1. the data collection instruments that will be utilized;
   2. the consent form and/or letter of information/transcript of telephone script;
   3. recruitment materials/posters;
   4. any debriefing materials which will be utilized by the students

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| Click here to enter text. |

1. In addition to the completion of this application, what steps will you take to make the Student Investigators more sensitive to ethical issues relevant to the proposed research?

Student Investigators will be required to complete the **TCPS2 CORE tutorial**.

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| Click here to enter text. |

**Instructor’s Agreement**

In submitting this application, I acknowledge that:

I have reviewed the Mohawk College [Guidelines for Ethics Review of Course-Based Research Projects Involving Human Participants](file:///E:\CURRENT%20FILES\Course%20Based%20Student%20Research\MCREB%20Guidelines%20for%20Course%20Based%20Research%2019june2014.docx) and I agree to comply with the requirements of those guidelines and to ensure that the design of all student projects will fit within the criteria for course-based student projects.

I am familiar with and agree to abide by the ethical guidelines and policies of Mohawk College, including the  [Tri-Council Policy Statement](http://www.pre.ethics.gc.ca/eng/policy-politique/initiatives/tcps2-eptc2/Default/) and other applicable guidelines of my profession or discipline.

I have completed the [Online Tutorial (CORE)](http://www.pre.ethics.gc.ca/eng/education/tutorial-didacticiel/) for the Tri-Council Policy Statement and have either submitted the Certificate of Completion in the past, or have attached it to this application.

I will meet with the student investigators to monitor the research progress, if required, and I will make myself available, should problems arise during the course of the research, to supervise the students and assist in solving such problems.

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Course Instructor (yyyy-mm-dd)

This form has been reviewed and approved by:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Program Coordinator (yyyy-mm-dd)

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Associate Dean or Dean (yyyy-mm-dd)

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| Please submit a signed copy of this form and all supporting documents to  [reb.coordinator@mohawkcollege.ca](mailto:reb.coordinator@mohawkcollege.ca). |