**Research Ethics Board (REB)**

Application for Ethical Review

Upload completed applications with all supporting documents to the [SLC-REB submissions site](https://www.tfaforms.com/5009485).

Completed applications that pose greater than minimal risk to participants and, thus, require full board review must be submitted electronically at least two weeks before REB meetings. Meetings are held on the third Friday of each month.

SECTION A – GENERAL INFORMATION

1. Research Project Title

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1. Has any other REB approved of this project?

### YES NO

*If yes, please provide the name of the REB(s) and a copy of the letter of approval.*

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### Will any other REB be asked for approval?

### YES NO

*If yes, please provide the REB(s) name and a copy of the approval letter when you receive it.*

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1. Project Start and End Dates

### **Estimated start date**

🞂Enter or select a start date.

### **Estimated end date**

🞂Enter or select an end date.

1. Principal Investigator Information

Name:

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Organization, Department

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Location

Brockville  Cornwall  Kingston  Other

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Email: 🞂\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address: 🞂\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number: 🞂\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Co-Investigator Information  N/A

Name:

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Organization, Department

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Location

Brockville  Cornwall  Kingston  Other

🞂\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: 🞂\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address: 🞂\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number: 🞂\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Research Team

Please list the names (and affiliations) of all other people (not listed above) on the research team with access to identifiable participant data.

Name Affiliation

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1. Project Location

Campus:

### Brockville Cornwall Kingston Other

### 🞂\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Funding of the Project

Is this project funded?

### YES NO

*If yes, list the sponsor, the name of the grant or award, and the contact person(s).*

Sponsoring Organization:

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Award or Grant:

🞂\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact person(s):

🞂\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address:

🞂\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email:

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SECTION B – SUMMARY OF THE PROPOSED RESEARCH

1. Purpose and Relevance

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1. Methodology

*Please describe all procedures to be used, the data to be gathered, and where and how it will be obtained and analyzed.*

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1. Document List

Please list all supporting documentation accompanying this application as appendices *(e.g., Appendix A – Survey). Include a copy of all posters, advertisements, flyers, letters, emails, text, or telephone scripts for recruitment. This copy should be the same as it will appear for recruitment.*

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1. Conflict of Interest

**Are there any actual, apparent, or potential conflicts of interest?**

### YES NO

*If yes, please provide all the details:*

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1. Assessment of Risk

In your best judgment, this project involves (please check one):

### Minimal risk More than minimal risk

The SLC REB definition of minimal risk is “that the risks of harm anticipated in the proposed research are not greater nor more likely, considering probability and magnitude, than those ordinarily encountered in life, including those encountered during the performance of routine physical or psychological examinations or tests.”

SECTION C – RECRUITMENT AND INFORMED CONSENT

St. Lawrence College Research Ethics Board Policy: Ethical Research Involving Human Participants states: “Respect for human dignity entails high ethical obligations towards persons whose diminished competence and/or decision-making capacities make them vulnerable. Children, institutionalized persons, or others who are made vulnerable due to their situation or circumstances are entitled, on the grounds of human dignity, caring, solidarity, and fairness, to special protection against abuse, exploitation or discrimination.”

1. Participants

Describe your participant population: number, age, unique characteristics, inclusion and exclusion criteria, and how, by whom, and where participants will be recruited.

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1. Communication of Informed Consent

When and how will the purpose of the research be explained, as well as the anticipated benefits, inconveniences, risks to the participant, and the tasks to be performed by the participants?

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What procedures will be in place to inform prospective participants that they do not have to participate?

*Full disclosure to the participants about the nature of the research is required unless the research design requires that certain elements of the research not be provided and the REB is satisfied that no harm would come to participants.*

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1. Consent Procedure and Written Consent Justification

### **How will consent be obtained?** **N/A**

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If written consent is not obtained, indicate why not.

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1. Withdraw Procedure and Data Removal Option for Participants

How will participants be informed about the process for withdrawing from the study?

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Can participants withdraw their data from the study?

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1. Vulnerable Persons or Groups

Might your participants be in a position where their situation or circumstances may make them especially vulnerable or require extra measures to protect their rights?

**YES**  **NO**

*If yes, please provide all the details on how you will mitigate any identified risks.*

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Does the study involve participants who lack the capacity or legally cannot consent?

**YES**  **NO**

*If yes, please provide all the details:*

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Will the participants be under any kind of pressure to consent?

**YES**  **NO**

*If yes, please provide all the details:*

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Are you or members of your research team in positions of power with the participants? (e.g., teacher, supervisor, practitioner)

**YES**  **NO**

*If yes, please clarify. How will this be addressed?*

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1. Participant Risk Assessment

Are there any risks (real or potential) to participants or their community that can be anticipated because of participating in your project?

N/A

physical harm

psychological or emotional stress

threat to personal safety

jeopardy to social position

economic harm

other

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*If you have identified a risk, describe the risks involved and what you will do to mitigate the harm. What are the counterbalancing benefits?*

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1. Participant Compensation or Incentives

Will participants be reimbursed for out-of-pocket expenses, compensated for their time, or given a token gift or incentive for participation?

**YES**  **NO**

*If yes, please provide all the details:*

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1. Additional Ethical Concerns

Additional ethical issues may need to be addressed in projects in sensitive areas. Some examples:

1. research on cultures, countries, and ethnic groups different from one’s own,
2. research on captive and dependent populations,
3. research on children; and
4. projects on sensitive topics, such as sexuality, finance, employer-employee relationships, and other sensitive matters.

If the research involves such sensitive areas, please elaborate on the research design, the confidentiality protocols, and other methods to manage the sensitivity.

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1. Deception

Deception refers to deliberately withholding essential information or previewing deliberately misleading information about the research or its purposes. If the research involves deception, the researcher must provide detailed information on the extent and nature of the deception, including the extent and nature and why the research could not be conducted without it.

* 1. Is deception involved?

**YES**  **NO**

*If yes, please provide all the details:*

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* 1. Will the participants in your study be unaware that they are participants?

**YES**  **NO**

*If yes, please provide all the details:*

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* 1. If deception is employed, debriefing is mandatory. Describe in detail the nature of the debriefing and when and how it will be given.

N/A

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* 1. Will information about the participants be obtained from sources other than directly from the participants themselves?

**YES**  **NO**

*If yes, please list the sources:*

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SECTION D – CONFIDENTIALITY & PRIVACY

1. Privacy and Confidentiality Procedures

Describe the procedures for preserving privacy and confidentiality during data collection, retention, and reporting. *If privacy and confidentiality are not an issue in this research, please explain why.*

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1. Possible Identification of Participants
   1. Do participants identify themselves by name or by any other means that allow you or anyone else to identify them in your data or reports?

**YES**  **NO**

*If yes, please explain:*

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* 1. If participants are identifiable by name, do you intend to recruit them for future studies?

**YES**  **NO**

*If yes, indicate why this is necessary and how you plan to recruit for future studies.*

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* 1. How will individual data be guarded against misuse by a third party?

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* 1. Could dissemination of findings compromise confidentiality?

**YES**  **NO**

*If yes, please explain if participants will be informed of this possibility during the consent process:*

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1. Use of Confidential Records

Will confidential records be consulted?

**YES**  **NO**

*If yes, indicate the precautions to ensure participants’ confidentiality.*

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1. Discovery of Sensitive Information

Is there a possibility that during data collection, you might discover information on sensitive matters, criminal activities, abuse, or violence against a participant that you might have a duty to report?

YES  NO

In the event the research team uncovers any information on sensitive matters, criminal activities, abuse, or violence, how will you address this promptly?

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1. Storage and Disposal of Data

*This includes all written records, video/audio recordings, artifacts, and questionnaires. At a minimum, data must be stored in a locked filing cabinet or room. Data stored on computers and mobile devices should be password protected. Sensitive or confidential data stored on laptops and mobile devices must be encrypted.*

* 1. How will you protect participant privacy and confidentiality during data collection, analysis, and retention?

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* 1. How long will you keep the data?

*The researcher must know the data retention requirements set by their academic discipline, profession, prospective journal, or regulatory agency requirements. For example, federally funded research requires seven years, Health Canada requires 25 years for clinical trials, hospitals typically require ten years, and most scientific journals require five years.*

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* 1. Will you destroy your research data (e.g., physically destroyed, shredded, or erased), and if so, when (e.g., after the end of data retention)?

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1. Feedback and Dissemination of Results
   1. Describe if any feedback or sharing of your research reports will be given to participants after they have completed their participation. How will the feedback be provided, and by whom?

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* 1. If feedback is not given, please explain why feedback is not planned (e.g., the study is anonymous).

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1. Dissemination Guidelines and College Approval for Publication

Any dissemination of results or findings that report directly and mention St. Lawrence College in any form must be approved by the College before publication in any format (electronic, print, multimedia, posted to a website, etc.) or released to the news media.

* 1. How will the researchers meet this requirement?

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* 1. What will be the primary use for the research results?

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* 1. Who will own the data?

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SECTION E – ATTESTATION

I agree to abide by the ethical guidelines and procedures of St. Lawrence College, the Tri-Council Policy Statement, my profession or discipline, and any other institution in which the research is undertaken.

I am aware of my responsibility to be familiar with these standards.

I further agree to notify the St. Lawrence College Research Ethics Board (REB) of any change in the methodology or status of the project and will comply with all requests made by the REB during the research's life.

SECTION F – SIGNATURE OF PRINCIPAL INVESTIGATOR

Insert an image of your signature or sign anywhere below:

🞂Enter or select the date of signature