Application for Ethical Approval of Research Proposal

Date of Assessment/Evaluation:

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| 1. | 11 | ш |

Title of Research:

| 1. | no. a | | | |
|----|-------|--------------------------------|--|--|
| | b. | | | |
| | c. | | | |
| 2. | _ | duate student(s) student(s) | | |

- 3. Name of Department/School/Program
- 4. Does the research study have external grant funding? [] Yes []



III. Participants

| | | YES | NO | N/A |
|----------------------|--|-----|----|-----|
| | Minors (under 18 years of age) | | | |
| Do participants fall | People with learning or communication difficulties | | | |

Do participants fall into any of the following special groups?



