# Image result for carleton logoSchool of Linguistics and Language Studies

**Research Ethics Sub-Committee Board**

 **Ethics Renewal/Change of Protocol/Closure Form**

**for**

**SLaLS Course-Based Projects and Research Essays**

|  |  |
| --- | --- |
| Ethics Protocol Clearance ID:  |  |
| Principal Investigator/Course Instructor:  |  |
| Study Title/Course Code: |  |
| Date:  |  |
| Clearance Expires:  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **General Information** |  |  |  |  |  |
| 1. Are you requesting a renewal, change of protocol, or closure? |  |
| 2. When did recruitment begin, or when do you anticipate recruiting?  |  |
| 3. What is the expected project completion date? |  |
| 4. Does this research exclusively involve secondary data analysis?  | YES[ ]  | NO[ ]  |
|  If Yes, the remainder of this form is not applicable. Please proceed to signatures. |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Project Status** |  |  |  |  |  |
| 1. Not yet recruiting participants: | YES[ ]  | NO[ ]  |  |
| 2. Currently collecting data from participants: | YES[ ]  | NO[ ]  |  |
| 3. Data collection has ended, and data analysis is ongoing:  | YES[ ]  | NO[ ]  |  |
| **Research Participants** |  |  |  |  |  |
| 1. Have there been changes to the participant group originally selected for the project: | YES[ ]  | NO[ ]  |
|  If Yes, please provide details of the changes and attach copies of all revised documents: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 2. How many participants have been recruited and completed the study:  |  |
| 3. How many participants have withdrawn from the study:  |  |
| 4. Have participants experienced any adverse effects as a result of their participation in the study: | YES[ ]  | NO[ ]  |
|  If Yes, describe the adverse effects in detail and how the situation(s) was/were resolved (Please NOTE that all adverse effects MUST be reported to SLaLS RESB):  |
|  |
|   |
| 5. What procedures/safeguards have been instituted to protect participants from these risks:  |  |
|  |
| **Methodology** |  |  |  |  |  |
| 1. Are there proposed changes to the methodology or project design? | YES[ ]  | NO[ ]  |
|  If Yes, please provide details of the changes: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |
|   |
| **Other Changes** |  |  |  |  |  |
| 1. Please include details of other changes to your project not covered in this form: |  |
|  |
|  |
|  |
| **Signatures** |  |  |  |  |  |
| *Principal Investigator/Course Instructor:*  |
| Signature: |  | Date: |  |
| *RESB Chair:*  |
| Signature: |  | Date: |  |
|  |  |  |  |

## Notes

* The research team does not have clearance to carry out research with human participants without a renewal of their ethics clearance.
* This form (completed) is required by the SLaLS RESB as part of its obligation to the Carleton University Research Ethics Board-A (CUREB-A).