FOR OFFICE USE ONLY
SMU REB #:
DATE RECEIVED:

APPLICATION FOR ETHICS REVIEW OF RESEARCH INVOLVING HUMANS

Form 1 C- Faculty/Student/Staff Research Already Cleared at Another Canadian REB

The REB forms are Adobe fillable, savable, PDF forms- they must be opened with Adobe Acrobat Reader to ensure that they look and function correctly.

LIST OF REQUIRED MATERIALS

When a research has current research ethics clearance at another Canadian REB, a Form 1 C application is submitted at the home SMU REB. A complete application includes:

1. SMU REB Form 1 C (signed by all SMU affiliated researchers),
2. Current Informed Consent Form/Script (localized, if applicable),
3. The research ethics application form and all research materials from the other site,
4. The REB clearance certificate/letter issued by the other Canadian REB, (multi-year projects must evidence current clearance status),
5. The other Candian REB's completed review: This involves all communication and final agreement between the other site's REB Chair and the other site's Principal Investigator. If the other site's REB accepted the application without clarifications requested, please indicate (Section B, 4.c.)

FORM CONTENT INSTRUCTIONS- Send application to ethics@smu.ca

Anwer all fileds and answer "n/a" if the question does not apply to your research. Research ethics review requires the completion of all fields.

SECTION A

GENERAL INFORMATION

1. Type of Application: ☐ Faculty ☐ Student ☐ Staff (Choose one only)

2. Title of the Research: ***(Important! If the public title is different, please indicate. All active research studies are listed on the SMU REB website.)***

3. Type of Research: Choose one

4. (a) Start date:

Note: Engaging with participants (e.g., recruitment) is generally considered to be the beginning of the study.

(b) End date:

Note: The research is completed when all data has been collected from participants, no further contact will be made with them, and all data are recorded and stored in accordance with the provisions of the approved application.

CONTACTS (Include all individuals who will have contact with participants and/or access to participant data.)

5.

For Student research, begin with listing the Faculty Supervisor.
For Faculty and Staff research, begin with listing the Faculty/Staff Principal Investigator.

a) Role Choose one Name:

Institution: Institutional Status: Enter custom text

Department:

Phone #: Alternate Phone #:

Email: Alternate Email:

b) Role Choose one Name:

Institution: Choose one Institutional Status: Enter custom text

Department:

Phone #: Alternate Phone #:

Email: Alternate Email:

c) Role Choose one Name:

Institution: Choose one Institutional Status: Enter custom text

Department:

Phone #: Alternate Phone #:

Email: Alternate Email:

d) Rol Choose one Name:

Institution: Choose one Institutional Status: Enter custom text

Department:

Phone #: Alternate Phone #:

Email: Alternate Email:

(Include additional members in "Additional Information" section.)

CURRENT FUNDING

6. ◯ Funded ◯ Funding pending ◯ Unfunded

☐ Tri-Council Agency: ☐ SSHRC ☐ NSERC ☐ CIHR

☐ Internal (Specify):

☐ Other (Specify):

Grant Number:

Grant Name:

Funding Period: From: (dd/mmm/yyyy) To: (dd/mmm/yyyy)

Grant title if different from Question 2:

SECTION B

OTHER CANADIAN REB CLEARANCE

1. Name of the other Canadian REB that has provided clearance:

2. Current REB clearance period

From: To: File No.:

3. Level of research ethics review: ◯ Full REB review ◯ Delegated REB review of minimal risk research

APPLICANT'S REQUIRED MATERIALS CHECK LIST:

4.

a) ☐ copy of current Informed Consent form/script (localized, if applicable)

b) ☐ copy of the other site's research ethics application form and all final research materials

c) ◯ copy of the clarifications the other REB requested ◯ The other REB accepted the application as originally presented

d) ☐ copy of the answers provided by the other site's Principal Investigator to the clarifications requested by the other REB

e) ☐ copy of the other Canadian REB's clearance certificate/letter, (multi-year projects must evidence current clearance status)

f) ◯ copy of clearance form the other Canadian REB to any changes or additions to the initial REB review ◯ n/a

g) Multi-year research projects: ◯ Current annual review extension letter/certificate from the other REB ◯ n/a

SCHOLARLY REVIEW

5. Please describe any scholarly review that this proposed research has been subjected to (if any).

ADDITIONAL INFORMATION:

SECTION C

CERTIFICATION

My signature confirms the following responsibilities:

INITIAL RESEARCH ETHICS REVIEW CLEARANCE REQUIRMENTS

I will ensure that all procedures performed under the project will be conducted in accordance with the SMU REB's cleared protocol and consenting process, the Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans (TCPS 2, 2018) and all relevant Saint Mary's University, provincial, national and international policies and regulations that govern research involving human participants. Recruitment of participants will not start until the SMU REB and contract/agreements have been cleared by the appropriate research institute official(s).

CONTINUING RESEARCH ETHICS REVIEW REPORTING REQUIREMENTS

UNANTICIPATED ISSUES: Any unanticipated issue or event that increases the level of risk to participants or has other ethical implications is reported to the REB without delyay, (within 1 business day).

REPORTS OF UNANTICIPATED ISSUES: Any unanticipated issue or event that increases the level of risk to participants or has other ethical implications is reported to the REB without delay, (within 1 business day).

REQUESTS FOR CHANGES TO CLEARED RESEARCH (Form 2): Proposed changes to the initial proposal may involve changes to the research methods, the informed consent process, research materials as well as changes to the title of the research, changes to research personnel names or contact information and funding. Changes to the research should not be implemented without documented clearance from the REB.

ANNUAL STATUS REPORT (Form 3): Research ethics clearance is valid for 1 year at a time. At the minimum, Continuing Research Ethics review consists of an annual review. A report is submitted 30 days prior to the expiry of the clearance and extends the clearance for additional year(s).

END OF STUDY REPORT (Form 5): Since one of the primary purposes of the REB is to protect human research participants, a research is deemed to be complete when involvement with and risk exposure to participants has ended. If no further recruitment of research participants will take place and data collection is complete an end of study report should be submitted.

FUNDING STATUS: Any changes to the funding status must be reported to the REB throughout the life cycle of the resarch project.

NON-COMPLIANCE: I understand that the REB is obligated to report and turn over any cases in which a research protocol does not hold a valide Certificate of Ethical Acceptability/Continuation to the Dean of Research under the provision of the Saint Mary's University Policy on Integrity and Research Scholarship and Procedures for Reporting and Investigating Scholarly Misconduct.

SMU REB CLEARANCE DOCUMENTS: I will retain a copy of the research ethics clearances for my records.

FACULTY SUPERVISOR

I have reviewed and approve the scientific merit of the research and this ethics protocol submission and will review and approve all forthcoming requests to the REB. I will provide the necessary training and supervision to the student investigator throughout the project. I will ensure that the level of risk inherent to the project is managed by the level of research experience that the student investigator has combined with an extent of oversight that will be provided by me.

THIS PDF FORM WILL LOCK ONCE SIGNED.

1. A copy must be saved before inserting the first signature. This would allow any later editing activity to the form should applicants need.
2. The first signature will lock the form and make any later editing unavailable.
3. Before the first signature, fill all fields on the form, including the fields below.
4. Signatures are inserted using Adobe Sign available on this document. Draw and/or insert a personally drawn signature.
5. Auto-generated signatures are not accepted by the Board. Contact sas@smu.ca to learn about how to draw/insert personal signatures. Personal marks and lock functions serve an important required standard and achieve genuine records for investigators and REBs.

_____

*Signature of Faculty Supervisor (Type name) Date (dd/mmm/yyyy)

PRINCIPAL INVESTIGATOR

_____

*Signature of Choose role (Type name) Date (dd/mmm/yyyy)

CO-INVESTIGATOR

_____

*Signature of Choose role (Type name) Date (dd/mmm/yyyy)

_____

*Signature of Choose role (Type name) Date (dd/mmm/yyyy)