Commit



**University Research Ethics Board (UREB)**

**REB.FORM.016 | Research Ethics Exemption Inquiry Form**

Researchers should use this Exemption from Research Ethics Review form to determine if their proposed study requires research ethics clearance, or to receive official REB documentation for research funders that the study as presented is exempt from ethics review. If the study exclusively uses data that are publicly available or made accessible through legislation or regulation, it is exempt from REB review (TCPS [Article 2.2](http://www.pre.ethics.gc.ca/eng/policy-politique/initiatives/tcps2-eptc2/chapter2-chapitre2/)).

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| Section A – Ethics File Details | |
| Date of Application | Click or tap to enter a date. |
| Title of Study | Click or tap here to enter text. |
| Proposed Study Start Date | Click or tap to enter a date. |
| Anticipated Study End Date | Click or tap to enter a date. |

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| Section B – Applicant Information | |
| Principal Investigator or Nominated Principal Investigator  (see REB.INFO.001 for definitions) | Click or tap here to enter text. |
| Department/Faculty | Click or tap here to enter text. |
| Email Address (MSVU email only) | Click or tap here to enter text. |
| Telephone Number | Click or tap here to enter text. |
| Researcher Category | Choose an item.  If you chose Other, please specify:  Click or tap here to enter text. |
| \*Please provide your supervisor’s or MSVU Faculty Sponsor’s information below (if applicable) | |
| Supervisor | Click or tap here to enter text. |
| Supervisor’s Email (MSVU email only) | Click or tap here to enter text. |
| Supervisor’s Telephone Number | Click or tap here to enter text. |
| Study Team Members (if applicable)If more space is required, please submit a separate roster. | |

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| 1. | Name | Click or tap here to enter text. |
| Email Address | Click or tap here to enter text. |
| Institutional Affiliation | Click or tap here to enter text. |
| Status (e.g., co-applicant, research assistant, collaborator, etc.) | Click or tap here to enter text. |
| 2. | Name | Click or tap here to enter text. |
| Email Address | Click or tap here to enter text. |
| Institutional Affiliation | Click or tap here to enter text. |
| Status (e.g., co-applicant, research assistant, collaborator, etc.) | Click or tap here to enter text. |
| 3. | Name | Click or tap here to enter text. |
| Email Address | Click or tap here to enter text. |
| Institutional Affiliation | Click or tap here to enter text. |
| Status (e.g., co-applicant, research assistant, collaborator, etc.) | Click or tap here to enter text. |

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| Section C – Study Funding | |
| Research Funding Status | Choose an item. |
| Grantor (select all that apply) | Tri-Council (SSHRC, CIHR, NSERC)  Internal  Other External  (Please specify other grantors): Click or tap here to enter text. |
| Principal Investigator on Funding | Click or tap here to enter text. |
| Grant Number(s) | Click or tap here to enter text. |
|  | Click or tap here to enter text. |
| Funding Period | Start Date: Click or tap to enter a date.  End Date: Click or tap to enter a date. |

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| **Section D - Conflict of Interest** | |
| Describe any real or perceived conflict(s) of interest for any team member that could affect participant welfare, also explain how it will be disclosed, minimized, and managed. | Click or tap here to enter text. |

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| **Section E - Researcher Assessment of Risk for the Proposed Study** | |
| The TCPS2 defines minimal risk as “…researchin which the probability and magnitude of possible harms implied by participation in the research is no greater than those encountered by participants in those aspects of their everyday life that relate to the research.”  \* The UREB may determine that your assessment of risk is incorrect and may assign a different risk level. The PI will be advised as soon as possible if this occurs as the level of review will change. | |
| Minimal Risk | Exceeds Minimal Risk |
| Please provide a **brief** explanation for your choice above  Click or tap here to enter text. | |

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| **Section F –Exemption Criteria** | |
| Please select which exemption categories you expect this study to fall within (adapted from TCPS [Article 2.2](http://www.pre.ethics.gc.ca/eng/policy-politique/initiatives/tcps2-eptc2/chapter2-chapitre2/)) | |
|  | 1. Proposed activities do not meet the criteria of research requiring research ethics review (TCPS Article 2.1) |
|  | 1. **Creative practice** activities that **do not** obtain responses from participants to be analyzed to answer a research question. |
|  | 1. Testing within normal **educational** requirements, used exclusively for assessment, management or improvement purposes. |
|  | 1. **Human Cell** Line Exemptions - **De-identified** – see CPS Article 12.21 |
|  | 1. **Human Cell** Line Exemptions - **Identified** Cell Lines in Public Domain– see TCPS 12.22 |
|  | 1. **Observation** of people in public places where it does not involve any intervention staged by the researcher, direct interaction with the individuals or groups; the individuals or groups being observed have no reasonable expectation of privacy; and dissemination of results will not identify specific individuals. |
|  | 1. **Program evaluation**. |
|  | 1. Research that relies exclusively on **publicly** available information, and the information is legally accessible to the public and appropriately protected by law, or the information is publicly accessible and there is no reasonable expectation of privacy. |
|  | 1. **Quality** assurance/quality improvement studies. |
|  | 1. Research that relies exclusively on **secondary** use of anonymous information, or anonymous human biological materials, with no data linkage and will not generate identifiable information. |
|  | 1. **Other**: please provide details |

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| **Section G –Study Information** | | |
| 1. **Scholarly Activity**   For the purposes of this form, **Scholarly Activity** is defined as research, scholarship and professional activities associated with the university and consists of contributions made by a Researcher to his/her discipline or profession that result in the presentation of work for formal or informal peer or public review outside the institution. This includes the applicant’s contribution of results knowledge or practice in the field(s) (e.g., thesis; course-based research; directed studies; peer-reviewed papers; internal grants and/or funding; research reports and briefs to government; books and/or chapters; refereed articles; case studies; etc.).  Please explain how your proposed activity **does not** meet the definition of scholarly activity/research, and/or how your proposed activity fits the exemption from review category chosen above (based on TCPS [Article 2.2](http://www.pre.ethics.gc.ca/eng/policy-politique/initiatives/tcps2-eptc2/chapter2-chapitre2/))  Click or tap here to enter text. | | |
| 1. **Research Abstract/Summary**   In **layperson’s terms**, please provide a brief summary of your study**.** | Click or tap here to enter text. |
| 1. Briefly describe the study, including procedures and objectives. | Click or tap here to enter text. |
| 1. What is the anticipated contribution of the study? | Click or tap here to enter text. |
| 1. Describe the number of participants, any required demographic characteristics, types of personal identifying information collected as well as your plan for anonymity and/or confidentiality. | Click or tap here to enter text. |
| 1. Please provide details on your data management plan (e.g., storage, security, transmission, access, disposal/deposit, etc.) | Click or tap here to enter text. |

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| **Section H - Inclusion of Indigenous Peoples** | |
| 1. Will the research questions/hypotheses concern Indigenous peoples? | Yes  No |
| 1. Will analyses use Indigenous community membership as a variable? | Yes  No |
| 1. Will interpretation of results refer to Indigenous people, language, history or culture? | Yes  No |
| 1. If yes to any of the above, please discuss any plans for Indigenous community engagement, as indicated in the TCPS (Chapter 9). | Click or tap here to enter text. |
| **\*\*\*Append** any existing research agreements concerning the data or samples. | |
| 1. State whether ethical approval has been or will be sought from any Indigenous ethics review group. | Click or tap here to enter text. |
| 1. Describe how results will be returned to the community. | Click or tap here to enter text. |

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| Section I – Signature and Agreement | | |
| My/Our signature(s) below confirms that I/we will ensure that all procedures conducted as part of the study will be conducted in accordance with the Tri-Council Policy Statement on Ethical Conduct for Research Involving Humans (TCPS) found online at <http://www.pre.ethics.gc.ca/eng/index/> as well as all relevant MSVU University Research Ethics Board policies and procedures and agree to comply with the policies and procedures outlined therein. | | |
| Signature of Principal or Nominated Principal Investigator | Name of Principal or Nominated Principal Investigator:  Click or tap here to enter text. | Date: Click or tap to enter a date. |
| **Faculty Supervisor or MSVU Sponsor (if required)**  In the case of student research, as Faculty Supervisor, my signature below indicates that I have read and approved the application and proposal, deem the study scientifically valid and worthwhile, and agree to provide continuing and thorough supervision of the student(s). I will ensure that the level of risk inherent to the study is balanced by the level of research experience that the student researcher has. I will provide appropriate oversight to ensure that the research will be conducted in accordance with MSVU UREB's policies/procedures and that it adheres to this cleared protocol and consenting process. | | |
| Signature of Faculty Supervisor | Name of Faculty Supervisor:  Click or tap here to enter text. | Date: Click or tap to enter a date. |

**Submission Process:**

1. Researchers are asked to submit the application electronically only to [ethics@msvu.ca](mailto:ethics@msvu.ca)
2. Please note that recruitment and data collection may not begin until a certificate of Research Ethics Clearance has been issued.
3. Researchers may **only** use letters and/or numbers for file names and refrain from using any special characters (e.g., #; &; etc.).
4. All documents must be clearly labeled and reflect how they are referenced in the application.
5. Note -  **2 attachments** are required for submission– the application (1) and the combined appendices (2)
6. Application packages shall only be accepted in the form of Word documents (\*.doc or \*.docx) or Portable Document Format (\*.pdf)

For details on specific submission criteria, please see [**Guidance Documents**](https://www.msvu.ca/research-at-the-mount/research-ethics/policies-procedures-guidelines/):

* REB.INFO.401 – Faculty & Staff
* REB.INFO.402 – Graduate Students
* REB.INFO.403 – Undergraduate Students

***Acknowledgement****:* The University Research Ethics Board wishes to acknowledge that this form has been informed, in part, by documents made available by Research Ethics Boards at Brandon University, Vancouver Island University, Simon Fraser University and Brock University, and the UREB has embedded several aspects of these documents into this current UREB iteration.