

This form is for projects where the following apply;

* The research is part of a larger, multi-centre or multi-institutional project.
* Murdoch is not the lead institution for the project (this is usually because the overall Chief Investigator for the project is not a Murdoch staff member).
* Approval from the lead institution’s Australian HREC has already been obtained or is being obtained.
* All documents related to the lead ethics committee – completed application form, all attachments, correspondence and letter of approval – are able to be provided as attachments to this application

002

HE

Human Research Ethics Committee

**Reciprocal Application Form**



|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| ***Human Ethics applications must be submitted through IRMA. This application form is for drafting an application.***  ***Do not submit this form to Human Ethics.*** | | | | | | | | | | | | | | | | | | | | | | | | |  |
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| **Project Title:** | | | | | | | | | | | | | | | | | | | | | | | |  |  | | | | |
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| **Lay Summary:** *(100 – 200 word plain English summary which focuses on what the project is about, and what will be done with participants. Note: this statement may be made available to third parties such as the University’s insurers)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **Time frame:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Expected commencement of data collection:** (Month / Year) | | | | | | | | |  | | | | | | | | **Expected completion of data collection:** (Month / Year) | | | | | | | | | | |  | |
| *Please note: regardless of the expected commencement date, data collection requiring this approval may* ***not*** *commence until approval has been provided in writing.* | | | | | | | | | | | | | | | | | *All Human Ethics approvals are valid for up to three years. If this project will continue longer than three years an extension application must be submitted before the three years expire. When the project is concluded, a closure form must be submitted.* | | | | | | | | | | | | |
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| **Part 1 -** | | | **Personnel information** | | | | | | | | | | | | | | | | | | | | | |  | | | | |
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| **1.1** | **Murdoch Chief Investigator / Supervisor:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | *A staff member who is responsible and accountable for the Murdoch aspects of the research* | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Title | | | | | | | Given Name | | | | | | | | | | | | | | | | | Surname | | | | |
|  |  | | | | | | |  | | | | | | | | | | | | | | | | |  | | | | |
|  | College / Centre | | | | | | |  | | | | | | | | | | | | | Discipline | | | |  | | | | |
|  | Telephone No. | | | | | | |  | | | | | | | | | | | | | Email | | | |  | | | | |
|  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **1.2** | **Co-Investigator(s)** (if more than one, enter each onto new line): | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | *List only Murdoch personnel* | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Title | | | | | | | Given Name | | | | | | | | | | | | | | | | | Surname | | | | |
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|  | College / Centre | | | | | | |  | | | | | | | | | | | | | Discipline | | | |  | | | | |
|  | Telephone No. | | | | | | |  | | | | | | | | | | | | | Email | | | |  | | | | |
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|  | **Provide a brief outline of each Co-Investigator’s role in the project:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **1.3** | **Student Investigator(s):** (if more than one, enter each onto new line): | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | *List only Murdoch students* | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Title | | | | | | | Given Name | | | | | | | | | | | | | | | | | Surname | | | | |
|  |  | | | | | | |  | | | | | | | | | | | | | | | | |  | | | | |
|  | Student Number | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
|  | Telephone No. | | | | | | |  | | | | | | | | | | | | | | Email | | |  | | | | |
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| **1.4** | **For student projects, is this research for:** | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |
|  |  | | | | | PhD | | | | | | | | | | | | | |  | | |  | | | | | | |
|  |  | | | | | Professional Doctorate (eg DPsych, EdD, DVM) | | | | | | | | | | | | | |  | | |  | | | | | | |
|  |  | | | | | Research Masters by Thesis | | | | | | | | | | | | | |  | | |  | | | | | | |
|  |  | | | | | Research Masters with Training (RMT) | | | | | | | | | | | | | |  | | |  | | | | | | |
|  |  | | | | | Masters by Coursework | | | | | | | | | | | | | |  | | |  | | | | | | |
|  |  | | | | | Honours | | | | | | | | | | | | | |  | | |  | | | | | | |
|  |  | | | | | Other | | | | | | | | | | | | | |  | | |  | | | | | | |
|  |  | | | | | *If other, provide further information:* | | | | | | | | | | | | | | | | | | | | | | | |
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| **1.5** | **Provide a brief outline of the Student’s role in the project:** | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |
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| **1.6** | **If this is a student project, does it require formal approval (e.g. Confirmation of Candidature)?** *(if no, go to Qn 1.7)* | | | | | | | | | | | | | | | | | | | | | | | | | | | Yes  No | |
|  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | If this project requires approval, has it been: | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | (a) | | | | | Submitted | | | | | | |  | | | | | |  | | | | | | | | | | |
|  |  | | | | | * Approved | | | | | | |  | | | | | | | | |  | | | | | | | |
|  |  | | | | | * Not yet approved | | | | | | |  | | | | | | | | |  | | | | | | | |
|  | (b) | | | | | Not Yet Submitted | | | | | | |  | | | | | |  | | | | | | | | | | |
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| **1.7** | **Which other institution’s Human Research Ethics Committees have reviewed or will review this study (the subject of this application)?** *When working in collaboration with other institutions, (ethics) approval from each institution may be required* | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | (a) | | | | | Which is the main or lead committee or institution reviewing the application? | | | | | | | | | | | | | | | | | | | | | | | |
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|  | (b) | | | | | What was the outcome of the above ethics review? | | | | | | | | | | | | | | | | | | | | | | | |
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|  |  | | | | | *Please provide a copy of the entire application, approval letter and any conditions* | | | | | | | | | | | | | | | | | | | | | | | |
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|  | (c) | | | | | List any other committees or institutions which are reviewing or will review the application | | | | | | | | | | | | | | | | | | | | | | | |
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|  | (d) | | | | | Are there any researchers from other institutions that you would like to be copied in to all correspondence? | | | | | | | | | | | | | | | | | | | | | | Yes  No | |
|  |  | | | | | *If no, go to Qn 1.9. If yes, which one(s)?* | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | | | | Name | | | | **Email Address** | | | | | | | | | | | | | | | | | | | |
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| **1.8** | **Safety in Research and Teaching** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | (a) | | | | Will this research involve activities such as fieldwork, analysis of biological substances, use of chemicals, or irradiating apparatus (e.g. X-ray equipment) etc? (*If no, go to Qn 1.10)* | | | | | | | | | | | | | | | | | | | | | | Yes  No | | |
|  |  | | | |  | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | | | *See* [*Safety in Research & Teaching*](http://our.murdoch.edu.au/Research-and-Innovation/Safety-in-Research-and-Teaching/) *for advice.* | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | If yes, select the appropriate activities and status; | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |
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|  |  | | | | | | | | | | | *Not Required* | | | *Not Yet Submitted* | | | | | | | | *Submitted* | | *Approved* | | | | |
|  | Working with Biological Materials *(e.g. blood, tissue samples)* | | | | | | | | | | | ☐ | | | ☐ | | | | | | | | ☐ | | ☐ *Approval Number*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |
|  | Chemicals | | | | | | | | | | | ☐ | | | ☐ | | | | | | | | ☐ | | ☐ *Approval Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_* | | | | |
|  | Fieldwork | | | | | | | | | | | ☐ | | | ☐ | | | | | | | | ☐ | | ☐ *Approval Number*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |
|  | Radioactive Substances | | | | | | | | | | | ☐ | | | ☐ | | | | | | | | ☐ | | ☐ *Approval Number*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |
|  | Irradiating Apparatus *(e.g. X-rays, DEXA scans, CT scans)* | | | | | | | | | | | ☐ | | | ☐ | | | | | | | | ☐ | | ☐ *Approval Number*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |
|  | Trans Illuminators and Lasers | | | | | | | | | | | ☐ | | | ☐ | | | | | | | | ☐ | | ☐ *Approval Number*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |
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| **1.9** | **Resources** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | **(a)** | | | | | **Is this research funded?** | | | | | | | | | | | | | | | | | | | | | | Yes  No | |
|  |  | | | | | *(If no, go to Qn 2.1. If yes, please detail amount and source of funds and what how this will be disclosed to participants (NS 2.2.6 h)* | | | | | | | | | | | | | | | | | | | | | | | |
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|  | **(b)** | | | | | **How much of this funding (if any) will be channelled through Murdoch? (***NS 5.2.7)* | | | | | | | | | | | | | | | | | | | | | | | |
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|  | **(c)** | | | | | **Will the researchers receive any form of payment or benefit for each participant recruited into the study?** | | | | | | | | | | | | | | | | | | | | | | Yes  No | |
|  |  | | | | | *If yes, provide details including how this will be disclosed in the consent process (NS 3.1.29)* | | | | | | | | | | | | | | | | | | | | | | | |
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| **Part 2 -** | | | **Project Details**  *In this section, provide an overview of the project, its aims, design and intended outcomes. It is important to use plain English to ensure all HREC members understand the proposed project* | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **2.1** | **Murdoch Participation** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Provide details of the elements of the research that will be undertaken at Murdoch. To what extent is Murdoch participating in this research, and what is the role of any Murdoch researchers?  *This could range anywhere from being an equal research partner in a project to undertaking a small specialist task. This information essentially provides Murdoch’s HREC with an overview of the University’s exposure to the project* | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **2.2** | **Process of Recruitment** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Will Murdoch staff or students be recruited for this research? | | | | | | | | | | | | | | | | | | | | | | | | | | | Yes  No | |
|  | *If no, go to Qn 2.3. If yes, provide details of how this will be undertaken at Murdoch. If permission e.g. from a Pro Vice Chancellor or from the Academic Registrar is needed, please attach evidence of this* | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **2.3** | **Participants who may be vulnerable** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Does the project ***actively seek*** to recruit participants who are: | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
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|  | **(a)** | | | | | **Pregnant women?** *(NS 4.1)* | | | | | | | | | | | | | | | | | | | | | | Yes  No | |
|  | **(b)** | | | | | **Minors, i.e. children under 18 years of age?** *(NS 4.2)* | | | | | | | | | | | | | | | | | | | | | | Yes  No | |
|  | **(c)** | | | | | **People in pre-existing, dependent or unequal relationships?** *(NS 4.3)* | | | | | | | | | | | | | | | | | | | | | | Yes  No | |
|  | **(d)** | | | | | **People highly dependent on medical care who may be unable to give consent?**  *(NS 4.4)* | | | | | | | | | | | | | | | | | | | | | | Yes  No | |
|  | **(e)** | | | | | **People with a cognitive impairment, an intellectual disability, or mental illness?**  *(NS 4.5)* | | | | | | | | | | | | | | | | | | | | | | Yes  No | |
|  | **(f)** | | | | | **People who may be involved in illegal activities?** *(NS 4.6)* | | | | | | | | | | | | | | | | | | | | | | Yes  No | |
|  | **(g)** | | | | | **People in other countries?** *(NS 4.8)* | | | | | | | | | | | | | | | | | | | | | | Yes  No | |
|  | **(h)** | | | | | **Aboriginal and / or Torres Strait Islander peoples?** | | | | | | | | | | | | | | | | | | | | | | Yes  No | |
|  | **(i)** | | | | | **People who may be vulnerable in other ways e.g. identifiable through belonging to a small or easily recognisable community or minority group?** *(NS 3.1.16)* | | | | | | | | | | | | | | | | | | | | | | Yes  No | |
|  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | | | | *If yes, please provide any further details NOT included in the initial application to the lead institution:* | | | | | | | | | | | | | | | | | | | | | | | |
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| **2.4** | **Clinical, Health or Epidemiological Trial** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | A clinical trial is “any research study that prospectively assigns human participants or groups of humans to one or more health-related interventions to evaluate the effects on health outcomes.” (NS 3.1.7) The National Statement also defines a clinical trial as a form of human research designed to find out the effects of an intervention. Health-related interventions can include drugs, surgical procedures, devices, behavioural treatments, dietary interventions or process-of-care changes. Health outcomes include any biomedical or health-related measures obtained in participants, including pharmacokinetic measures and adverse events. | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | **Is this project a clinical, medical or epidemiological trial as defined above?** | | | | | | | | | | | | | | | | | | | | | | | | |  | | Yes  No | |
|  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | *(if no, go to Qn 2.5)* | |
|  | *Research involving human biological samples; medical and pharmaceutical research; the use of human DNA or genetic material, gametes and embryos, often require specific legislation and regulation to be considered in addition to the ethical requirements. Researchers must obtain all necessary approvals and certification prior to commencing research.* | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | **(a)** | | | | | **If this project is a clinical trial, has the trial been registered in a publicly accessible trials registry (e.g. the Australian New Zealand Clinical Trials Registry)?** *(NS 3.1.7)* | | | | | | | | | | | | | | | | | | | | | | Yes  No | |
|  |  | | | | | *If yes, state the name of the Registry and the Registration Number.*  *If no, state the reasons why trial registration has not been undertaken, and indicate if or when registration will be undertaken* | | | | | | | | | | | | | | | | | | | | | | | |
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|  | **(b)** | | | | | **Is this a randomised controlled trial?** | | | | | | | | | | | | | | | | | | | | | | Yes  No | |
|  |  | | | | |  | | | | | | | | | | | | | | | | | | | | | |  | |
|  |  | | | | | If yes, does it meet CONSORT Criteria?  *See:* [*www.consort-statement.org/*](http://www.consort-statement.org/) | | | | | | | | | | | | | | | | | | | | | | Yes  No | |
|  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | | | | If no, explain why not. | | | | | | | | | | | | | | | | | | | | | | | |
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|  | **(c)** | | | | | **Is this a CTN trial? (Clinical Trial Notification Scheme)** | | | | | | | | | | | | | | | | | | | | | | Yes  No | |
|  |  | | | | | *See:* [*www.tga.gov.au/clinical-trials*](file:///C:\Users\20150383\Desktop\Update%20of%20Forms\1%20Application%20Form\4th%20Round\www.tga.gov.au\clinical-trials) | | | | | | | | | | | | | | | | | | | | | |  | |
|  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | **(d)** | | | | | **Is this a CTX trial? (Clinical Trial Exemption Scheme)**  *See:* [*www.tga.gov.au/clinical-trials*](file:///C:\Users\20150383\Desktop\Update%20of%20Forms\1%20Application%20Form\4th%20Round\www.tga.gov.au\clinical-trials) | | | | | | | | | | | | | | | | | | | | | | Yes  No | |
|  |  | | | | |  | | | | | | | | | | | | | | | | | | | | | |  | |
|  | **(e)** | | | | | **Is this trial a Multi-Centre trial or study?** | | | | | | | | | | | | | | | | | | | | | | Yes  No | |
|  |  | | | | | *If no, go to Qn 2.5. If yes, advise the names of any other Australian University or research centre you may be collaborating with.* | | | | | | | | | | | | | | | | | | | | | | | |
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|  | **(f)** | | | | | **How many trial sites are there?** | | | | | | | | | | | | | | | | | |  | | | | | |
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|  |  | | | | | *Location of trial sites (State/s if in Australia, Country/s if overseas)* | | | | | | | | | | | | | | | | | | | | | | | |
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| **2.5** | **Federal Privacy Legislation** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | The following questions are part of the requirements concerning federal privacy legislation. | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | **(a)** | | | | | **Is this project medical research (including epidemiological research)?**  *If no, go to (b)* | | | | | | | | | | | | | | | | | | | | | | Yes  No | |
|  |  | | | | |  | If y*es,* will you require the use or disclosure of information from a Commonwealth agency?  *If no, go to (b)* | | | | | | | | | | | | | | | | | | | | | Yes  No | |
|  |  | | | | |  | If y*es*, will the information to be disclosed be personal information, i.e. identifiable information?  *If no, go to (b)* | | | | | | | | | | | | | | | | | | | | | Yes  No | |
|  |  | | | | |  | If y*es,* will you be obtaining consent from the individuals to whom the information relates? | | | | | | | | | | | | | | | | | | | | | Yes  No | |
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|  | **(b)** | | | | | **Is this research relevant to public health or safety, or to the management, funding or monitoring of a health service?**  *If no, go to Qn 2.6* | | | | | | | | | | | | | | | | | | | | | | Yes  No | |
|  |  | | | | |  | If y*es,* does the research involve the collection, use or disclosure of information from a private sector organisation?  *If no, go to Qn 2.6* | | | | | | | | | | | | | | | | | | | | | Yes  No | |
|  |  | | | | |  | If y*es,* will you be collecting, using or disclosing health information?  *If no, go to Qn 2.6* | | | | | | | | | | | | | | | | | | | | | Yes  No | |
|  |  | | | | |  | If y*es,* will consent be obtained from the individuals to whom the health information relates? | | | | | | | | | | | | | | | | | | | | | Yes  No | |
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| **2.6** | **Other Ethical Issues** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Are there any issues in this study, such as:   * Competing interests or possible conflicts of interest? * Restrictions on publications resulting from this study? * A risk that the publication of the results could cause any kind of harm (including physical, psychological, spiritual, emotional, social and financial) to individual participants, to participants’’ employability or professional relationships, or to their communities? * Any risk involved to any participant or member of the research team that have not already been addressed? | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | Are there, in your opinion, any other ethical issues involved in the research? | | | | | | | | | | | | | | | | | | | | | | | | | | | Yes  No | |
|  | *If yes, provide details;* | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **2.7** | **Documentation** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Will all participant information, consent forms, and other materials for participants contain a Murdoch letterhead or logo? | | | | | | | | | | | | | | | | | | | | | | | | | | | Yes  No | |
|  | *If no, please explain why and identify how participants will be made aware of Murdoch’s participation in the research* | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **Part 3 -** | | | | **Attachments** | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **3.1** | **When submitting this form, attach the following;** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | |  | | | | * a copy of the originating or lead institution’s ethics application * a copy of the lead institution’s ethics approval together with any conditions of approval * copies of all relevant Information Letters and Consent Forms * copies of questionnaires / surveys, interview questions, instruments * any WA specific requirements e.g. Working with Children Check, police clearances etc | | | | | | | | | | | | | | | | | | | | | | | |
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| **Part 4 -** | | | | **Declaration** | | | | | | | | | | | | | | | | | | | | | | | | | |
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| ***This application form must be signed by the Chief Investigator / Supervisor who has been named on the front page and who accepts the legal and ethical responsibilities associated with the Murdoch elements of this research project. Signatures of all Co-investigators and Student Investigators must also be provided in addition to the signature of the Head of Discipline or Centre Director in the college of the Chief Investigator / Supervisor.*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **4.1** | **Chief Investigator / Supervisor** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | I have read and will abide by the [National Statement on Ethical Conduct In Research Involving Humans](https://www.nhmrc.gov.au/guidelines-publications/e72) and relevant Murdoch University Policy, Procedures, Guidelines and Codes of Practice for the Conduct of Research.  I endorse the content of this application and am confident that it is ready for review by the Human Research Ethics Committee and that it is suitable to be conducted if approved.  I declare that I and all participating researchers on this project have read this application fully and will adhere to the National Statement and all relevant Murdoch policies and codes, and that the project, if approved, will be conducted as approved by the HREC.I accept the legal and ethical responsibilities associated with this research. | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Given Name: | | | | | | | | | | | | | Surname: | | | | | | | | | | | | | | | |
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| **4.2** | **Co-Investigator(s) & Student Researchers** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | I have read and will abide by the [National Statement on Ethical Conduct In Research Involving Humans](https://www.nhmrc.gov.au/guidelines-publications/e72) and relevant Murdoch University Policy, Procedures, Guidelines and Codes of Practice for the Conduct of Research.  I endorse the content of this application and am confident that it is ready for review by the Human Research Ethics Committee and that it is suitable to be conducted if approved.  I declare that I will abide by the National Statement and adhere to the project as approved by the HREC. | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | ***Co-Investigator(s)*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Given Name: | | | | | | | | | | | | | | | Surname: | | | | | | | | | | | | | |
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|  | ***Student Researcher(s)*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Given Name: | | | | | | | | | | | | | | | Surname: | | | | | | | | | | | | | |
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| **4.3** | ***College Authorisation – Head of Discipline*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | I endorse this application for review by the Human Research Ethics Committee. I support this project to be conducted under the auspices of the Discipline or Centre of subject to approval by Murdoch University’s Human Research Ethics Committee. | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Given Name: | | | | | | | | | | | | | | | Surname: | | | | | | | | | | | | | |
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