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**IRB RESEARCH ETHICS APPLICATION FORM**

All research conducted by KIMEP University faculty, graduates, and researchers requires ethical approval. This **Ethics Application Form** should be sent to the IRB Chair, in ONE PDF document along with the following supporting documentation:

1. Participant recruitment invitation letter, guide, or flyer (online/offline)
2. Participant information sheet
3. Permission letter from an organization to use their premises/involve their members
4. Informed consent form
5. Participant instruction guide
6. Questionnaire, measures, interview questions, debrief form, and any supporting
7. Additional documentation that will be provided to the participants, or those helping with the research such as gatekeepers or assistants.

Your ethics application and research proposal will be reviewed and approved by the IRB. **You cannot collect data until your application has been approved.**

**Ethics Review Process**

Please complete the information below.

### **Date submitted**: Click here to enter text.

### **Course:** Click here to enter text.

### **Researcher/ Student name and number**: Click here to enter text.

### **Supervisor name (remove if not relevant)**: Click here to enter text.

**Co-supervisor/co-author(s) (remove if not relevant):** Click here to enter text.

**Project title:** Click here to enter text.

### **Project summary** (rationale/problem statement, research question/hypothesis, aims and/or objectives (500 words max):

Click here to enter text.

**Research method** (research approach and design; data collection method; sampling and recruitment; analytical method; additional ethical considerations not mentioned below; your rationale for your choices) (500 words max):

Click here to enter text.

**Validity/Reliability/Trustworthiness:**

Click here to enter text.

**Anticipated outcomes** (e.g., publications, conferences, dissertation): Click here to enter text.

**Ethical considerations:** Click here to enter text.

Please indicate with Yes or No (please tick) to the following questions or where indicated, provide further information.

1. Have you signed and included the professional code of conduct form? YES [ ]  NO [ ]
2. What type of data are you planning to use?
3. Primary data collected directly from human participants YES [ ]  NO [ ]
4. Secondary data about human participants (e.g., archival or journal papers) YES [ ]  NO [ ]
5. Online data that is publicly available (e.g., without membership) YES [ ]  NO [ ]  Other [ ]

Describe if yes Click here to enter text.

1. Will you be dealing with sensitive data (e.g., personal data, organizational data, and those with vulnerable groups)? YES [ ]  NO [ ]

If yes, please outline how this data will be stored securely. All data must either be stored on KIMEP University Google Drive or a partner organization's secure hard drive (please explain).

Click here to enter text.

1. Does the study involve collecting data directly from vulnerable people (e.g., students (minors), those with illnesses, disabilities, children, or the elderly in care)? YES [ ]  NO [ ]

If yes, please outline which population and how you will deal with the specific ethical considerations.

Click here to enter text.

1. Can you guarantee the full security and confidentiality of the data collected from participants?

YES [ ]  NO [ ]

1. Please outline how you will ensure the anonymity and confidentiality of participants' data.

Click here to enter text.

1. Will you be responsible for destroying the data after the research is complete? YES [ ]  NO [ ]

If not you, who will be responsible? If yes, at what date will the data be destroyed, and how?

Click here to enter text.

1. Will all participants receive information on the reason for the research and what their participation will involve? YES [ ]  NO [ ]

If not, please outline the reasons.

Click here to enter text.

1. Will all participants be asked to give written informed consent/assent before the study starts? YES [ ]  NO [ ]

If not, please outline the reasons.

Click here to enter text.

1. Will all participants be told of the data being collected and how the data be used? YES [ ]  NO [ ]

If not, please outline the reasons.

Click here to enter text.

1. Will all participants be told that they do not have to participate in the research? YES [ ]  NO [ ]

If not, please outline the reasons.

Click here to enter text.

1. Does the study involve deception? YES [ ]  NO [ ]

If yes, please elaborate.

Click here to enter text.

1. Is there any risk that the research may lead to physical/psychological harm or disclosure of criminal activities/convictions? YES [ ]  NO [ ]
2. Is there any significant risk that participants may cause harm to others or themselves? YES [ ]  NO [ ]

If yes, please provide details and actions you will take.

Click here to enter text.

1. Are you proposing to recruit participants who are students, faculty, or staff at KIMEP University?

YES [ ]  NO [ ]

If yes, please provide details of any potential conflict of interest and how this will be mitigated, as well as how you will address your possible position of power.

Click here to enter text.

1. Are you proposing to recruit participants who are employees of an organization YES [ ]  NO [ ]

If yes, how will permission be gained from the organization?

Click here to enter text.

1. Are you proposing to recruit participants who are students from other educational institutions?

YES [ ]  NO [ ]

If yes, how will permission be gained from the institution?

Click here to enter text.

1. Will any of your research involve online data collection (e.g., online surveys, Facebook, LinkedIn, X)?

YES [ ]  NO [ ]

If yes, how will permission be obtained to collect data if necessary?

Click here to enter text.

1. Will you be using survey software (e.g., SurveyMonkey, Google Forms) YES [ ]  NO [ ]

If yes, please provide details.

Click here to enter text.

1. Are payments/incentives being offered to participants? YES [ ]  NO [ ]

If yes, please provide details.

Click here to enter text.

1. Will you tell participants that payment/incentives do not affect participants' right to withdraw their data?

YES [ ]  NO [ ]

If not, please outline the reasons.

Click here to enter text.

1. Is funding being provided for this project? YES [ ]  NO [ ]

If yes, please provide details.

Click here to enter text.

**Intellectual Property Rights and Data Ownership**

KIMEP University retains ownership of data generated during research undertaken by graduates and researchers employed at the University and any related writings and publications. However, faculty members retain the intellectual property rights of their work.

I confirm that the ethical issues pertaining to this study have been fully considered.

Signed (lead investigator):

 Date: Click here to enter text.

**IRB USE ONLY**

|  |
| --- |
| **Please ensure all areas below are met** |
| What type of research is being conducted? | PRIMARY (human-based) [ ]  SECONDARY [ ]   |
| Check on all documents included where relevant (not required if secondary research): | [ ]  Participant information sheet [ ]  Example of participant consent/assent form[ ]  Organizational (where research will be conducted) [ ]  Approval letter[ ]  Tentative questionnaire, survey, interview/focus group questions[ ]  Signed code of conduct |

**The IRB is satisfied that all requirements for this application have been met and all ethical considerations have been duly addressed.**

**Committee Chair Name:** Click here to enter text.

**Signed:**

**Date:** Click here to enter text.