THE UNIVERSITY OF WINNIPEG

Revised: January 2014

Psych: November 2014

University Human Research Ethics Board (UHREB)

Human Ethics Checklist
UNDERGRADUATE STUDENT USE ONLY

***** Faculty AND Graduate Student ethics applications MUST be submitted using Web Grants *****

This *Checklist*, a typed project description, and relevant attachments are required for all human participant ethics review proposals. Before preparing submissions, read the *UHREB Policies and Procedures*, complete the online CORE ethics tutorial found at http://pre.ethics.gc.ca/eng/education/tu(orial-didacticiel/ and check the current schedule of Departmental Ethics Committee (DEC) and UHREB submission deadlines. Submissions requiring full UHREB review that are received past deadline will not be reviewed until the subsequent deadline period. Incomplete proposals will be returned for completion and resubmission.

Please check off the following list to ensure that you have included all necessary materials. If there is no blank line provided under N/A below, the item must be included.

Included	N/A	
_____		This Ethics Checklist, **signed**, with all relevant items completed
_____	_____	Notes explaining Ethics Checklist responses that raise ethical questions
_____	_____	Copies of all research instruments
_____	_____	Copy of consent form(s) or description of other consent procedures
_____	_____	Method of obtaining informed consent, or rationale for no consent procedure
_____	_____	Letters of approval from cooperating external agencies, or an undertaking to provide these before the study begins
_____		**A separate project description meeting the following criteria**:
		Maximum eight (8) pages (restriction does not apply to grant proposals, which may be attached instead of a project description), typed and proofread, with all technical terms and procedures explained and acronyms expanded upon first use
_____		Clearly stated rationale for the research/scholarship, including purpose and anticipated benefits (scholarly and/or other)
_____		Number of participants, criteria for inclusion and
_____		exclusion Conditions of participation (volunteer,
		course credit, etc.)
_____	_____	Indication of whether there are inducements to participate or disincentives for not participating
_____		Procedures for ensuring anonymity and confidentiality, or rationale for their absence
_____	_____	Method of ensuring security of the data collected
_____		Intended uses of the resulting data/findings/scholarship
_____	_____	Identification of any potential risks/harms to participants, and of steps to be taken to prevent or minimize these
_____	_____	Discussion of any additional aspects of this research/scholarship that raise ethical concerns
_____		Complete the Online Course on Research Ethics (CORE) and print "Certificate of Completion"
_____	_____	**ONE complete e-copy** of the full protocol submission with all attachments emailed to Karen Barkhouse, Psychology Department Research Coordinator and Program Officer at **k.barkhouse@uwinnipeg.ca**

Project Identification Information *Please print or type responses.*

1. Name:	**2.** Department:
3. Phone:	**4.** E-mail:

5. Please check one:

_____ Chief Investigator _____Student Investigator

6. If student, indicate name and department of supervisor

Name:	Department:

7. Name(s) of Co-Investigator(s):

8. Title of Proposal:

9. Funding Status:

___ unfunded
___ funding applied for from _____ (funder)
___ funding received from _____ (funder)
___ contract research for _____(client)

10. Anticipated Commencement Date (month/year):	11. Anticipated Completion Date (month/year):

12. List all research instruments, including questionnaires and reproductions or descriptions of visual or other sensory or electronic stimuli. For observational research, list documents describing Observation Protocols and/or Coding Categories. For interviews, list either Interview Questions or Interview Protocol (detailed description of interview parameters). Include self-constructed, standardized, and/or commercial research instruments. All listed items must be attached to submission.

FOR RESEARCH OFFICE USE ONLY

Date Received:	Protocol Number:

Ethics Checklist Instructions

To complete Checklist items, circle Yes or No, and/or write in the required information. If any of the answers circled are underlined (Yes or No), an ethical issue arises that requires you either to reconsider your procedures, or to provide additional information. **In the latter case, attach a written note explaining the pertinent circumstances and the provisions you will make to ensure ethical practices, and/or elaborate in the project description.**
This Checklist covers only a portion of the ethical considerations involved in research/scholarship with human subjects/participants. More information is available in the full text of the *Tri-Council Policy Statement (TCPS)* available from the Research Office or on-line at: http://www.pre.ethics.gc.ca/english/policystatement/policystatement.cfm. Your discipline may also have research ethics guidelines relevant to your study. Furthermore, no set of policies or guidelines can cover all of the ethical considerations that might arise in research/scholarship, and therefore you should be aware that further issues and considerations might arise as ethics review proceeds. If so, you will be contacted by the Departmental or Senate ethics committee involved.

Section A:

Please Circle One

1. Before giving their consent to participate, will the subjects/participants be informed fully of the nature of their research involvement, and of all features of the research/scholarship that reasonably might be expected to influence their willingness to participate? — Yes / No

Note: *In this question and several others below, it is assumed that persons studied are aware that they are subjects/participants, and that informer consent is possible. For some research/scholarship (e.g., some kinds of observational research), these assumptions may not be valid. If this is the case, the circumstances should be described fully in the project description. A single notation may be made in the margin here indicating one location in your project description at which an explanation for several question responses may be found.*

2. Will free and informed consent procedures be used both at the outset of the subject's participation, and thereafter throughout the study (e.g., by notifying subjects/participants of any later changes or developments that might influence informed consent, and seeking further consent to these)? — Yes / No

3. Will the subjects/participants be told that they can discontinue their participation at any time without incurring any penalties for doing so? — Yes / No

4. Does the study involve temporarily misleading the subjects/participants as to the study's purposes, incomplete disclosure of the study's purposes, or temporary concealment of other information (e.g., staged occurrences, having subjects/participants do one thing while in fact something else they do is being observed, etc.)? — Yes / No

Note*: In some areas of social science research, undetailed statements of the study's purposes are given in order to avoid over-sensitizing subjects/participants to some variable under study. Here, ethical assessment involves whether or not undisclosed information reasonably could be expected to affect informed consent. The greater the*

degree of temporary concealment, the higher the level of risk. Describe fully any temporary concealments or incomplete disclosures in the project description, explaining the reasons for them. Also, see Question 40.

5. Will the people studied be aware that they are the subjects of your research/scholarship? Yes <u>No</u>

6. Will subjects'/participants' written consent be obtained, or if this is inappropriate, will an alternative method of obtaining informed consent be used? Yes <u>No</u>

***Note**: Normally, written consent is required. If this is culturally unacceptable, or if other good reasons exist for not obtaining written consent, an alternative procedure for obtaining free and informed consent should be documented (in the project description, and/or attached as a separate document).*

7. Will informed consent information include a statement of the research Purpose, the identity of the investigator(s), the expected duration and nature of participation, a description of research procedures, and a description of any foreseeable harms and benefits that may arise from participation? Yes <u>No</u>

8. Will the information describing the study and the materials used to seek consent be worded in language clearly comprehensible to the subjects/participants? Yes <u>No</u>

9. Are you and/or your associates in a position of power vis-à-vis the subjects/participants? <u>Yes</u> No

10. Do you foresee that the subjects/participants might feel or perceive any degree of manipulation, coercion, constraint, or undue influence concerning any aspect of their participation in the study? <u>Yes</u> No

11. Will there be any actual or perceived material inducements to participate that exceed reasonable compensations for such things as transportation, unusually lengthy time demands, etc.? <u>Yes</u> No

12. Will there be any actual or perceived social inducements to participate that exceed such things as interest in the research, an interesting activity, etc.? <u>Yes</u> No

13. Will there be any actual or perceived disincentives for not participating in the research? <u>Yes</u> No

14. Is the confidentiality of the subject's/participant's identity positively ensured? Yes <u>No</u>

***Note:** Regarding Questions 14 and 15, there may be situations in which the subjects/participants agree to or even seek public identification. If this applies, explain, and also provide an assurance that you will obtain consent to revealing subjects'/participants' identities.*

15.	Are there circumstances under which the subject's/participant's identity might be deduced by someone other than the investigator if the study results are presented publicly?	Yes	No
16.	Will any promises be made to subjects/participants, or to cooperating external agencies, that the investigator later might have difficulty fulfilling?	Yes	No
17.	Does the study involve physical stress (or the expectation thereof) such as might result from heat, noise, electric shock, pain, sleep loss, physical deprivation, drugs, alcohol, etc.?	Yes	No
18.	Do you foresee that the study might result in the subject's/participant's experiencing mental discomfort (e.g., fear, anxiety, loss of self-esteem, shame, guilt, embarrassment, becoming aware of personal weaknesses)?	Yes	No
19.	Will the investigator attempt to induce long-term change in subjects'/participants' behavior or attitudes?	Yes	No
20.	Does the study involve any potential risks to third parties who are not participants in the research?	Yes	No
21.	Will any individually-identifiable information about subjects/participants be disclosed without their informed consent (e.g., to teachers, doctors, therapists, parents, employers, other researchers, etc.)?	Yes	No
22.	Will written feedback on the outcome of the research/scholarship be made available to participating individuals and agencies/institutions?	Yes	No
23.	Could public presentation of the study's results possibly harm either the subject/participant, or his/her membership group?	Yes	No
24.	Will the investigator report to the Departmental and University ethics committees any adverse subject/participant responses to the research/scholarship that exceed the level of adverse responses anticipated and provided for in the project description? ***Note:*** *Adverse responses include, for example, emotional distress, physical distress, objections to the conduct of the research/scholarship that cannot be resolved by discussion, etc.*	Yes	No
25.	Will the investigator explain to the subjects/participants that if they are dissatisfied with the study procedures, they may talk to the Chair(s) of the Departmental and/or University ethics committees, and will the investigator provide them with contact information for these persons?	Yes	No
26.	Has the investigator taken all possible steps in the design of the study to balance potential harms to the subjects/participants against potential benefits of the research/scholarship?	Yes	No

Answer the remainder of Section A as applicable, indicating N/A beside each item that does not apply:

27.	If the investigator plans to induce short-term behavioral or attitude change, will such change definitely be reversible?	Yes	No	N/A
28.	If individual feedback is given to subjects/participants (e.g., tests scores or other comparative-standing information), will information also be presented on the validity, reliability, and appropriateness of norms for the individual?	Yes	No	N/A
29.	If private materials (documents, third-person interview contents, etc.) provided by the subject will be made public as a consequence of the scholarship/research, will due care be taken to obtain subjects'/participants' written consent, and otherwise to avoid infringing on the subjects'/participants' rights?	Yes	No	N/A
30.	If the study takes place within or in cooperation with an institution or agency (e.g., schools, day care centres, churches, seniors' homes, hospitals, social work agencies, playgrounds, prisons, etc.), has written approval been obtained from its administrators? ***Note**: Attach copies. If no letters of approval can yet be provided (e.g., because agency approval is contingent on University ethics approval), attach an explanatory note undertaking not to begin research before you are in receipt of approval letters, and to submit copies of such letters to Research services immediately upon receipt.* ***Note also**: The requirement of approval from external institutions may not apply in instances where it would interfere with free inquiry. If so, explain.*	Yes	No	N/A
31.	If the subjects/participants are children (under age 18), will written parental or guardian consent be obtained?	Yes	No	N/A
32.	If a written consent form is used, will copies be given to the subjects/participants to retain?	Yes	No	N/A
33.	If the subjects/participants are legally or otherwise incompetent to provide informed consent, will the written consent of authorized third parties be obtained?	Yes	No	N/A
34.	If the subjects/participants are not legally competent, is there any other legally-competent group that could be studied in order to address the research question?	Yes	No	N/A
35.	If the subjects/participants are drawn from institutionalized or otherwise "captive or dependent" populations (e.g., in prisons, hospitals, psychiatric facilities, mandatory treatment programs, etc.), will special care be taken to ensure that consent is given freely, and that no actual or perceived coercion, constraint, or undue inducement to participate is present? ***Note**: In your project description, be sure to describe clearly how this will be achieved.*	Yes	No	N/A

36. If the consent of a parent or an authorized third party is obtained, will each subject/participant also be informed independently of his/her right to decline to participate at any point in the study? Yes No N/A

37. If the study will be conducted in a country other than Canada, and/or under the jurisdiction of an institution other than the University of Winnipeg, and if an ethics review body that has jurisdiction in that country or institution exists, will the study undergo review by that ethics body before the research begins? Yes No N/A

***Note**: If so, please attach documentation, or attach a note undertaking to provide documentation to Research Services immediately upon receipt.*

38. If there is any possibility of physical danger or harm to the subjects/participants will all necessary and prudent measures be taken to ensure their safety (e.g., from dangers such as electrical shock, lack of oxygen, falls, traffic or industrial accidents, the possibility of hearing or vision loss, etc.)? Yes No N/A

39. If subjects/participants have initially formed any false impressions about the purposes of the study or the nature of information collected, if the study purposes were not completely disclosed initially, or if any information was concealed temporarily, will full disclosure be made at the conclusion of data collection? Will the reasons for false impressions, concealment, or incomplete disclosure be explained; and will subjects/participants then be given the opportunity to withdraw their data/information, should they so choose? Will everything possible be done to re-establish trust and respect? Yes No N/A

40. If information on subjects/participants will be obtained from third parties (e.g., institutions, doctors, other researchers, etc.), will subjects/participants be so informed, and will their written consent be obtained? Yes No N/A

41. If any adverse subject responses to the study are anticipated, have procedures been devised to ameliorate such responses? Yes No N/A

42. If the possibility of commercialization of the research findings exists, will the subjects/participants be so informed? Yes No N/A

43. If there is any actual or apparent conflict of interest on the part of the investigator(s), their institutions, or their sponsors, will the participants be so informed? Yes No N/A

44. If the research/scholarship involves secondary uses of already-collected data or information regarding identifiable individuals, will appropriate measures be taken to ensure the privacy of the individuals and the confidentiality of the data, and to minimize potential harms to subjects/participants? Yes No N/A

45. If secondary use is to be made of already-collected data or information regarding identifiable individuals, will appropriate measures be taken to ensure the privacy of the individuals and the confidentiality of the data, and to minimize potential harms to subjects/participants? Yes No N/A

46. If the study concerns generic behaviors/characteristics that are not specific to particular, identifiable social or cultural groups (e.g., child poverty, access to legal services), will any persons be excluded from participation on the basis of culture, religion, race, ethnicity, mental or physical disability, sexual orientation, sex, or age? Yes No N/A

47. If information is to be presented to and/or collected from subjects/participants in a language that the investigator does not speak/understand fully, will every possible effort be made to ensure that translation is as clear and accurate as possible? Yes No N/A

48. Does the study include the use of personal health information? The Manitoba Personal Health Information Act (PHIA) outlines responsibilities of researchers to ensure safeguards that will protect personal health information. If yes, in an attachment to this checklist, please indicate provisions that will be made to comply with this Act. Yes No N/A

Note: *See document for guidance online at*: http://www.gov.mb.ca/health/phia/index.html

Answer Questions 49 – 54 if your project involves sub cultural, cultural, national, ethnic, or religious group characteristics as a focus of study.

Otherwise, indicate N/A for this section……..……N/A

49. Will the investigator ensure that privacy (as defined from the standpoint of the subjects/participants) will be respected? Yes No N/A

50. Will the investigator ensure the accurate description of customs, community, and heritage? Yes No N/A

51. In the case of field work in which informed individual consent **cannot** be obtained because of cultural constraints, has the investigator devised methodological safeguards to protect the subjects/participants fully? Yes No N/A

Note*: If so, describe these fully in the project description or in an attached note.*

52. If the study involves Aboriginal peoples or subcultural, cultural, national, ethnic, or religious groups, and if individuals are to be interviewed, will the investigator exercise caution in generalizing findings for these individuals to the culture or group as a whole? Yes No N/A

Note: *Explain fully how this will be done, e.g., by representing differing viewpoints that may exist within the community, and/or consulting community institutions and representatives, etc.*

53. If the study involves Aboriginal peoples or subcultural, cultural, national, ethnic, or religious groups, will the investigator cooperate with community institutions, consult within the community, and/or otherwise ensure that the group has been informed and involved as fully as is appropriate and possible concerning the study? Yes No N/A

54. If the study involves Aboriginal peoples or subcultural, cultural, national, ethnic, or religious groups, will the investigator provide the community with an appropriate opportunity to react to the study's findings before they are presented publicly? Yes No N/A

Note: *If the community, or segments of it, disagree with the findings after considered discussion and exchange, the investigator should undertake to provide an opportunity to make the community's views known, and/or should report accurately the contents of such disagreements in any public presentations of the study.*

Answer all of Questions 55–60 only if your study involves the purchase or acquisition of manuscripts, documents, or artifacts.

Otherwise, indicate N/A for this section……..……N/A

55. Will the investigator ensure that the acquisition of materials will be for the sole purpose of research/scholarship, and not for personal gain, private collection, or sale? Yes No N/A

56. Will the acquisition of materials meet the legal requirements of the country of origin? Yes No N/A

57. If legal ownership of materials is in doubt, will the investigator inform the proper authorities of the country concerned, and abide by their decision regarding disposition? Yes No N/A

58. Will the investigator ensure proper storage, protection, security, and cataloguing of acquired materials? Yes No N/A

59. If acquired materials are to be deaccessioned or discarded after use, will the investigator ensure that they are first offered to public or educational institutions in the area of origin, then offered to Canadian institutions, and/or otherwise made accessible in the public domain? Yes No N/A

60. If the acquired materials are publicly exhibited, discussed, or published, will the investigator attempt to ensure that no undue embarrassment is caused to the individuals, groups, or countries of the materials' origin? Yes No N/A

Section B: Signature(s) **To be completed for all projects**

B1. Please indicate the **type of review** you are requesting. (See *Policies and Procedures* for definitions and criteria.)

____1 year Expedited Review (Available **only** for minimal risk projects)	**____2-2-1 Expedited Review** (Available **only** for minimal risk projects)	**____Full Review** (Review type for moderate risk proposals)	**____ Student (Honours Thesis) and Course Project Review** (Departmental review only, minimal risk proposals)

B2. 2-2-1 Expedited Review. If you are choosing a 2-2-1 review, please indicate why this type of ethics review is necessary for your research.

B3. Please disclose any real or apparent material or personal conflicts of interest that any of the investigators may have regarding relationships with potential subjects/participants, and/or regarding potential uses of the research/scholarly findings. Indicate how such conflicts will be resolved in an ethical manner.

B4. Your signature(s) below indicate that you (cross off any that do not apply):

- have read the *UHREB Policies and Procedures*
- have read the portions of the *Tri-Council Policy Statement (TCPS)* relevant to the research **AND** the ethical research guidelines of _____
  (insert name of professional and/or scholarly association most relevant to the research, other than the TCPS)
- agree to abide by the policies and guidelines listed above
- have disclosed all actual or apparent conflicts of interest
- have disclosed all aspects of the study relevant to ethical review
- believe this submission to be complete
- agree to report to Research Services all adverse subject/participant responses that exceed the levels anticipated and provided for in this submission
- will conduct the study as described in this submission, if approved
- will reapply if any of the procedures change substantively
- will comply with all conditions upon which approval may be contingent

Signature of chief or student investigator:	**Date:**
If student, signature of supervisor:	**Date:**
Signature(s) of co-investigator(s):	**Date:**

Section C: Risk Assessment **To be completed for all projects**

C1. Please identify briefly any risks of participation in this study that **exceed** the risks that subjects/participants encounter in the aspects of their daily lives that relate to the research/scholarship:

C2. Please check below your assessment of the **level of risk** of the proposed study (see *Policies and Procedures* for definitions):

____ Minimal Risk	**____ Moderate Risk**	**____ Significant Risk**
(Nothing listed for Question 1 above)	(Exceeds the standard of everyday-life risk, is moderately invasive, involves a degree of temporary concealment or incomplete information that might influence informed consent, involves vulnerable persons, and/or meets other criteria listed in *Policies and Procedures*)	(See *Policies and Procedures*)

C3. Depending upon the duration, risk level, and other features of the proposed study, ongoing monitoring, reporting, and/or review may be required. Please propose the procedures that should be applied (e.g., an end-of-project report, regular periodic reports, meetings with Departmental or Senate ethics committees at regular intervals, visits by committee members to the research site, re-review at scheduled intervals, etc.). **If you propose that no ongoing procedures be applied, please explain why in the space below.**

C4. If your project involves **more than minimal risk**, scholarly peer review may be required in order to demonstrate that the method is capable of answering the questions posed, and/or to determine whether potential benefits of the research/scholarship outweigh potential harms to subjects/participants. Are you currently in possession of existing scholarly reviews that could be submitted, should the need arise?

_____Yes _____No

Section D: Consent Form

Consent Form Checklist

To be completed for all projects

Please complete the following Consent Form Checklist by circling the answer that best suits. The following list is to ensure that all of the necessary elements of a Consent Form(s) have been addressed. If you circle "No" or "N/A" for any of the items listed below please provide brief explanation in the area at the bottom of the page.

1.	The University of Winnipeg's letterhead is used	Yes	No	N/A
2.	Identity of the researcher and contact information	Yes	No	N/A
3.	Description of research topic/question including but not limited to: o SONA study name; o nature of participation, including for on-line or in–person; o duration as to how long participation takes and total SONA credit value, o research procedures and also whether there are any pre-existing participation eligibility requirements.	Yes	No	N/A
4.	Risks and benefits of participation	Yes	No	N/A
5.	State how feedback is provided to the participants	Yes	No	N/A
6.	Anonymity	Yes	No	N/A
7.	Confidentiality	Yes	No	N/A
8.	Point of withdrawal and refusal to answer questions For example, "Participants may refuse to answer any question(s) and may withdraw at any time before ***publication*** without consequence."	Yes	No	N/A
9.	Data storage, length of retention, and method of disposal	Yes	No	N/A
10.	UHREB contact information: Heather Mowat, Program Officer University Human Research Ethics Board, 204-786-9058, ethics@uwinnipeg.ca	Yes	No	N/A
11.	Department of Psychology Ethics Chair contact info: Hinton Bradbury, 204-786-9145 h,bradbury@uwinnipeg.ca	Yes	No	N/A
12.	Copy of the consent form provided to all participants	Yes	No	N/A

Researcher Comments:

PSYCHOLOGY DEPARTMENTAL ETHICS COMMITTEE REVIEW 13
(For Committee use only)
Reviewer # 1 **Psych: Nov/14**

Review (Check all that apply)
___ I have reviewed this submission to ensure completeness. ___ This submission appears to comply with *Policies and Procedures*, the Tri-Council Policy, and relevant disciplinary ethics guidelines. ___ All relevant ethical issues appear to have been addressed in this submission. ___ I recommend the following conditions of approval (regarding methods, monitoring, reporting, and/or ongoing review):
Approval Recommendations *Note: Unless otherwise recommended above, approval is in effect for one year only.*
___ **I approve of** the procedures proposed in this submission (subject to any conditions listed above). ___ **I do not approve of** the procedures proposed in this submission.
Type of Review Recommended
___ The investigator has requested Departmental Review, and I **recommend Departmental Review**. ___ The investigator has requested Departmental Review, but I **do not recommend Departmental Review.** ___ The investigator has requested Expedited Review, and I **recommend Expedited Review**. ___ The investigator has requested Expedited Review, but I **do not recommend Expedited Review**. ___ **I recommend Full Review**.
Additional Comments (optional)

Print/type name Departmental Ethics Committee Member:	**Department:**
Signature of Departmental Ethics Committee Member:	**Date:**

PSYCHOLOGY DEPARTMENTAL ETHICS COMMITTEE REVIEW
(For Committee use only)
Reviewer # 2

Psych: Nov/14

Review (Check all that apply)
___ I have reviewed this submission to ensure completeness. ___ This submission appears to comply with *Policies and Procedures*, the Tri-Council Policy, and relevant disciplinary ethics guidelines. ___ All relevant ethical issues appear to have been addressed in this submission. ___ I recommend the following conditions of approval (regarding methods, monitoring, reporting, and/or ongoing review):
Approval Recommendations *Note: Unless otherwise recommended above, approval is in effect for one year only.*
___ **I approve of** the procedures proposed in this submission (subject to any conditions listed above). ___ **I do not approve of** the procedures proposed in this submission.
Type of Review Recommended
___ The investigator has requested Departmental Review, and I **recommend Departmental Review**. ___ The investigator has requested Departmental Review, but I **do not recommend Departmental Review.** ___ The investigator has requested Expedited Review, and I **recommend Expedited Review**. ___ The investigator has requested Expedited Review, but I **do not recommend Expedited Review**. ___ **I recommend Full Review**.
Additional Comments (optional)

Print/type name Departmental Ethics Committee Member:	**Department:**
Signature of Departmental Ethics Committee Member:	**Date:**

UHREB REVIEW
(For Full Review only)

Review Status (Check all items that apply):
___ This submission has undergone Full Review. ___ The following items are outstanding and must be submitted **before the study commences**: ___ The following items are outstanding and must be submitted **immediately upon receipt by the investigator**, but the study may commence before they are submitted:
Approval Status (Check all items that apply):
___ This submission has been approved provisionally following Expedited Review. ***Note**: Approval will be reviewed at the next UHREB meeting. The investigator will be notified **only if further review is required**.* ___ Following Full Review, the procedures proposed in this submission have been **approved**. ___ Following Full Review, the procedures proposed in this submission **have not been approved**. ___ The following items are conditions of approval:
Additional Comments (optional):
Print/type name of UHREB Chair:

Signature of UHREB Chair:	**Date:**