ETHICS COMMITTEE APPLICATION FORM

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| Thesis Title: |  |
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| Applicant's | Name Surname: |
| Job: |
| Department/Unit: |
|  |  |
| Application Date: |  |

Full Title of the Research

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Abstract of the Research (not exceeding 400 words)

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# 2. Information about the applicants

Contact information (Address, e-mail, and phone number of the Research Manager)

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Other Researchers Who Take Part in the Thesis

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| --- | --- | --- | --- | --- |
| *Title and Name* | *Their*  *Institution* | *Department / Unit* | *Phone* | *E-mail* |
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Students Who Take Part in the Thesis

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| --- | --- | --- | --- | --- |
| *Name Surname* | *Their*  *Institution* | *Class Year* | *Department* | *E-mail* |
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The roles of all researchers involved in the project, including external researchers and students, in the framework of the thesis

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# Details of the Application

2.1 Have you previously applied to another Ethics Committee for approval for this study?

## **YES** **NO**

If your answer is Yes, please specify which institution the application was submitted to and the details of the application.

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2.2 If any part of this study will take place under the auspices of an institution other than Istanbul Kent University (for example, a hospital), please provide details about this institution and the address of the institution.

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2.3 Duration of the Thesis

Start date: Estimated Completion Date:

# 3. Details About the Thesis

3.1 Explain the purpose of the proposed research.

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3.2 Briefly describe the research design, method, and analysis plan that you will use in the research.

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3.3 What are the ethical problems that may arise in this research and how do you envisage solving them?

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3.4 What benefits will this research provide to participants, third parties and/or public?

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3.5 Will a medically or surgically uncomfortable procedure be performed in the study?

YES  NO

3.6 If your answer is “Yes,” what measures do you plan to take to minimize possible harm?

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3.7 Will a psychologically or socially disturbing procedure be performed in the research?

YES  NO

3.8 If your answer is “Yes,” what measures do you plan to take to minimize possible harm?

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3.9 Please provide information about the structure, duration, and frequency of these procedures (if any).

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# 4. Information about the Participants

4.1 What is the number of participants who will take part in the research?

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4.2 What is the age group and gender of the participants?

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4.3 Explain the sampling size you will use and your sampling selection criteria.

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4.4 How and by whom will the participants be determined?

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4.5 How and by whom will the participants be contacted?

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4.6 If permission is to be obtained from the participants and / or their guardians, please specify how and by whom this permission will be obtained.

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4.7 Are there any pressure situations that would make it difficult for the participants to participate in the research? If the prospective participants are in a dependency relationship with the researchers (for example, if they are a student, colleague, or employee of the researcher), please indicate it.

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4.8 Please indicate the place where the research will be conducted.

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4.9 Please indicate the health and safety conditions, if any, that must be taken into account regarding this place.

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4.10 Are the participants of the study in the following groups?

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| Minors | YES  NO |
| People with learning disabilities | YES  NO |
| Convicts | YES  NO |
| People who are in a dependency relationship with the researchers (such as the researcher's students, employees, colleagues) | YES  NO |

If your answer to any of them is “Yes,” please explain the measures you will take to prevent any situations, where said individuals will be pressured, from occurring.

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# 5.Data Collection

5.1 Which or which of the following methods will you use when collecting data?

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| Survey form | | YES  NO |
| Interview | | YES  NO |
| Observation of participants | | YES  NO |
| Focus groups | | YES  NO |
| Interview or voice recording of the events | | YES  NO |
| Video recording | | YES  NO |
| Physiological measurements | | YES  NO |
| Quantitative research (please explain) | | YES  NO |
| Other (please explain) | | YES  NO |
| Explanations |  | |

5.2 What measures will you take to protect the right to privacy of participants, including companies?

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5.3 If the interview or focus group method is to be used, please indicate the topics that are planned to be discussed.

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# 6. Confidentiality and Protection of Data

6.1 Which of the following are foreseen in the research?

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| • Absolute anonymity of participants (The researchers will not meet the participants or learn the identities of the participants in any way) | | YES  NO |
| • Anonymization of the data or sample irreversibly  (The signs showing the identity of the participants will be irreversibly replaced with codes after the data is collected.) | | YES  NO |
| • Anonymization of the data or sample reversibly  (The signs showing the identity of the participants will be replaced with codes in such a way that the researcher in charge can change them back after collecting the data) | | YES  NO |
| • Giving pseudonyms to the subjects in the publications to be made based on the research (Please explain.) | | YES  NO |
| • Other methods to protect the privacy of participants (Such as using their real name only with written permission. Please explain.) | | YES  NO |
| Explanations |  | |

6.2 Methods to be applied for reliable protection of data

*Please mark all the correct options.*

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| • The data will be stored in a locked cabinet. | | YES  NO |
| • Computer files will be accessed with a password. | | YES  NO |
| • The data will be stored at Istanbul Kent University. | | YES  NO |
| • The data will be stored somewhere other than Istanbul Kent University. | | YES  NO |
| If the data will be stored somewhere else, specify where it is. |  | |

6.3 Who will have the right to access the data?

Only the researchers indicated in this file YES  NO

People other than the indicated researchers YES  NO

Please specify who these people are and for what purpose they will access the data.

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6.4 Data destruction

When and how do you plan to destroy the data? Please explain.

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7. ANNEXES

ANNEX1. PARTICIPANT INFORMATION AND CONSENT FORM

I hereby declare and undertake that the information I have provided above is complete and accurate, that the research subject to this application will be conducted in accordance with the principles set out in the Ethics Committee Directive and Working Principles of Istanbul Kent University, and that it is my responsibility.

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|  | Name and Surname | Signature |
| Research Manager (If it is a student project, faculty member with the student and the project manager) |  |  |
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