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**Departmental Ethics Review Committee (DERC)**

**Department of English, Linguistics and Theatre Studies**

*[PLEASE DELETE ALL TEXT IN BLUE]*

*Please delete all of the text in blue from your finalized document. Please include your* ***version number and date*** *(e.g. Version 1 dated dd/mm/yyyy) on the right footer of every page of the document, as well as in the file name of your document (e.g., DERC Application Form\_V1\_ddmmyy.doc) – please follow this file-naming format for all of your submitted documents. Note that V1 should be the first version you submit to the DERC.*

**DERC APPLICATION FORM FOR SOCIAL,**

**BEHAVIOURAL & EDUCATIONAL RESEARCH (SBER)**

**Please refer to the guidelines for DERC Application Form (SBER studies) before completing this.**

**I. BASIC INFORMATION**

**Protocol Title:**

**Simplified Title (*if Protocol Title is too long and/or technical*):**

(for use in recruitment documents, e.g. Participant Information Sheet & Consent Form, advertisements)

**Principal Investigator (Applicant):**

Title:

Name:

Position:

Dept./Institution: English, Linguistics and Theatre Studies (ELTS)

Faculty members whose protocol qualifies for exempt status may use the exemption form instead of this form. Students should use this form for any project submitted to the DERC. Any project that is more than minimal risk should be submitted to NUS-IRB.

*(please complete section III for all co-investigators)*

**Purpose of Research:**

[ ]  PhD/ MA Thesis [ ]  Honours Thesis [ ]  Qualifying Examination [ ]  Independent Study Course

[ ]  Private Research [ ]  Others – please specify: \_\_\_\_\_\_\_\_\_\_\_

Financial Declaration\*:

[ ]  Grants, Source of funding: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[ ]  Department Funding [ ]  Others, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[ ]  No Funding

The financial benefits or other benefits derived from this study to the PI/Co-I(s)/Department/ Institution are as follows (if any): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Amount of Sponsorship/Grant: $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Status of grant: [ ]  Approved [ ]  Pending [ ]  Not applicable

*\* Please note that DERC can review student research with no funding, is self-funded, or funded by internal NUS grant/funding. Student research that is externally funded to be sent to IRB for review.*

Research Participants Will Be:

[ ]  Reimbursed $\_\_\_\_\_ [ ]  Not reimbursed [ ]  Others – please specify: \_\_\_\_\_\_\_\_\_\_\_

Has this research been rejected by any IRB / REC / DERCs?

[ ]  No [ ]  Yes If yes, please provide details.

Study Site(s):

Site(s) of research (including PI’s Dept. & Institution): ELTS, NUS (add any additional institutions if applicable)

[ ]  Single-centre study

[ ]  Multi-centre study (only select if there is official collaboration with organisations outside NUS)

[ ]  Overseas research (**for research involving data collection from mainland China, please submit to NUS-IRB for review**)

This research is also submitted to or has been approved by:

[ ]  NHG Domain-Specific Review Board (DSRB) A / B / C / D / E / F

[ ]  SingHealth Centralized IRB (CIRB) A / B / C / D / E / F [ ]  **Not Applicable**

**II. DECLARATION OF THE PRINCIPAL INVESTIGATOR**

The information provided in this form is correct.

1. I will not initiate this research until I receive written notification of DERC approval and any other approval from relevant authorities (local/overseas) (if applicable).
2. I will not initiate any change in protocol without prior written approval from DERC except when it is necessary to reduce or eliminate risk to the subject.
3. I will promptly report any unexpected or serious adverse events, unanticipated problems or incidents that may occur in the course of this research.
4. I will maintain all relevant documents and recognize that the DERC staff and regulatory authorities may inspect these records.
5. I understand that failure to comply with all applicable regulations, institutional and DERC policies and requirements may result in the suspension or termination of this research, and other actions as stated in the NUS Code & Procedures on Research Integrity.
6. I declare that there is no existing or potential conflict of interest for any of the investigators participating in this research.

Remarks (if any):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Principal Investigator’s signature Date

Phone: Fax:

Mailing Address:

Email:

**\*Please state the name and email address of the person(s) to copy to in the DERC (ELTS)’s acknowledgement email. If no name(s) is listed, the DERC Secretariat will only correspond with the PI.**

1.

2.

**III. CO-INVESTIGATORS**

*All co-investigators who have a responsibility for the consent process or direct data collection for this research should be listed below. Multiple copies of this form may be submitted as necessary. All co–investigators need not sign on the same form.*

Name: Email:

Position: Phone:

Department: Fax:

Institution:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Co-investigator Date

Name: Email:

Position: Phone:

Department: Fax:

Institution:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Co-investigator Date

Name: Email:

Position: Phone:

Department: Fax:

Institution:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Co-investigator Date

**IV. DECLARATION OF THE HEAD OF DEPARTMENT\***

I declare that this research is approved by the department and is in keeping with the department’s standards.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Head of Department Date

Name of Head of Department:

Title:

\* If the PI or co-investigator is the Head of PI’s Department, this section should be completed by the Vice-Dean (Research) or Dean of the Faculty.

**V.** **Detailed Information**

**1 Study Introduction**

**Abstract:** Provide an abstract of this study that includes the following information (in no more than 300 words):

 **Specific Aims**:

**Hypothesis:** *State N/A if not applicable.*

**Preliminary Studies:** State those studies relevant to this project. *State N/A if not applicable*.

**2 Methodology**

1. **Type of Study:** Select as applicable:

[ ]  Archived/ Existing Data (attach supporting documents, if any);

[ ]  Questionnaire/ Survey/ Interview/ Focus Group Discussion (FGD) (attach questionnaire/ survey/ interview guide/ FGD guide, if available);

[ ]  Observations;

[ ]  Interventions/ Experiments;

[ ]  Educational Research;

[ ]  Use of non-Medical Devices;

[ ]  Deception: (attach debriefing statement);

[ ]  Other(s), please describe.

1. **Procedures**: Describe the research procedure.

Describe what steps will be involved in the research. If the research involves subject research visits and/or remote data collection sessions, state what will happen in each session and the frequency and duration of each session.

1. **Study Sites:** Will research procedures be conducted in non-NUS premise(s)? [ ]  **Yes** [ ]  **No**

**If *Yes*,** please state premise(s).

1. **Anticipated Study End Date:** (Please provide reasons for an end date that is longer than the candidature period).

**3 Study Participants**

1. **Participant Groups:** Select participant group(s) as applicable, and specify the target number(s), lower age limit(s) and upper age limit(s) for each group:

[ ]  Healthy Adults; TARGET NUMBER OF PART., AGE RANGE (if research site is in Singapore, adult age is 21 and above for non-NUS students and 18 and above for NUS students. Age of adulthood should be determined by local laws of data collection location.)

[ ]  NUS students (including Duke-NUS & Yale-NUS) (at least 18 years old); TARGET NUMBER OF PART., AGE RANGE

[ ]  Children below 21 years old who are not NUS Students; TARGET NUMBER OF PART., AGE RANGE

[ ]  Elderly with mental capacity (state how mental capacity will be screened); TARGET NUMBER OF PART., AGE RANGE

[ ]  Individuals who lack mental capacity (state how lack of mental capacity is determined); TARGET NUMBER OF PART., AGE RANGE

[ ]  Vulnerable Populations (state type of vulnerable population) ; TARGET NUMBER OF PART., AGE RANGE

2. **Total number of Study Participants:**

3. **Inclusion Criteria (include minimum and maximum age):**

4. **Exclusion Criteria:**

 [ ]  Those who do not meet the inclusion criteria

 [ ]  Other:

5. **Relationship with Researchers**: Are there any participants in a dependent relationship with the researchers? [ ]  **Yes** [ ]  **No**

**If *Yes*:**

1. Explain the dependent relationship(s) in detail and the mitigating measures to prevent cases where participants agree to participate while under duress, by coercion, intimidation, deception or misrepresentation. Please note that research participants who are in a dependent relationship with the researchers should not be approached directly during recruitment, in order to prevent situations where participants consent under duress.
2. PI will prevent cases where participants agree to participate while under duress, by coercion, intimidation, deception or misrepresentation. ☐ **Yes**

**4 Recruitment**

1. **Where will participants be recruited from?:**

[ ]  General Public;

[ ]  NUS

[ ] NUS students

[ ]  NUS staff

[ ]  Organisations/ Agencies/ Companies/ Institutions/ Schools.

* + 1. Specify Organisations/ Agencies/ Companies/ Institutions/ Schools.
		2. Confirm permission will be obtained from relevant authorities for recruitment of their staff/ clients/ students or on their premises: [ ]  **Yes** [ ]  **Not Required**

If not required, please explain why?

* + 1. Attach correspondence of willingness, if any.
1. **Overseas Recruitment:** Will participants be recruited from overseas? [ ]  **Yes** [ ]  **No**

**If *Yes*:**

1. List the countries:
2. Confirm that permission will be obtained from the relevant local authorities to conduct this research study there, if necessary. [ ]  **Yes** [ ]  **Not Required**
3. **How will participants be recruited?** Select recruitment method(s) as applicable:

[ ]  Online survey platform;

[ ]  Word of mouth/ Snowballing/ Referral/ Personal Contacts;

[ ]  Phone calls (state where phone numbers will be obtained from);

[ ]  Email invitation/ Letters (attach a copy);

* + - State where email addresses/ addresses will be obtained from.
		- State who will be sending the invitation/ letters.

[ ]  Advertisements/ Flyers/ Posters (attach a copy);

* + - Confirm permission will be obtained from the relevant authorities for the posting/ distribution of recruitment materials, if necessary.

[ ]  Social Media;

* + - Confirm permission will be obtained from the relevant platform administrators for recruitment on their social media, if necessary.

[ ]  Door-to-door recruitment (attach Notification letter);

Notification Letter should state the following details:

- Who is conducting research?

- What is research about?

- When the visit(s) will be conducted?

- Who to contact if they do not wish to be visited.

* + - Confirm that door-to-door recruitment notification letter will be sent to residents at least 2 weeks in advance prior to the visit. [ ]  **Yes**

[ ]  Other method(s), please describe.

1. Confirm that permission, where applicable, will be/ has been obtained from potential subjects for the use for their personal data (e.g. name and contact information) for recruitment purposes. [ ]  **Yes**

**5 Recording**

1. **Will the procedure(s) be recorded?** [ ]  **Yes** [ ]  **No**

**If *Yes*** (Fill in Q2 – 4 in this section):

1. **Select type(s) of recording:**

[ ]  Audio-recording;

[ ]  Video-recording (includes both video and audio channels);

[ ]  Photography.

1. Please explain how the recorded information will be used:
2. Will the recordings, excerpts from the recordings, or transcripts of those recordings be published or presented (e.g., at a conference)? [ ]  **Yes** [ ]  **No**

If Yes:

1. Confirm that the consent form will specify that the data may be published or presented. [ ]  **Yes** (note: this is a standard item included in the consent form template)
2. Confirm that any identifiable information in the recordings (e.g. faces, recorded names, etc.) will be removed/covered before any publication or presentation, unless PI has obtained prior consent from participants to include such identifying information. [ ]  **Yes** (note: this is a standard item included in the consent form template)
3. How long will the recordings be retained for:

[ ]  All recordings and research data used in any publication will be kept for a minimum of 10 years before being discarded, following the university’s Research Data Management Policy.

[ ] Other:

1. How will the recordings be disposed of:

[ ] The recordings will be permanently deleted from the PI’s laptop and hard-drive, both of which are password-protected and are only used by the PI and no one else, and from any other locations in which they have been stored.

[ ]  Other:

1. Will participants who decline recording be excluded from the study?[ ]  **Yes** [ ]  **No**

If *No*: Specify alternative.

If *Yes*: Please state in the inclusion criteria above, *“Agrees to audio-recording”*, for example.

**6 Risks and Benefits**

1. **Anticipated Benefits:** What are the anticipated benefits to the participants in this study, if any?
2. **Anticipated Risks:** What are the anticipated risks to the participants in this study, if any? If applicable, please state the mitigating factors.

**7 Reimbursement**

1. **Will participants be reimbursed for their participation? Yes / No**

**If *Yes*** (Fill in Q2 – 4 in this section):

 Indicate Type(s) of Reimbursement:

[ ]  Cash/ Voucher (please elaborate):

[ ]  Course Credit (please elaborate): (Please note that reimbursement using course credits should adhere to NUS-IRB’s guidelines (IRB-Guide-023))

[ ]  Lucky Draw (please describe): (Please note that use of lucky draw should adhere to NUS-IRB guidelines (*SBER Guidelines-Lucky Draw V1*))

[ ]  Other(s) (please describe).

1. Will participants be entitled to reimbursement if they withdraw after their participation? [ ]  **Yes** [ ]  **No**

If ***No*:** please explain.

1. Will reimbursement be pro-rated if participants withdraw from the study mid-way? [ ]  **Yes** [ ]  **No**

If ***No***: please explain.

**8 Consent**

1. **Will documented informed consent be taken?** Select as applicable:

[ ]  Yes (Note that hardcopy signed consent forms, softcopy scanned signed consent forms, or softcopy consent forms signed with e-signature are all considered documented informed consent. Please attach PIS&CF);

[ ]  No (Note that studies in which participants click a box or type their name rather than sign their name to indicate their consent are considered to not be documenting informed consent and require the waiver section to be completed below. Please attach PIS&CF, if applicable);

1. **For individuals who lack mental capacity:** Confirm that documented consent will be obtained from the deputy or the subject's next-of-kin (attach PIS&CF from deputy or next-of- kin)
2. If recruiting non-NUS students below 21 years old, or NUS students below 18 years old, please confirm that documented parental consent will be obtained. [ ]  **Yes** (Please attach parental PIS&CF and child assent form for children 6 and above)
3. **Consent Procedures:** Please specify how informed consent will be obtained and who will obtain consent.
4. **Request for Waiver:** Request for Waiver: Select as applicable:

[ ]  Not Applicable.

[ ]  Documentation of Informed Consent;

[ ]  Informed Consent (for research under SBER Exemption categories 1C and 4B);

[ ]  Informed Consent as my research involves Deception;

**Please justify how your research meets each of the following criteria:**

1. The research involves no more than minimal risk to the participants.

[ ]  The research is an anonymous survey on non-sensitive topics that collects no personally-identifiable information.

[ ] The research data consists of public social media data or other public data on non-sensitive topics.

[ ]  Other (please specify):

1. The waiver or alteration will not adversely affect the rights and welfare of the participants.

[ ]  The research is an anonymous survey; participants are already being presented with a participant information sheet and indicating their consent via a check-box or other means.

[ ] The research data consists of public social media data or other public data on non-sensitive topics; research participants will not interact with the researcher.

[ ]  Other (please specify):

1. The research cannot practicably be carried out without the waiver or alteration.

[ ]  The research is an anonymous survey; collecting signatures would involve a collection of personal data that would compromise the anonymity of the survey.

[ ] The research data consists of public social media data or other public data; contacting participants to obtain consent would be difficult or impossible.

[ ]  Other (please specify):

1. Whenever appropriate, the participants will be provided with additional pertinent information after participation.

 (Note: this section is primarily intended for studies involving deception. If this section is not relevant, please put N/A)

**Confirm that participation is voluntary and non-participation or withdrawal from the study will not have any negative impact on the participants.** [ ]  **Yes**

**9 Research and personal data protection storage**

**Will personal data be collected in this research?** [ ]  **Yes** [ ]  **No**

**If Yes** (Fill in Q1 – 8 in this section):

1. **What personal data is collected**: e.g. name, contact number, signature etc.? (Note: demographic data like age, gender, education level, and race is not considered ‘personal data’. However, note that signatures on a consent form are considered personal data.)
2. **Linkage of personal data to research data**:

Will personal data be linked to research data? [ ]  **Yes** [ ]  **No**

* 1. **If *Yes*,** confirm that personal data and research data will be coded at the earliest possible stage of the research.
		1. Code Key Holder: Who will be holding onto the key to the code?
		2. Code Key Location: At which secure/ password-protected platform will the key to the code be kept?
		3. Code Key Destruction: When will the key to the code be discarded?
	2. **If *No*,** select reason(s) for collecting personal data:

[ ]  for reimbursement and/or scheduling reasons only;

[ ]  to re-contact participants for future research opportunities;

[ ]  to collect documented written consent

[ ]  other reason(s), please specify.

1. **Location of Personal data:** Where will personal data be kept?

[ ]  NUS Dropbox;

[ ]  Encrypted thumbdrive and/or devices;

[ ]  In a locked filing cabinet;

[ ]  Other(s), please describe.

1. **Access:** Who will have access to the personal data?

[ ]  NUS research team;

[ ]  Other(s), please describe.

1. **Discarding Personal Data:** When will personal data be discarded?

[ ]  Before/ Upon completion of data collection period;

[ ]  Kept beyond data collection period (note: this includes signed consent forms)

1. If personal data is being retained beyond the data collection period, please specify what personal data is being retained, and why:

[ ]  Consent forms will be retained for NUS-IRB recommended period of 3-5 years for the purpose of documenting consent.

[ ]  Other (please specify):

1. **What will happen to the personal data if subjects withdraw from research?**

[ ]  All of their personal data will be discarded at the earliest possible time;

[ ]  Other(s), please explain.

1. **Where will research material/ research data be kept?**

[ ]  NUS Dropbox;

[ ]  Encrypted thumbdrive, laptop or PC/Mac desktop.

[ ]  Other(s), please describe.

1. **How long will research data be kept after completion of study?**

[ ]  Research data will be kept for at least 10 years, password/encrypted, in accordance with NUS Research Data Management Policy;

[ ]  Other(s), please explain.

1. **Who will have access to the research material/ research data?**

[ ]  The P.I. and Co-I (if applicable) only;

[ ]  Other(s), please describe.

1. **What will happen to the research data if subjects withdraw from research?**

[ ]  All of their research data will be discarded at the earliest possible time;

[ ]  Only research data which is individually-identifiable will be discarded;

[ ]  Others, please elaborate.

**10 Attachments**

**Other Relevant Documents/Information:** Please elaborate on and/or attach any other relevant documents for this Research Protocol submission that may be important to reviewers and that were not included in the application.