## B-7

**ATILIM UNIVERSITY**

**GRADUATE SCHOOL OF SOCIAL SCIENCES**

**BOARD OF ETHICS APPLICATION LETTER**

**TO ATILIM UNIVERSITY**

**GRADUATE SCHOOL OF SOCIAL SCIENCES**

I am a Thesis Graduate Degree/ Doctorate Degree student in the Department Major of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. I would like to conduct research/ a survey for my thesis titled “\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_” that I prepare with my advisor \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. I hereby kindly request your permission in this regard.

/ / 20

**Student Number :**

..................................................

(Full Name, Signature)

**Address:** .......................................................................................................................

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**Phone: Mobile :**...........................................................................................

**Landline :**...........................................................................................

**E-mail:** @

**ANNEX: Board of Ethics Forms**

**Survey Form**

**ATILIM UNIVERSITY HUMAN RESEARCH ETHICS BOARD APPLICATION DOCUMENT CHECKLIST**

After filling all information in the application form, please check your documents through below given Application Document Checklist and attach the form as the first page of the Application Form in an envelope, and submit your application file to President’s Office Human Research Ethics Board.

**Note:** The document must be filled in as a soft copy and printed out afterwards. Hand written documents shall not be accepted. All pages should be signed by the advisor researcher and assistant researchers (supervisor).

**Application Document Checklist:**

Ethics Board Application Form

Voluntary Participation Form

Post-participation Information Form (if available)

Parent Approval Form (if available)

A sample of written data collection means (survey, scale, test, etc.)

Applicant:

Full Name:

Date:

Signature:

**ATILIM UNIVERSITY HUMAN RESEARCH ETHICS BOARD APPLICATION FORM**

Atılım University staff/students or third parties may apply to Atılım University Human Research Ethics Board for the studies requiring data collection from human participants. Researchers are required to apply to Atılım University Human Research Ethics Board with this application form and other necessary documents. Studies must be initiated after the approval of the Ethics Board. Among the research studies carried out within the scope of undergraduate courses, the ones which are not included in the scope of Undergraduate Research Project (LAP) are supervised by relevant instructor and department and not subject to the approval of the Ethics Board.

|  |  |
| --- | --- |
| **TITLE OF RESEARCH:** | |
| **RESPONSIBLE RESEARCHER\*:** | **SIGNATURE** |
| **ASSISTANT RESEARCHERS** |  |
| **1.** |  |
| **2.** |  |
| **3.** |  |
| **4.** |  |
| **5.** |  |
| **TO BE CARRIED OUT AT:** | |

**ADVISOR RESEARCHER:**

|  |  |
| --- | --- |
| **DEPARTMENT** |  |
| **TITLE** |  |
| **PLACE OF DUTY** |  |
| **TELEPHONE** |  |
| **E-MAIL** |  |
| **ADDRESS** |  |

\*Academic advisors must be included in the researchers in thesis research studies.

**ASSISTANT RESEARCHERS:**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **TITLE** | **NAME/SURNAME** | **PLACE OF DUTY** |
| **1.** |  |  |  |
| **2.** |  |  |  |
| **3.** |  |  |  |
| **4.** |  |  |  |
| **5.** |  |  |  |

**Type of Research**

ScientificResearch Project

Undergraduate Research

Master’s Thesis (Thesis Advisor):

Doctoral Thesis (Thesis Advisor):

Other (Specify):

**Method of Research:**

Survey

Observation

Scale preparation study

Archive review

Data source review

System-model development study

Other (Specify):

**Research fund support:** Not supported Supported

**Supporting institution:**

University

TUBITAK

DPT (State Planning Organization)

Other (Specify):

**Data collection period:**

Beginning: End:

**Places, venues, institutions and organizations to collect data:**

|  |
| --- |
| **1.** |
| **2.** |
| **3.** |
| **4.** |
| **5.** |

If there are more places to collect data, write the items in the last line by separating with a comma.

**Application status:**

New application

Re-application, Project No:

Protocol change

Continuation of a previously approved project, Project No:

**Summary of research (brief and simple introduction)**

|  |
| --- |
| **Subject:** |
| **Objective:** |
| **Method:** |
| **Expected Results:** |
| **Selected Resources:** |

**Does the research require giving biased/incorrect information to participants or keeping the purpose of the study confidential?**

Yes  No

If yes, please explain:

**Are there any questions threatening physical or mental health of the participants?**

Yes  No

If yes, please explain:

**Does the research protect private information of participants?**

Yes  No

If yes, please explain:

**Does the research include underage children or disabled people?**

Yes  No

If yes, please explain:

**Does the research provide clear and understandable information about the research?**

Explain:

**Are the participation and exclusion conditions clearly defined?**

Explain:

**Expected number of participants:**

**Select the items which define the participants of your research best (multiple options can be selected).**

Pre-school Children

Primary School Students

High School Students

University Students

Child Workers

Employed Adults

Unemployed Adults

Men

Women

Elderly People

Mentally Challenged People

Physically Challenged People

Arrested People

Other (Specify):

**Methods to be used in the study:**

Survey/questionnaire form

Interview

Observation

Computed application

Video record

Voice record

Other Specify):

**PLEASE SIGN ALL PAGES OF THE APPLICATION FORM!**