Research Involving Anglicare Victoria Staff/Clients

Executive Approval Form

Instructions to applicants

• This application form is for researchers wishing to obtain support for a research project involving Anglicare Victoria staff, clients, services or information.

• Please complete ALL questions. You may use the spaces provided and/or attach additional pages as necessary.

Proposed title of research project

Details of principal applicant (and principal contact person)

Title: Name:

Qualifications:

Organisation: Department:

Postal Address:

Work Phone: Mobile: Fax:

Email:

Type of research

(hit the “strikethrough” button to the right of the “underline” button to select one, or highlight with red)

[ ] Anglicare Victoria (internal) [ ] University [ ] Commercial

[ ] Student (please specify degree):

[ ] Other (please specify):

Prior contact

Please provide the details of anyone within Anglicare Victoria with whom you have previously discussed your project:

Please provide a brief background and rationale for the project

Relevance to Anglicare victoria

What is the relevance of this project to Anglicare Victoria (for example, how will the outcome of this research be useful and for what groups or what aspect of agency activity)?

research strategy

Please provide a brief (no more than 150 words) description of the research strategy, including sampling strategies, recruitment approach and methodology for data collection

What is the timeline for the research?

research approval

Does the research need to be approved by any other organisation (including Research Ethics Committees)?

[ ] Yes (please add details below) [ ] No

Organisation:

[ ] Approval Granted [ ] Approval Pending [ ] Yet To Submit

Organisation:

[ ] Approval Granted [ ] Approval Pending [ ] Yet To Submit

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[ ] Approval Granted [ ] Approval Pending [ ] Yet To Submit

research agreement

privacy

Anglicare Victoria is committed to protecting the privacy of personal and health information

[ ] The researcher(s) acknowledge and agree to be bound by the Privacy Principles under the Information Privacy Act 2000 (Vic), and the Health Records Act 2001 (Vic)

[ ] The researcher(s) agree to maintain confidentiality of information in accordance with these principles and obtain consent from participating teachers/staff and from parents/guardians for participating students/children

Reports of completed research

As principal researcher:

[ ] I agree to provide Anglicare Victoria with:  
 • A concise 2-3 page electronic summary of the key findings of the research  
 • An electronic abstract (200 words) of the major findings

[ ] I understand that Anglicare Victoria reserves the right to request and receive a copy of the full report arising from the research

[ ] I agree to inform Anglicare Victoria of any publication arising from the research and to provide Anglicare Victoria with the opportunity to review and provide comment on any materials generated from the research prior to formal publication

publication of research

I agree/I do not agree to have information about my research project included in the Anglicare Victoria Research Register, to be accessible by Anglicare Victoria staff

[ ] I agree [ ] I do not agree

I agree/I do not agree to the publication of the 2-3 page summary and the abstract in the Anglicare Victoria Research Register, to be accessible by the public on the Anglicare Victoria website

[ ] I agree [ ] I do not agree

Contact details to be published

Please provide only the information you want included

Title: Name:

Work Phone: Mobile: Fax:

Email:

Connection With Project:

The principal researcher declares the information provided in this application to involve Anglicare Victoria staff/clients in research to be true and correct.

Signature: Date:

*Principal Researcher*

Signature: Date:

*Associate Researcher*

Signature: Date:

Signature: Date:

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