	SECTION A: Declaration		A: Declaration		
		_			
<u> </u>	Enter your full name	Ethics Clearance Appl	ication – Faculty of Education		
	I, (The	researcher) hereby confirm that:	Please note that your application will be returned to you if you change any of the document's text. Only complete the active text boxes.		
	2. I unde 3. I will Unive 4. I will chang	nformation provided in this ethics clearance ipants is accurate to the best of my knowled erstand the principles of conducting ethical r endeavor to conduct all the research in an e rsity rules; and inform the Faculty of Education Research H es to the project that might impact on the ether project has not been submitted to another RH	esearch; thical manner as prescribed by Faculty and Ethics Committee (REC) of any substantive hical clearance of the project.		
only whe	t and then sign here en you have ethics e (after the review				
	Signature - Res	searcher / Student			
	18 February 20	16			
	Please select o	ne:	Before submitting the documents for Ethics approval, the documents must be approved by your academic department or relevant body. External application excluded.		
	approved b	At research project and associated ethics any y the <i>relevant Department of the Faculty of</i> and the Faculty of Education Research Ethics	<i>Education</i> for submission to the Higher Degrees		
☐ This student research project (PhD) and associated ethics application has been approved by the <i>relevant Doctoral Committee</i> for submission to the Faculty of Education Research Ethics Committee.					
	☐ This staff research project and associated ethics application has been approved by the <i>relevant Department of the Faculty of Education</i> for submission to the Faculty of Education Research Ethics Committee.				
	relevant De		thics application has been approved by the bmission to the Faculty of Education Research hical issues pertaining to the group project.		
	☐ This external research project and associated ethics application has been submitted to the Faculty of Education Research Ethics Committee for approval.				
	Signature - Su	pervisor / Staff Researcher / External Researcher	cher		

18 February 2016



Research Design Overview for Reviewers

Please supply the relevant information.

- 1. Data Collection Types Click the \Box to make a selection and **Oualitative** fill in other relevant information □ Quantitative when necessary. ☐ Mixed Methods 2. Research Methodologies/Approaches □ Biographical □ Phenomenological Grounded Theory □ Ethnographical Use these text boxes to add any Case Study other important information Design Experiment □ Action Research □ Survey or other quantitative strategy (please provide details below) □ Other (please provide details) 3. Research Instruments/Methods Document analyses □ Questionnaires □ Surveys □ Individual interviews □ Group interviews □ Observations □ Other (please provide details) 4. Sampling □ Random □ Targeted □ Purposeful □ Snow balling
- 5. Sample size
 - $\Box < 11$ □ 11- 50 $\Box > 50$ □ Other (please provide details)

□ Other (please provide details)

- 6. Age of participants
 - $\Box < 14$ □ 14-17 □>=18

Please provide the name and designation of an adult who will protect the rights of the child who has neither parents nor a guardian, or who is younger than 18 years of age.



SECTION C: Information for participants on ethical procedures

(to be used as part of the informed consent process)

Faculty of Education - Research Project Information Type title here

Background to the study including the nature of the research

Intention of the project

Research associated with this project attempts to: Add your aims here. The purpose of the research must be clearly stated.

Procedures involved in the research

Explain in easy-to-understand language and short sentences what you expect from participants. Use the word "you" and "I". Include information such as:

•Study design, standard procedures;

•How you will ensure "full disclosure" for informed consent. Who you will make this disclosure to (participants / communities / employers etc). How you will ensure understanding. Possible barriers to understanding (language, intelligence, maturity, level of trust, culture, religion, privacy). Possible problems in the informed consent process including translations, text size, complexity of language - and how you will address these (e.g. pictures / cartoons / talking books etc.)

•Participant involvement, selection/sampling, duration of participation / Time required / Frequency of interactions (expectation of participation must be clearly defined);

•Place where interactions will take place, types of interaction (interviews, focus groups, surveys); •Data capture (written notes and/or voice/video recording) with additional measures to ensure informed consent to record.

Potential Risks

Select from the following and give addition information when required.

•It is unlikely that there will be any harm or discomfort associated with your participation in this study;

•You should be aware that there are some risks when taking part in this study (Then explain the risks); •While you might feel uncomfortable, anxious or stressful, there are minimal risks involved in participating in this study. Add more about procedures for handling these risks.

•There may be some risks due to the vulnerable nature of the participants... describe these risks (exploitation, discrimination, stigmatization, dependency, community pressure, religious influences, patriarchal families or societies etc). Explain why the research has to be done with the vulnerable group (why can it not be done with non-vulnerable participants?) Ed Psych students may have to include measures to provide additional ancillary care / therapy over and above that done during the research. Added protection? Agreements with these caregivers must be submitted for ethical review.

•Some examples of risks include compensation (be careful not to be coercive). Does research "take away" from essential services like teaching time, health care etc? Risks to the researcher must also be considered. legal issues must be considered (capacity to consent / compliance with SA law?)

Potential Benefits

The benefits should outweigh the risks. Leave the participants / community better, or no worse off than before?

SECTION C: Information for participants on ethical procedures



(to be used as part of the informed consent process)

Informed consent

We recognize that participants are not capable of consent unless "informed". We have, therefore, disclosed the nature of the research, the aims, the duration, the risks and benefits, the nature of interventions throughout the study, compensations where appropriate, researcher details, and details of the ethical review process. Where appropriate, communities, employers, departments and other instances are also part of the informed consent process.

Confidentiality

Every effort will be made to protect (guarantee) your confidentiality and privacy. I will not use your name or any information that would allow you to be identified. In addition, all data collected will be anonymous and only the researchers will have access to the data that will be securely stored for no longer than 2 years after publication of research reports, or papers. Thereafter, all collected data will be destroyed. You must, however, be aware that there is always the risk of group or cohort identification in research reports, but your personal identity will always remain confidential. You must also be aware that if information you have provided is requested by legal authorities I may be required to comply.

Participation and Withdrawal

Your participation in this study is voluntary. You may withdraw your consent to participate in the project at any time during the project. If you decide to withdraw, there will be no consequences to you. Your decision whether or not to be part of the study will not affect your continuing access to any services that might be part of this study.

Future interest and Feedback

You may contact me (see below) at any time during or after the study for additional information, or if you have questions related to the findings of the study. You may indicate your need to see the findings of the research in the attached consent form.



Type researcher name and contact details here

Type supervisor's name and contact details here

18 February 2016



SECTION D: Signatures required for consent/assent

(for all participants, parents, guardians and other stakeholders)

Informed Consent/Assent Form

Project Title:

Investigator:

Please remember to insert your research title and your personal details here... This is the form you can print out and use for obtaining consent/assent.. The rest of the form remains blank and will be filled in by the participants, parents, legal guardians, community leaders, employers, departments etc.

Date: 18 February 2016

Please mark the appropriate checkboxes. I hereby:

Agree to be involved in the above research project as a participant.

- Agree to be involved in the above research project as an observer to protect the rights of:
 - □ Children younger than 18 years of age;
 - □ Children younger than 18 years of age that might be vulnerable*; and/or
 - □ Children younger than 18 years of age who are part of a child-headed family.

Agree that my child, _____ may participate in the above research project.

Agree that my staff may be involved in the above research project as participants.

□ I have read the research information sheet pertaining to this research project (or had it explained to me) and I understand the nature of the research and my role in it. I have had the opportunity to ask questions about my involvement in this study. I understand that my personal details (and any identifying data) will be kept strictly confidential. I understand that I may withdraw my consent and participation in this study at any time with no penalty.

□ Please allow me to review the report prior to publication. I supply my details below for this purpose:

□ Please allow me to review the report after publication. I supply my details below for this purpose:

□ I would like to retain a copy of this signed document as proof of the contractual agreement between myself and the researcher

Name:	
Phone or Cell number:	
e-mail address:	
Signature:	

If applicable:

I willingly provide my consent/assent for using audio recording of my/the participant's contributions.
I willingly provide my consent/assent for using video recording of my/the participant's contributions.
I willingly provide my consent/assent for the use of photographs in this study.

Signature (and date):	
Signature of person taking the consent (and date):	

* Vulnerable participants refer to individuals susceptible to exploitation or at risk of being exposed to harm (physical, mental, psychological, emotional and/or spiritual).