# Application to Conduct Research at Scope

## ORGANISATIONAL APPROVAL

### ABOUT THIS FORM

This Form is for use by anyone proposing to conduct research at Scope, including requests to distribute information about research to potential participants.

The information provided on this form is used to determine whether Scope will participate in the research. Organisational approval is based on:

* + - * Alignment of the research to the Strategic Plan and Research Plan;
			* The relevance and benefit of the research to Scope (people with disability, staff, carers/ family members, volunteers), impact, and risk;
			* Budgetary considerations;
			* Resources required;
			* Feasibility; and
			* Utilises appropriate methods.

This application should be submitted to research@scopeaust.org.au.

Please ensure that all attachments are included (participant information sheets, consent forms, recruitment materials, data collection instruments, HREC approval letter).

You will be notified in writing about the outcome of the review.

### Submitting this application

Before starting your application, you must contact Dr Stella Koritsas to discuss your application:

Dr Stella Koritsas

Head of Research, 0488 541 443

**Please note**

* + - * Research cannot be conducted without approval.
			* Incomplete or inadequate applications will not be considered.
			* Applications with less than three months between commencement and completion will not be accepted.

## APPLICATION TO CONDUCT RESEARCH AT SCOPE

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| 1. **Title of research**
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| 1. **Date of application**
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| 1. **List all the researchers who will be involved in the project, their institution and qualifications (copy and paste to add additional researchers)**
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| Name: Institution and position: Qualifications:Name: Institution and position: Qualifications:Name: Institution and position: Qualifications: |
| 1. **Type of research**
 |
| Type of project: [ ]  Research by academic staff[ ]  Research by Scope staff (please ensure you complete question 14)[ ]  Undergraduate research[ ]  Honours research[ ]  Masters/PhD research[ ]  Other. Please specify:  |
| 1. **Provide a non-technical description of the research. State the aims, methods (including recruitment), participants, data analyses, and dissemination strategy (up to two pages).**
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| 1. **Timelines**
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| Preferred commencement and completion dates for component **at/involving** Scope | Commence Date: Completion Date:  |
| Start and end dates of **full** project | Start Date: End Date:  |
| 1. **What is the nature of Scope’s involvement and the resourcing required? For example, consider the time required for staff to participate, the time and cost associated with identifying and contacting potential participants for recruitment, and any other resourcing required (1/2 page maximum).**
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| 1. **If Scope’s involvement relates to assistance with recruitment, please provide specific details. For example, who the participants are, how many, which services (1/2 page maximum).**
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| 1. **What are the benefits of the research to Scope (customers, staff, carers/ family members, the organisation)? Consider the potential to change practice and/or influence policy (1/2 page maximum).**
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| 1. **What are the risks of the research for Scope (customers, staff, carers/ family members, the organisation)? (1/2 page maximum).**
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| 1. **What impact will the research have on service delivery and customers (e.g., disruption to services because staff are participating in research)? (1/2 page maximum).**
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| 1. **Has the research received approval from a Human Research Ethics Committee?**
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| [ ]  Yes – Please specify approval dates \_\_\_\_\_\_\_\_\_\_\_\_Attach letter of approval[ ]  No – Please specify when HREC approval will be obtained \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 1. **A condition of approval is that researchers provide Scope with a copy of the final report. Do you agree to provide a copy of your final report to Scope at the conclusion of the research?**
 |
| [ ]  Yes [ ]  No  |
| 1. **FOR INTERNAL RESEARCH ONLY.**

**Has your line manager approved the research?**  |
| [ ]  Yes – Please provide line manager’s name and contact details: [ ]  No  |
| 1. **APPLICANT CONTACT INFORMATION**
 |
| Contact Person:  |  |
| Phone: |  |
| Email: |  |
| Mailing Address: |  |
| Signature: |  |

Please complete the table:

Have you attached the:

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes | No | If no, why?  |
| Participant information sheets |  |  |  |
| Consent forms |  |  |  |
| Recruitment materials |  |  |  |
| Data collection instruments |  |  |  |
| HREC approval |  |  |  |