## Renewal Application Form

This form is to be submitted to request a renewal for projects that have been reviewed by the Panel. Ethical reviews are valid for the duration of the project, or 3-5 years from when a favourable opinion has been received, whichever is lesser. It is important that you submit this form BEFORE the expiry of the initial review or previous renewal. Failure to do so may result in non-compliance repercussions.

For a 3-5 year approval period, this application should be made a minimum 3 months before, but not more than 4 months before expiry date. For an approval period of less than 12 months, please allow sufficient time for renewal to be considered by the Panel. Submission should be no fewer than 8 weeks before the expiry date of the current approval period. However, you will also need to take into account the Panel’s meeting dates; you should allow at least 4-6 weeks after the Panel’s meeting for your application to be processed and approved.

If this is a late renewal, please fill in Section B of this form. Please note that late renewals (fewer than 6 weeks after expiry date) may not be accepted if there is insufficient justification. Renewals made more than 6 weeks after the approval expiry date will not be accepted. In both cases, a new application must be made.

If participant involvement and/or data collection continues beyond 5 years, the project will require re-review and must be submitted as a new application

**All forms and templates, and application deadlines, are provided via the** [staff intranet](http://staffnews/course/view.php?id=18&section=2http://staffnews/course/view.php?id=18&section=2) **and** [PGR Dashboard](https://www.marjon.ac.uk/research/postgraduate-research/pgr-dashboard/)**.**

# Title of Research Project

# Review Details

Ethics Application Code:

Original Approval Date:

Previous Renewal Date(s):

# Funding Details

Approved budget and period:

Start date:

Original proposed completion date:

Revised proposed completion date:

# Investigator Information

Principle investigator (or student’s name)

Name:

Department:

Institutional email:

Are co-investigators involved? (if student application, insert supervisor’s name)

If YES, please provide the names and institutional contact details of co-investigators, describe the decision-making processes for collaborative research studies and if Terms of Reference exist, attach them to the application.

# Project Status

1. There been any changes to the study protocol, consent process or documents since the most recent approval?

If YES, please briefly describe changes and confirm that an AMENDMENT REQUEST FORM was submitted to the Panel (please provide date).

1. Are there any planned changes to the study protocol, consent process or documents that will accompany this renewal application?

 If YES, please submit an AMENDMENT REQUEST FORM

1. What is the current status of the study?

Research ongoing [ ]

Research on hold (please explain)

Research delayed (please explain)

Research has not begun (please explain)

Report on human participants

[ ]  Research participants are currently being recruited/participating

How many research participants were proposed for the study?

How many research participants were completed for the study?

How many participants are currently participating?

How many participants have withdrawn or been excluded?

How many participants have yet to be recruited?

Estimated end date(s) for recruitment and participation?

[ ]  Research participant involvement has been completed

1. Since receiving original ethical opinion have you encountered or experienced any ethical concerns (minor or major)?

If YES, please describe concerns in detail

1. Have there been any adverse or unanticipated events?

 If YES, please submit an ADVERSE/UNANTICIPATED EVENTS REPORT FORM

# Study Summary, Progress and Results

1. Provide a brief summary of study progress, or any interim findings over the past 12 months (100 – 200 words).
2. Since your last ethical review or renewal have there been any changes in your assessment of the risk and potential benefit of the study based on your findings?

If YES, please describe changes in detail

1. Please include details of dissemination of research findings or publications, if any.

Signature of Investigator:

Date:

## Section B

This section should be completed if this is a LATE renewal form. Please note that late renewals (fewer than 6 weeks after expiry date) may not be accepted if there is insufficient justification. Renewals made more than 6 weeks after the approval expiry date will not be accepted. In both cases, a new application must be made.

1. Please provide an explanation as to why a Renewal Form for the study was not submitted prior to the expiry date of the study.
2. Please describe what procedures have been put in place to ensure timely submission (see guidelines above) of the Renewal Form in future.
3. If University Ethics approval for this study is expired, please indicate whether any study related activities have been conducted after the approval period expiry date.

If YES, please describe

Signature of Investigator:

Date: