

# CONDUCTING RESEARCH IN CATHOLIC SCHOOLS BROKEN BAY SCHOOLS

**Application Form** 

September 2025

# **SECTION 1: PROJECT ADMINISTRATION DETAILS**

1.2	Principal Researcher Contact Details:					
	Name:					
	Title:					
	Organisation:					
	Address:					
	Phone:					
	Email:					
	* Please list at Appendix 2 details of any Co-Researchers, Associate Researchers, Supervisors, Research Assistants, or Research Coordinators.					
1.3	Indicate the proposed	date of co	mmencement of the	project:		
	Day		Month		Year	
1.4	Indicate the anticipate	ed duration	of the project:			
			. c. cc p. c.cc.			
1.5	Indicate the anticipate	ed due date	e of the report:			
1.6	· · · · · · · · · · · · · · · · · · ·					
	project is to be carried out:  School Name			Suburb		
	3	CHOOL Nam			Suburb	
1.7	Is this a funded project	ct?			Yes 🗌	No 🗆
1.8	Do you intend to appl	y for fundii	ng?		Yes 🗌	No 🗆
1.9	If you answered Yes, submission is planned		ding bodies that sup	port this pr	roject or to which t	the
1.10	Where the project is identify which organisa project:					

1.11	If Yes, provide brief details:	Yes	No
1.12	Is the proposed research part of a University course? If Yes, please provide the Degree, University, Supervisor, Departmen	Yes □ t, Faculty	No □ ⁄ details:
SEC	CTION 2: NATURE OF RESEARCH		
2.1	Does the research require any physically invasive or potentially harms. If Yes, state the nature of the procedures, all the risks involved and what rate these risks are expected to occur. All this information mutin the Information and Consent Form (Appendix 1).	Yes , if possil	No ble,at
2.2	Will any medication/drugs/invasive devices be used? If Yes, provide details:	Yes □	No □
2.3	Could the research induce any psychological or physical stress or in a adversely affect participants?  If Yes, state what form these adverse effects could take and what factor personnel are available to deal with such problems. If Yes, state what adverse effects could take and what facilities/ trained personnel are a with such problems.	Yes □ ilities/trate t form the	No □ ained ese
2.4	Will the participants be informed of the true purpose of the research? If No, please explain why and provide details regarding how participa debriefed once they have participated in the research.		No □ e
2.5	Does this research involve the direct investigation of any illegal behave potential to elicit information about illegal behaviour? If Yes, provide details and specify any legal or institutional reporting apply.	Yes □	No □

# **SECTION 3: DECLARATION OF COMMERCIAL INTEREST**

3.1	Will this research be undertaken on behalf of (or at the request of) or any other sponsor?  If Yes, who is the sponsor?	a comme Yes □	ercial entity, No □
3.2	Do the researchers have any affiliation with or financial involvement or entity with direct or indirect interests in the subject matter or ma research?		
	If Yes, provide details.		
3.3	Does any person involved in the research expect to obtain any director or other benefits from conducting this project?  If Yes, provide details.	t or indire Yes □	ect financial No 🗆
3.4	Are there any further ethical considerations that you wish to raise? For example, have conditions been imposed upon the use, publication the results? For example, have conditions been imposed upon the use ownership of the results? If Yes, detail what these considerations are	on or own se, public	
SEC	CTION 4: PARTICIPANTS		
4.1	Are the participants who are the focus of this research project: <ul><li>under 16 years of age</li></ul>	,	∕es □ No □
	<ul><li>under 16 years of age</li><li>between 16 and 18 years of age</li></ul>		res □ No □
	<ul> <li>physically ill or disabled</li> </ul>		res □ No □
	intellectually impaired	`	∕es □ No □
	<ul> <li>wards of state</li> </ul>	`	∕es □ No □
	Aboriginal or Torres Strait Islander		res □ No □
	<ul> <li>in a teacher-student relationship with the researchers or their ass</li> <li>If Yes to any of the above, or you are unsure, please provide details</li> </ul>		∕es □ No □
SEC	CTION 5: CHILDREN AND YOUNG PERSONS UNDER THE AGE OF	18	
5.1	Does this research involve direct, unsupervised contact with children	n? Yes	No
	If No, go to question 6.1.		
	If Yes, indicate which one of the following applies to you and ensure the	nat approp	oriate

5.1.1	For researchers employed directly by CSBB - I have provided a Working With Children Check (WWCC) or application number to CSBB staff for verification as part of my recruitment process and I have ensured or will ensure that any assistants working with me and/or on my behalf in undertaking the research comply with the relevant child protection requirements.
5.1.2	For self-employed researchers – I have applied for a WWCC and obtained clearance. For verification by CSBB staff please enter:  WWCC No. Date of Birth  I have ensured or will ensure that any assistants working with me and/or on my behalf in undertaking the research comply with the relevant child protection requirements.
5.1.3	For researchers engaged by an external organisation (such as a university) – I have applied for a WWCC and obtained clearance. For verification by CSBB staff please enter: WWCC No. Date of Birth I have ensured or will ensure that any assistants working with me and/or on my behalf in undertaking the research comply with the relevant child protection requirements.
SECT	TION 6: RECRUITMENT OF PARTICIPANTS
6.1	How will the participants be recruited? Specify how potential participants will be identified, how contact with them will be made, and who will be involved in the recruiting?
6.2	Does recruitment involve a direct personal approach from the researcher to the potential participants? Yes $\square$ No $\square$ If yes, what precautions will be taken to minimise any pressure on individuals to participate?
6.3	Does recruitment involve the circulation/publication of an advertisement? Yes $\square$ No $\square$ If Yes, provide a copy of the advertisement.
6.4	Does recruitment involve the circulation/publication of an advertisement?  Yes □ No □  If Yes, provide a copy of the advertisement. Where an advertisement is used, it should include:  • a clear statement that the purpose of the advertisement is to recruit participants to take partin a research project.  • a brief statement describing what the participant may be asked to do (similar to the projectdescription on the Consent and Information Sheet).  • a contact name, phone and email address.
6.5	Will participants receive any financial or other benefits as a result of participation? Yes $\square$ No $\square$ If Yes, what is the amount/benefit and the justification for this?

# **SECTION 7: PRIVACY AND ACCESS TO PERSONAL INFORMATION**

7.1	Does your research involve you or your researchers requiring access to CSBB or school records (e.g., a database, a clinical file, a datafile) containing personal information about individuals? Yes $\square$ No $\square$ If Yes, please fill in the following:
	The name of the agency holding the records (e.g., school name, CSBB)
	State the type and number of records involved.
	What personal information will be sought?
	<ul> <li>Will you obtain written consent from the individuals for access to and use of their personal information that is contained in the records</li></ul>
7.2	Will the personal information you obtain from sources in 7.1 be sufficient to identify individual participants? Yes $\square$ No $\square$ Explain why or why not.
7.3	Does your research involve the secretive use of photographs, tape-recordings, or any other form of record-taking?  Yes □ No □  If Yes, provide details and a justification for the secrecy.
SEC	TION 8: PRIVACY AND PUBLICATION OF RESULTS
8.1	Will any part of the project be placed on audio tape, film/video, or other electronic medium? Yes $\square$ No $\square$ If Yes, what is the medium and how will it be used, e.g., for review by researchersor for broadcast?
8.2	How will the confidentiality of data (in any format) used, including the identity of participants, beensured?

8.3	and after it is completed, and who will have access to the data? (e.g., will it be stored in a locked filingcabinet in the researcher's office, in a locked cabinet in the researcher's home office? Who will have access to the data?).
8.4	How long do you plan to retain the data?
8.5	How do you intend the results of the research to be published or presented?
	Specify how feedback will be provided to CSBB, individual participants or, if relevant, to other groups.
	If no feedback is planned, a justification for this must be given.
8.6	It is a condition of approval that, upon completion of a project, the researcher will provide CSBB with a report of the findings of the study and grant CSBB the right to disseminate this report to personnel employed by CSBB. The researcherwill also provide participating schools with a summary of the study findings. What date will this report be made available to CSBB:
8.7	Will your research require the disclosure of personal, private, or sensitive information about identifiable individual respondents/associates to local or national governments, or to other officials or official bodies? Yes   No If yes, provide details:
SEC	TION 9: PARTICIPANT INFORMATION AND CONSENT
9.1	Will written consent be obtained from participants? Yes $\square$ No $\square$ If Yes, attach a copy of the Information and Consent Form (Appendix 1). If NO, provide reasons.
9.2	Will the consent (at least verbal) of children and young people (under 18 years) participating in the research be obtained? Yes $\square$ No $\square$ <b>Note:</b> At a minimum, verbal consent should be obtained unless there is justification. If Yes, describe the protocol to be used for obtaining verbal consent and how minors will be able to indicate a desire to withdraw from the research
	If No. provide reasons:
	If No, provide reasons:
	i de la companya de

9.3	In the case of participants for whom competence in English is not adequate for informed consent, will arrangements be made to ensure comprehension of the Participant		
	Information and Consent Form?	Yes $\square$ No $\square$	
	If yes, what arrangements have been made?		
	,,		
	If no, provide reasons.		
SE	CTION 10: DOCUMENTATION		
10.1	Have you included the following support documents with your applicat	ion?	
	• copies of Information and Consent Forms	Yes □ No □	
	<ul> <li>copies of any interviews, questionnaires, or surveys to be used</li> </ul>	Yes □ No □	
	<ul> <li>written undertaking regarding child protection</li> </ul>	Yes □ No □	
	<ul> <li>copies of any participant recruitment advertisements</li> </ul>	Yes □ No □	
	<ul> <li>copies of any relevant correspondence with other institutions or ethics committees</li> </ul>	Yes □ No □	
SE	CTION 11: DESCRIPTION OF PROJECT		

11.1 Describe the aims and objectives of the project and the methods to be used. Include a description of the participant sample, and tasks, measures, and procedures. Write in plain English using no **more than two pages**.

#### **SECTION 12: CERTIFICATION**

I declare that I have read the document *Conducting Research in Catholic Schools Broken Bay* and agree to abide by the specifications therein in the conduct of this research.

- 12.1 I undertake to ensure that I, and any assistants working with me and/or on my behalf, will maintain the confidentiality and privacy of all information collected from participants.
- 12.2 To the best of my belief the proposed project conforms in all respects with the referenced ethical legislations and guidelines listed in point 4 of the Guidelines.
- 12.3 In relation to child protection requirements, I declare that:
  - a. I have read *the Working with Children Check Policy* and agree to undertake research in accordance with the principles set out in that policy.
  - b. I am aware of the child protection legislation and the special responsibilities associated with undertaking research with children and young people, particularly in circumstances involving direct, unsupervised contact with children, and there are no reasons or circumstances that would preclude my undertaking research with children and young people.
  - c. I and any assistants working with me and/or on my behalf in undertaking the research have complied with the relevant requirements as outlined in point 5 of the Guidelines.

Principal Researcher	
(Name in block letters)	Signature

### **INFORMATION AND CONSENT FORM**

Title of Project:

You are invited to participate in a study of (*state what is being studied*). The purpose of the study is (*state what the study is designed to discover or establish*).

The study is being conducted by (provide the name/s of the researcher/s and contact telephone numbers).

If you decide to participate, you will be asked to (describe the tasks or procedures, their frequency and duration, and the information to be obtained - acknowledge any recording using audiotapes, videotapes, or photographs.)
(Describe any risks or discomforts.)

(Describe any payment of money or other remuneration.)

Any information or personal details gathered during the study are confidential. No individual will be identified in any publication of the results. *Acknowledge who will have access to the data.*) (Information about how participants can obtain feedback regarding results.) (Acknowledgement of any sources of funding for the research.)

If you decide to participate, you are free to withdraw from further participation in the research at any time without having to give a reason and without consequence.

I, have read (or, understand the information above and any qumy satisfaction. I agree to participate in this further participation in the research at any time of this form to keep.	research, knowing that I can withdraw from
Participant	
Name in block letters	Signature
Researcher	
Name in block letters	 Sianature

The ethical aspects of this study involving staff and/or students at schools in Catholic Schools Broken Bay have been approved by Director of Schools, Catholic Schools Broken Bay. If you have complaints or reservations about any ethical aspect of your participation in this research, you may contact the Catholic Schools Office (telephone 9847 0000; email: mail@dbb.edu.au). Any complaint you make will be treated in confidence and investigated, and you will be informed of the outcome.

# **APPENDIX 2**

Please list below details of any Co-Researchers, Associate Researchers, Supervisors, Research Assistants, or Research Coordinators.

Name:	
Title:	
Organisation:	
Address:	
Phone:	
Email:	
Name:	
Title:	
Organisation:	
Address:	
Phone:	
Email:	
Name:	
Title:	
Organisation:	
Address:	
Phone:	
Email:	
Name:	
Title:	
Organisation:	
Address:	
Phone:	
Email:	