



## UHREB Waiver Request – Secondary Use of Data

Please submit one electronic copy to the Ethics Program Officer ([ethics@uwinnipeg.ca](mailto:ethics@uwinnipeg.ca)) for UHREB approval.

**\*Please note: data that was collected anonymously, is the only data that a waiver can be requested for. If the data was not originally anonymous and instead de-identified, that data is not eligible for a waiver (please review TCPS2 Chapter 5, Section D).**

### General Information

Date:

Name of person(s) submitting application:

Title of project:

Department(s):

E-mail addresses:

### Category of Researcher:

Faculty

Research Associate

Graduate Student - Program of Study/Degree (please specify):

Undergraduate Student

Other (please specify):

The project for which this data was originally collected has already been reviewed by

External agency (please specify):

Research Ethics Board (please specify):

Third party: (e.g., school board, hospital, etc.) (please specify):

Attach a copy of the approval (s) if available. If not, please explain the approval process. Under what ethical guidelines did the original data collection take place?:

### **Funding/Sponsorship**

Has this project received funding (internal or external):      Yes    or    No

If yes, please indicate the source of funding:

**Agreement:** I/we have read the University Human Research Ethics Board (UHREB) *Guidance Document 1 – Undertakings Requiring Review*, and *Guidance Document 3 – Procedures Related to Faculty Research and Graduate Student Research*, and the most recent version of *Tri-Council Policy Statement on the Conduct of Research Involving Humans (TCPS2)* and agree to comply with the policies and procedures outlined therein. In the case of student research, as Faculty Supervisor, my signature further indicates that I have read and approved the application and proposal, deem the project valid and worthwhile, and agree to provide continuing and thorough supervision of the student.

**Signatures:**

<b>For Faculty/Staff Research Projects</b>	
Signature of Investigator:	Date:

<b>For Student Research Projects</b>	
Signature of Student Investigator:	Date:
Signature of Faculty Supervisor:	Date:

<b>Shaded area for UHREB/ Associate Vice-President, Research and Innovation Office only</b>
Approval date:
Approved signature:

- 1) Were the data originally collected for the purpose of creating a dataset for subsequent use by researchers?      Yes      No

If so, please identify the source of the dataset and provide a URL for an organizational website describing the dataset where available.

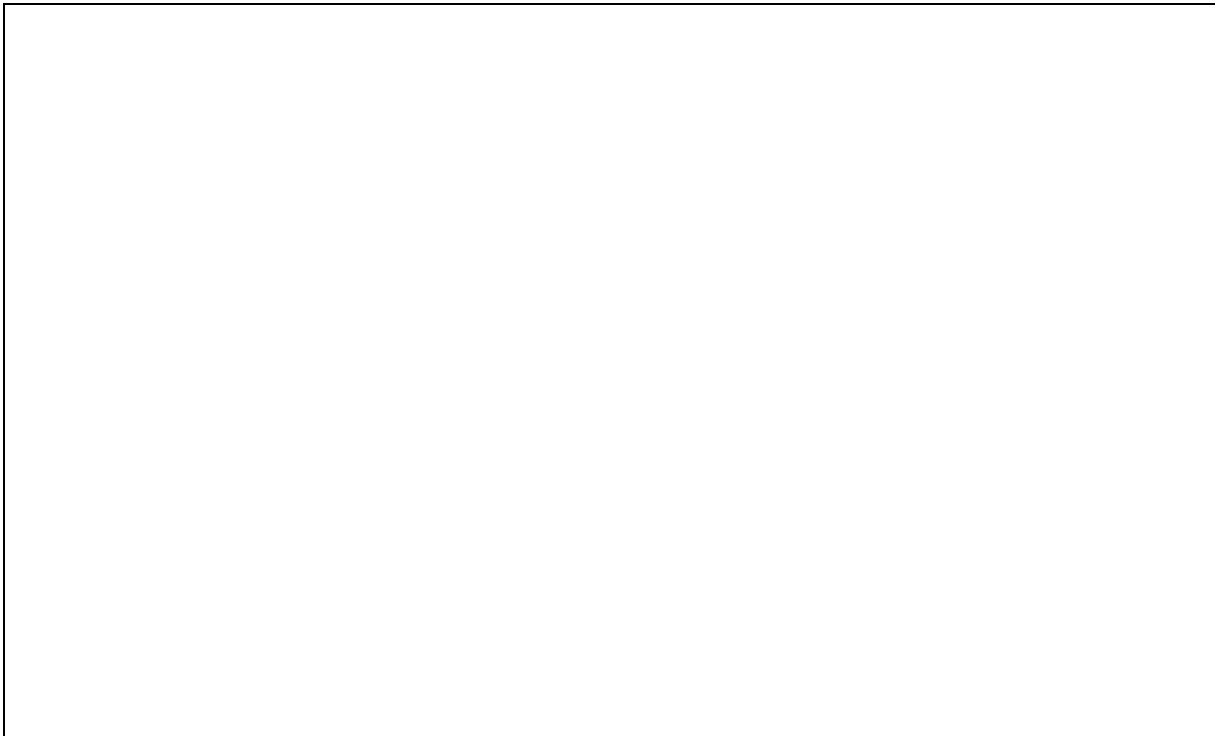
If not, briefly describe the purpose of the original study. Please attach the consent form used when collecting the original data (if applicable and available).

- 2) What is the purpose and rationale of the proposed research? Be sure to explain how the proposed research differs from the original research, if applicable. Also indicate whether the purpose of the proposed research differs from what the participants originally gave consent to in the informed consent process, and, if so, how.

3) Describe the data you will be using and how (e.g., reviewing videotapes/transcripts or analyzing a dataset).



4) Please describe how you obtained access to the data.



## 5) Data Linkage

a) Will the research involve linking data sets (i.e., using data collected from multiple sources)?

Yes

No

If so, how?

## 6) Indicate the amount of identifying information in the data:

a) Has the data had identifying information removed and replaced with a code?  
(The applicant does not have access to the code.)

Yes

No

b) Is the data anonymized? (Note: the data must originally be anonymous, de-identifying the data does not qualify for a waiver).

Yes

No

c) Does the data contain identifying information on participants?

Yes

No

d) Does the data contain a code or other information that could potentially be used to establish the identity of participants?

Yes

No

e) If yes, could participants' identities be established through data linkage?

Yes

No

**Please Note:** If the data fall into categories **a) or b)**, only the above questions need to be addressed. If the data fall into categories **c), d), or e)**, you must submit a completed application for ethics approval to your Departmental/Faculty Ethics Committee and, if applicable, to the UHREB.

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