



**Institiúid Teicneolaíochta Trá Lí**

**INSTITUTE OF TECHNOLOGY TRALEE**  
**Department of Nursing & Health Care Studies**  
**Research Ethics Committee**

**Name of Researcher(s):**

**Checklist for submission to the Research Ethics Committee**

All participants are invited to discuss their application with the Chairperson, prior to submission, at the contact details below. Relevant reading to assist with your application is provided below.

- Candidates who submit for ethical approval should first read and comply with the **Terms of Reference** and the **Research Ethics Validation Checklist**, which will be used in validating the application
- Completed Ethical Approval Form **X 10**
- Completed Research Project Proposal Form (*2/3 sides of A4*) **X 10**
- Data collection instrument e.g. questionnaire, interview schedule (*if applicable*) **X 10**
- Information letter with informed consent form (*if applicable*) **X 10**
- Ethical Approval letter from parent 3<sup>rd</sup> level institute (*if other than ITT*) **X 10**
- Letter from Gatekeeper granting access to research site and participants (*based on receiving Ethical Approval*) **X 10**

**Please note:**

Hard copies of the above are required **10** days prior to the scheduled meeting date (***please include this submission checklist with your application.***)

**Relevant Reading:**

- An Bord Altranais (2007) *Guidance to Nurses and Midwives Regarding Ethical Conduct of Nursing and Midwifery Research*. An Bord Altranais, Dublin.
- Government of Ireland (2003) *Data Protections Acts, 1988 and 2003*, Stationery Office, Dublin.

**Elizabeth Heffernan**  
**Chair of the Research Ethics Committee**  
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**Tralee**  
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**For official use only:**

Date received: \_\_\_\_\_

Date reviewed: \_\_\_\_\_

All requested items received? Yes      No

If no please advise items not included:

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