

**FORM B - Request to conduct Research at the University of the Witwatersrand, Johannesburg**

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This form is completed by students/academics/researchers not currently enrolled or working at the University, wanting to conduct research by using Wits student/staff data. Please email this form with your supporting documents to Research.Deputy-Registrar@wits.ac.za

**First Name: Surname:**

|  |  |
| --- | --- |
|  |  |

**University:**

|  |
| --- |
|  |

**Degree currently registered for (if applicable):**

|  |
| --- |
|  |

|  |
| --- |
| **Research title:** |

**Has ethics clearance been obtained from your University Ethics Committee?**

|  |  |
| --- | --- |
| **YES** | **NO** |

*(If yes please include a copy of the ethics clearance certificate and protocol number below)*

**Protocol number:**

|  |
| --- |
|  |

***PLEASE NOTE****: If an unconditionally approved ethics clearance certificate has not been obtained, you will not be granted permission to conduct your research.*

**What is the expected duration of your research?**

|  |
| --- |
|  |

**Whom will the research be conducted on? (Please tick the appropriate box):**

|  |  |
| --- | --- |
| Students |  |
| Staff |  |

***(PLEASE NOTE:*** *we are not able to assist you if you require staff to take part in your research.*

**If the research will be conducted on student data, please specify year of study /Faculty or degree data will be required for:**

|  |  |
| --- | --- |
| First Year Students |  |
| Second Year Students |  |
| Third Year Students |  |
| Final Year Students |  |
| Postgraduate Students |  |
| Faculty |  |
| Degree |  |

 **How will the research be conducted?**

|  |  |
| --- | --- |
| **E-Mail**(please provide a link to your survey)  |  |
| **Please provide us with a brief message that will accompany your survey/questionnaire. This message will be sent as an e-mail to students/staff requesting them to complete the questionnaire** |  |
| **Interviews**(please attach a copy of the interview questions) |  |
| **Other data collection** (please specify lists or statistics) |  |

**Student signature**: ………………………………………… **Date………………………………………………**