



*Ottawa-Carleton Research and Evaluation Advisory  
Committee*



# **RESEARCH and/or EVALUATION RENEWAL, EXTENSION or MODIFICATION FORM**

*for the*



**Ottawa-Carleton District School Board**

**133 Greenbank Road ■ Nepean ■ Ontario ■ K2H 6L3**



**Ottawa Catholic School Board**

**570 Hunt Club West ■ Nepean ■ Ontario ■ K2G 3R4**

# RENEWAL, EXTENSION, or MODIFICATION FORM

This form is to be used when requesting a renewal, extension, or modification to an existing study that has been approved by OCREAC. OCREAC approval is for one academic year. Ongoing and longitudinal studies require annual renewal and approval. As per OCREAC guidelines #23 and #24, researchers are also required to submit the STATUS REPORT FORM to the Chair of the committee in order to be considered for a renewal or extension.

**Renewals:** The targets for an approved project have been met (e.g., sample size achieved, data collected and analyzed) in the year of approval. The researcher is submitting a previously approved project for another year of approval. For example, multi-year or longitudinal studies for which the study design or methodology have not changed would qualify for OCREAC renewal. STATUS REPORT FORM must be completed in addition to this form.

**Extensions:** The researcher has been unable to achieve the project targets (e.g. sample size, data collection) in the year of approval, OR the study is multi-wave or multi-phase and the researcher is requesting to submit an extension to conduct the next phase of the study. The researcher is requesting for an approved project to be granted an extension for another academic year in order to meet study targets or conduct the next phase of the study. STATUS REPORT FORM must be completed in addition to this form, including an explanation as to why the targets were not met in the year of approval, and how issues will be mitigated should an extension be granted.

**Modifications:** When a proposed amendment is made to the research protocols for an existing approved research study (e.g., participants, target schools, data collection tools, time commitments, study personnel, etc.).

Please note that renewals and extensions are conditional upon availability and interest of the schools in addition to the Board priorities at that time. OCREAC does not guarantee that a previously approved project will be extended or renewed.

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[Complete the online form here](#)

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Within the online application you will be required to upload electronic copies of various documents. ALL documents should be combined into a **single PDF document**. Only ONE uploaded file is permitted.

If you have any questions regarding the completion of this electronic form, please contact: [ocreac@ocdsb.ca](mailto:ocreac@ocdsb.ca)

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## PART A: REQUEST TYPE

Please indicate the nature of your request:	Renewal	<input type="checkbox"/>	Complete <b>Part D</b>
	Extension	<input type="checkbox"/>	Complete <b>Part D</b>
	Modification	<input type="checkbox"/>	Complete <b>Part E</b>

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## PART B: APPLICANT INFORMATION

Name of Principal Investigator:

Address:

Position held:

Institution:

e-mail:

Telephone:

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## PART C: PROJECT INFORMATION

A. Title of Research Project:

B. Date of OCREAC Approval:

C. Date(s) of Prior Renewal(s) or Extensions (if applicable):

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## PART D: RENEWALS and EXTENSIONS

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A. Have you submitted your Status Report Form? Yes ☐  
No ☐ Please complete **Annual Status Report** and attach form.

B. **Rationale for Request.** Please provide an explanation or rationale for this request for extension or renewal.

Rationale:

C. Anticipated start date:

D. Anticipated completion date:

E. Were there any unanticipated issues/events involving participants in your project (legal, physical, psychological, social, other)? Yes ☐ Please complete **Unanticipated Issues/Adverse Events Report**  
No ☐

F. Have there been any modifications to any of the research components since the project was last approved?

Yes ☐ Please complete **Part E: Modifications**  
No ☐

G. Is this a multi-phase study?

Yes ☐ If the procedures, methods, measures or sample differ from what has already been approved by OCREAC, please complete the full **Research and/or Evaluation Application Form** outlining the new phase of the study.

No ☐

H. Required attachments:

- ☐ Updated REB renewal from your institution.
- ☐ Updated police check documents. Note that police records check must have been issued within 6 months of project renewal.
- ☐ Copy of your last approved application (including any requested revisions).

## PART E: MODIFICATIONS

A. Please indicate which of the following research components will be modified (select all that apply):

Research Components	Any Changes?		If yes, please describe.	Revised Document(s) Attached
	Yes	No		
a) Study design	<input type="checkbox"/>	<input type="checkbox"/>		
b) Timelines and estimated completion date	<input type="checkbox"/>	<input type="checkbox"/>		
c) Information letter(s), consent form(s), debriefing form(s)	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
d) Consent procedures	<input type="checkbox"/>	<input type="checkbox"/>		
e) Sampling or recruitment procedures	<input type="checkbox"/>	<input type="checkbox"/>		
f) Data collection tools (e.g., questionnaires, interview protocols, tests, measures)	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
g) Study participants (e.g., groups, number of participants)	<input type="checkbox"/>	<input type="checkbox"/>		
h) Participating schools or sites	<input type="checkbox"/>	<input type="checkbox"/>		
i) Location or facilities required	<input type="checkbox"/>	<input type="checkbox"/>		
j) Time commitments	<input type="checkbox"/>	<input type="checkbox"/>		
k) Data analysis	<input type="checkbox"/>	<input type="checkbox"/>		
l) Data security or confidentiality	<input type="checkbox"/>	<input type="checkbox"/>		
m) Data use, retention, disclosure, disposal	<input type="checkbox"/>	<input type="checkbox"/>		
n) Research personnel or team members	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
o) Feedback or publication of results	<input type="checkbox"/>	<input type="checkbox"/>		
p) Updated REB documents	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
q) Updated Police Check documents	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
r) Other	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>

B. Are there any new foreseeable risks or benefits associated with the changes being requested?

No ☐

Yes ☐

If Yes, please explaining ALL risks or benefits in detail:

## PART E: SIGNATURES

Signature of Principal Investigator:

\_\_\_\_\_  
Date

\_\_\_\_\_  
Principal Investigator Signature

If the Principal Investigator is a student, this form must be countersigned by the student's staff advisor.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Faculty Signature