1. TITLE:

# RESEARCHER APPLICATION FOR ACCESS TO MEDICAL STUDENTS

Researchers are asked to email the following information to <a href="mailto:ugmeaa@dal.ca">ugmeaa@dal.ca</a>:

2.	RIM: Is this a Dalhousie FoM Research in Medicine (RIM) project? YES or NO	
3.	Is this a Resident Scholarly Project? YES or NO	
4.	RESEARCHER(S) (please indicate if there is a Dalhousie affiliation):	
	PRINCIPAL RESEARCHER:	
	RESEARCH TEAM MEMBERS:	
	RESEARCH SUPERVISOR (IF APPLICABLE):	
5.	RESEARCH SUMMARY (Please include the research question(s)/objective(s), and the methods). Please limit your response to 500 to 750 words:	
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ь.	SIGNIFICANCE (Briefly describe the significance of the research for the Dalhousie FoM/UGME Curriculum:	
7.	STUDENT RESEARCH PARTICIPANTS	
	• EDUCATION LEVEL OF STUDENTS INVOLVED (e.g., Med 1, Med 2, Med 3, Med 4:	
	- 2500, 11014 224 22 01 0105 21110 1144 024 25 (0.g., 1104 1, 1104 2, 1104 0, 1104 4.	
	TIME COMMITMENT REQUIRED FROM STUDENTS:	

START [	DATE:
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#### **END DATE:**

### 8. ANTICIPATED ETHICS APPROVAL FOR RESEARCH

Ethics approval is not required prior to an application being reviewed by UMECC; however, UMECC approval is conditional upon researchers applying for and receiving ethics approval. This ethics approval must be obtained from Dalhousie, either through the Dalhousie Research Ethics Board (REB) or associated hospital REBs, or through a "Board of Record Review Acknowledgement" from the Dalhousie REB. This ethics approval/confirmation must be submitted to UGME prior to research request being distributed to students.

## 9. RISKS

• Potential risks to students participating in the study:

## 10. BENEFITS

• Benefits to students and/or Undergraduate Medical Education:

#### 11. OTHER

 Please add any additional information you would like the Committee to know (optional):