



RESEARCH REQUEST – Assignment / Coursework

Request for approval for students to conduct research with respect to their assignment /
coursework with Aġenzija Sappor.

STUDENT 1

NAME: _____

SURNAME: _____

ID CARD NUMBER: _____

PASSPORT NUMBER:
(if you do not have a Maltese ID) _____

ADDRESS: _____

TEL. NUMBER/S: _____

MOB NUMBER/S: _____

E-MAIL/S: _____

STUDENT 2

NAME: _____

SURNAME: _____

ID CARD NUMBER: _____

PASSPORT NUMBER:
(if you do not have a Maltese ID) _____



ADDRESS:

TEL. NUMBER/S:

MOB NUMBER/S:

E-MAIL/S:

STUDENT 3

NAME:

SURNAME:

ID CARD NUMBER:

PASSPORT NUMBER:

(if you do not have a Maltese ID)

ADDRESS:

TEL. NUMBER/S:

MOB NUMBER/S:

E-MAIL/S:



STUDENT 4

NAME: _____

SURNAME: _____

ID CARD NUMBER: _____

PASSPORT NUMBER:
(if you do not have a Maltese ID) _____

ADDRESS: _____

TEL. NUMBER/S: _____

MOB NUMBER/S: _____

E-MAIL/S: _____

STUDENT 5

NAME: _____

SURNAME: _____

ID CARD NUMBER: _____

PASSPORT NUMBER:
(if you do not have a Maltese ID) _____

ADDRESS: _____



TEL. NUMBER/S: _____

MOB NUMBER/S: _____

E-MAIL/S: _____

If more than 5 students are carrying out the assignment, please provide details of additional students on a separate sheet

DETAILS OF COURSE BEING FOLLOWED:

COURSE: _____

UNIVERSITY/EDUCATIONAL ENTITY: _____

COURSE YEAR: _____

NAME OF MODULE / CREDIT: _____

MODULE / CREDIT TUTOR: _____

TUTOR'S CONTACT DETAILS: _____

TITLE / BRIEF DESCRIPTION OF ASSIGNMENT / PROJECT:



PARTICIPANTS REQUIRED: Yes ___ No ___

IF YES, NUMBER OF PARTICIPANTS REQUIRED: _____

SUBMISSION DATE OF ASSIGNMENT / PROJECT: _____

DETAILS OF REQUEST MADE TO AĠENZIJA SAPPOR (E.G. INTERVIEW, QUESTIONNAIRE, ETC.):

RELEVANCE OF THE INFORMATION GATHERED FROM AĠENZIJA SAPPOR TO THE ASSIGNMENT BEING CARRIED OUT (HOW WILL THE INFORMATION GATHERED BE USED?)

DOCUMENTS SUBMITTED WITH APPLICATION FORM (Mark where applicable):

	Yes	No	Not applicable
Questionnaire/s			
Interview guideline/s (i.e. list of questions to be used during interview)			
Participant instructions			
Consent form/s			
Other institutional approvals (e.g. Ethics Board)			
Other material used			
<i>Requests will only be processed once all relevant documents (where applicable) are submitted in addition to this form</i>			

TERMS AND CONDITIONS:

- Personal data shall only be collected and processed for the specific purpose to conduct the research, and for no other purpose.
- The data shall be adequate, relevant and not excessive in relation to the processing purpose.
- All reasonable measures shall be taken to ensure the correctness of personal data.
- Personal data shall not be disclosed to third parties and may only be required by Aġenzija Sappor or the supervisor for verification purposes. All necessary measures shall be implemented to ensure confidentiality and, where possible, data shall be made anonymous.
- All references to personal data should be omitted unless consent is specifically obtained from the person identified in the research report.
- At the end of the research, all personal data will be destroyed.
- Unless otherwise authorised by the Aġenzija Sappor Research Review Panel/Research Office, the researcher shall obtain the consent from the data subject (respondent) and provide them with the following information:
 - the researcher's identity and contact information;
 - purpose of processing the data;
 - the recipients to whom personal data may be disclosed; and,
 - his/her rights to access, rectify, and where applicable erase the data concerning him.

I / we, the undersigned hereby undertake to abide by the terms and conditions for approval as attached to this application.
(Tick if you agree)

I / we, the undersigned, also give my / our consent to Aġenzija Sappor to process my / our personal data for the purpose of evaluating my / our request and other matters related to this application. I / we also understand that, I / we can request in writing a copy of my / our personal information. I / we can also request rectification, blocking or erasure of such personal data that has not been processed in accordance with the Act.
(Tick if you agree)

I / we, the undersigned, understand that I /we am / are to submit a copy of my / our assignment / project to the Aġenzija Sappor's Research Office, once it is finalised and a grade has been allocated.
(Tick if you agree)



	Name & Surname	ID Number	Signature
Student 1			
Student 2			
Student 3			
Student 4			
Student 5			