Receipt	Number	

Human Subject Research Review Application Form

YEAR MONTH DAY

To the Chair of the Institute of Human and Social Sciences Ethics Committee, Kanazawa University:

Applying Individual's Affiliation Name

I submit the following application based on the provisions of Article 6 of the Institute of Human and Social Sciences Ethics Committee, Kanazawa University Establishment Requirements.

1. Research Topic Name		
2. Research Period	YEAR MONTH DAY - YEAR M (Survey Period: YEAR MONTH DAY - YEAR M	ONTH DAY IONTH DAY)
3. Research		
Manager Name	(Affiliation)	
4. Cooperative Researcher Name, Affiliation, and Job Title	(Affiliation)	(Job Title)
5. Information Manager Name, Affiliation, and Job Title	(Affiliation)	(Job Title)
6. Research Overview	(Number Age Con Two of Employment Etc.)	
7. Research	(Number, Age, Sex, Type of Employment, Etc.)	
Subject Details		
the presence of disadvanta containing personal inform	deration related to the possible types of invasiveness that may a ges and dangers, and the use of materials provided through questation. ge and management methods)	
9. Notes		

1. Concrete, detailed information must be written for each item to the greatest degree possible.

Human Subject Research Review Application Form

YEAR MONTH DAY

To the Chair of the Institute of Human and Social Sciences Ethics Committee, Kanazawa University:

Applying Individual's Affiliation Name Instructor Name

I submit the following application based on the provisions of Article 6 of the Institute of Human and Social Sciences Ethics Committee, Kanazawa University Establishment Requirements.

1. Research Topic Name		
2. Research Period	YEAR MONTH DAY - YEAR (Survey Period: YEAR MONTH DAY - YEAR M	MONTH DAY MONTH DAY)
3. Research Manager Name	(Affiliation)	
4. Cooperative Researcher Name Affiliation and Job Title	(Affiliation)	(Job Title)
5. Information Manager Name Affiliation and Job Title	(Affiliation)	(Job Title)
6. Research Overview		
7. Research Subject Details	(Number, Age, Sex, Type of Employment, Etc.)	
arise through the materials provide information.	ner consideration related to the possible types of research, the presence of disadvantages and dated through questionnaires and interviews rage and management methods)	angers, and the use of
9. Notes		

1. Concrete, detailed information must be written for each item to the greatest degree possible.

Consent Form

To the Deans of the Kanazawa University College of Human and Social Sciences and

Institute of	f Human and Social Sciences:
Resear	rch Topic:
Resear	rch Manager:
Affilia	tion and Job Title (Academic Year if the Research Manager is a Student):

Instructor Name (If the Research Manager is a Student):

I have received a complete explanation of the above-written research or investigation to be carried out within the Kanazawa University Institute of Human and Social Sciences, and have given my consent. I agree to be a test subject or cooperating party to the investigation.

YEAR MONTH DAY

Current Address
Signature
2. Ignavaro
Parent or Guardian's Signature

^{*}If this form is difficult to implement, any new form must adhere to the same principles.

Human Subject Research Review Results Report

			YEAR		MONTI	H	DAY
To the Dean of the Kanazav Sciences:	va Ui	niversity	Institut	e of	Human	and	Social
Institute of Human and Social University Chair	Scien	nces Ethic	es Comm	ittee	, Kanaz	awa	
This report is in regard to th review held at the No Co	ommi						
Receipt Number							
Research Topic							
Research Manager							
Result Approved Approved with Condit	ions	Not Appr	oved 1	Not A	pplicable	Hele	d
Reason for conditional appr non-applicability, etc.	roval,	recomm	ended	altera	ations,	non-ap	proval,

Human Subject Research Review Results Notification

YEAR	MONTH	DAY
112/11	MICHIEL	$D_{\Omega 1}$

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Kanazawa University Institute of Human and Social Sciences Dean

This is to	notify you	that the following	decision was	made as a resu	ult of the
review held	at the No.	Committee I	Meeting of FY	(held on	
YEAR	_MONTH_	DAY).			

Details

Receipt Number	Approval Number *			
Research Topic				
Research Manager				
Result				
Approved Approved with Conditions	Not Approved	Not Applicable	e Held	
Reason for conditional approval, non-applicability, etc.	recommended	alterations, n	on-approval,	

^{*}Authorization numbers consist of the fiscal year (Gregorian calendar) as well as the serial number of the research plan within that fiscal year.

Human Subject Research Additional Review Application Form

YEAR MONTH DAY

To the Chair of the Institute of Human and Social Sciences Ethics Committee, Kanazawa University:

Applying Individual's Affiliation

Name

I submit the following application based on the provisions of Article 14 of the Institute of Human and Social Sciences Ethics Committee, Kanazawa University Establishment Requirements.

1. Research Topic Name	
2. Research Manager Name	(Affiliation)
3. Judgment	(Review Result Notification Reception Date) YEAR MONTH DAY
Reason for request	ing an additional review: