As UVic sign off is not electronically programmed into the PREP System, signatures must be obtained on this form when the PI is a UVic faculty or when the PI is supervising a Principal Applicant who is a UVic Graduate Student.

Instructions
1. Fill in the Signature Page Form (it's a Word document) up to section D.
2. PI provides their *electronic or ink signature* and date (section D).
3. PI downloads a PDF of their PREP application form to email to their departmental signatory. *This allows the signatory to be aware of the study they are signing off.*
4. PI obtains the *electronic or ink signature* and sign-off date of their chair, director or dean (Section D)
5. Upload the completed Signature Page Form to your ethics application form as an appendix on PREP.

Contact the Research Ethics Office if you have questions. 250-472-4545 ethics@uvic.ca

**A. Principal Investigator (Must be a UVic Faculty Member)**

*If there is more than one Principal Investigator, provide their name(s) and contact information below in Section B, Other Investigator(s) & Research Team.*

Last Name:  
First Name:  
Department/Faculty:  
UVic Email:  
Title/Position: (Must have a UVic appointment)

☐ Faculty  ☐ Adjunct or Sessional Faculty (Appointment start and end dates):_________________

**B. Principal Applicant (Must be a registered student conducting the study for a UVic degree (if applicable)**

Last Name:  
First Name:  
Department/Faculty:  
UVic Email:  

☐ Undergraduate  ☐ Masters Student  ☐ Doctoral Student  ☐ Post Doctoral
C. Project Information

Project Title:

D. Agreement and Signatures

Principal Investigator/Student Supervisor affirm that:

- I have read the application and it is complete and accurate.
- The research will be conducted in accordance with the University of Victoria regulations, policies and procedures governing the ethical conduct of research involving human participants and all relevant sections of the TCPS 2.
- The conduct of the research will not commence until ethics approval has been granted.
- The researcher(s) will seek further HREB review if the research protocol is modified.
- Adequate supervision will be provided for students and/or staff.

__________________________
Signature

__________________________
Print Name

__________________________
Date

Chair, Director or Dean

(To be signed by the person to whom the PI, or student’s supervisor reports, and must not be the same person as the PI or student’s supervisor. The Research Ethics Office cannot accept applications with duplicate signatures)

I affirm that adequate research infrastructure is available for the conduct and completion of this research.

__________________________
Signature

__________________________
Print Name

__________________________
Date