



Appendix 6: Unanticipated Event/Significant Change Report

This Unanticipated Event/Significant Change Report must be submitted to the Data Access Committee for the occurrence of Unanticipated Events and/or Significant Changes during an approved research project that may have an impact on the CCWS data and/or the ability of the Approved User to achieve his research goals.

Notification of compromised data or material security, integrity or confidentiality, or a breach of ethics must be reported at the first reasonable opportunity by telephone (604-822-2990) to the CCWS DAC, followed by this written notice report within 48 hours of the event.

File number (provided	in your original approval letter):			
Original title and summary of the main research project:				
1. Name of Princ	ipal Applicant including affiliation and contact details.			
Name:				
Title:				
Position:				
Affiliation:				
Institutional Email:				
Mailing Address:				



2. Name of the Authorized Institutional Representative, including affiliation and contact details.

Name	:		
Title:			
Position:			
Affiliation:			
Institutional Email:			
Mailir	ng Address:		
3.	Title of Project		
4.	Description of t	he Unanticipated Event/Significant Change	
a.	Date of the eve	nt:	
b.	Description of t	he unanticipated event/significant change	
C.	c. Has the Research Ethics Board been notified?		
d.	What action (if	any) has been taken, or will be taken, by the Approved User?	



SIGNATURE

Principal Applicant:	
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Name	
Position	
Signature	
Date	

Authorized Institutional Representative of the host institution:

Name	
Position	
Signature	
Date	

Please e-mail a PDF of the signed *Unanticipated Event/Significant Change Report* to survey@ccws-becc.ca