



APPLICATION FOR STEM CELL OVERSIGHT COMMITTEE REVIEW FOR TRAINEES USING APPROVED CELL LINES

INFORMATION SHEET (do not submit this page with completed application form)

This application form is meant for Trainees who have been awarded funding to study human pluripotent stem cells:

- from CIHR, NSERC or SSHRC; and/or
- under the auspices of an institution receiving Agency funding.

Trainees should consult chapter 12, section F of the *Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans, or TCPS 2 2014* and Frequently Asked Questions to determine whether or not the research requires review by the Stem Cell Oversight Committee (SCOC). There are links to these documents on the CIHR website (<http://www.cihr-irsc.gc.ca/e/15255.html>). Any questions can be directed to StemCell-Cellulesouche@cihr-irsc.gc.ca.

IF YOUR APPLICATION:	COMPLETE SECTIONS
<ul style="list-style-type: none"> • Proposes to derive human embryonic stem cells and/or use human embryonic stem cells that have not yet been approved 	PLEASE CONTACT StemCell- Cellulesouche@cihr- irsc.gc.ca.
<ul style="list-style-type: none"> • Is for grant support 	APPLICATION FORM FOR GRANTS

Additional information may be requested from the researcher if SCOC has concerns that are not addressed in the documentation provided.

Governing Council has delegated its authority to approve research using existing SCOC-approved human embryonic stem cell (hESC) lines and/or human induced pluripotent stem (iPS) cells or their derivatives to SCOC. SCOC will respond to research proposals within its delegated authority within 30 business days of receipt of a complete application.

Governing Council's approval is required on all other types of research proposals (e.g., research involving the derivation of hESC from human embryos, the use of hESC lines not yet approved by SCOC).

Please send completed form to:
Stem Cell Oversight Committee
Canadian Institutes of Health Research
160 Elgin St., 9th Floor
Address Locator 4809A
Ottawa, Ontario K1A 0W9

**APPLICATION FOR STEM CELL OVERSIGHT COMMITTEE REVIEW
FOR TRAINEES USING APPROVED CELL LINES**

A. GENERAL INFORMATION

APPLICATION DETAILS:		
Trainee:		
Mailing address of Trainee:		
E-mail address of Trainee:		
All Supervisor(s):		
Title of application for Trainee funding:		
Funding Agency:	Funding competition:	Application Number:
Application status: Peer reviewed: Yes, by institution <input type="checkbox"/> Yes, by funding organization <input type="checkbox"/> Not peer reviewed <input type="checkbox"/> Approved for funding: <input type="checkbox"/> Yes, date of approval: _____ (dd/mm/yyyy) <input type="checkbox"/> Submitted to funding opportunity, awaiting decision <input type="checkbox"/> Other (please describe): _____		
Is this application for Trainee funding wholly subsidiary to a SCOC-approved project? That is, has the research that will be conducted been reviewed by SCOC as part of a grant? <input type="checkbox"/> Yes (see below) <input type="checkbox"/> No If 'Yes', please indicate which SCOC-approved project the Trainee proposal is wholly subsidiary to: Title: _____ Led by: _____ Funded By: _____ Date approved by SCOC: _____		
Please ensure that the supervisor(s) sign(s) section C, below		

OVERVIEW:
<p>1. Will human induced pluripotent stem cells be used during the course of the funding?</p> <input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes': <ul style="list-style-type: none"> and the answers to 2, 3 and 4 are all 'No', then the research does not require SCOC review and the answers to 2 and 4 are 'No' and the answer to 3 is 'Yes', but limited to teratoma formation, then the research does not require SCOC review. Do not submit this form. However, you must inform SCOC in writing (at address above) that human pluripotent stem cells will be used for teratoma formation only and include a statement that the animals will not be used for reproductive purposes.
<p>2. Will human embryonic stem cells be used during the course of the funding?</p> <input type="checkbox"/> Yes (see below) <input type="checkbox"/> No If 'Yes': <ul style="list-style-type: none"> Please list all lines that will be used: <p>• If any of these lines have not been approved by SCOC, please contact StemCell-Cellulesouche@cihr-irsc.gc.ca</p>

OVERVIEW:

3. Will any non-human animals be engrafted with human pluripotent stem cells or cells derived from human pluripotent stem cells during the course of the funding?

Yes (see below)

No

If 'Yes', will any non-human animals engrafted with human pluripotent stem cells or cells derived from human pluripotent stem cells in the course of this research be used for reproductive purposes?

Yes

No

4. Will human pluripotent stem cell lines, or cells derived from them, be transferred into human subjects during the course of this funding?

Yes (see below)

No

If 'Yes', the research must also be in compliance with the *Food and Drugs Act* and all its applicable *Regulations*, including the **Canadian Safety of Human Cells, Tissues and Organs for Transplantation Regulation, which must be confirmed by Health Canada. Has the application been submitted to Health Canada?**

Yes

No

5. Describe the potential benefits of this research:

6. Describe how each of the human pluripotent stem cell lines will be used. Please list each experiment that involves the use of human pluripotent stem cells and briefly (5-10 lines) describe specifically how the cells will be used in each. SCOC has a diverse composition, so the description should be written in non-technical, jargon-free language, with sufficient detail for SCOC to assess whether the use conforms to the provisions of TCPS 2 (2014). This will ensure that SCOC has a clear understanding of which experiments proposed in the application for funding involve the use of human pluripotent stem cells, as the award itself often does not provide sufficient detail and the experiments involving pluripotent cells may be included in different sections throughout the grant.

APPENDICES:

You must check a box in each section

Appendix 1 Funding application

Attach one complete copy of the original application for funding as Appendix 1 (mandatory). Please include the budget, the list of patents held by the trainee (if applicable), and the list of the funds requested and the funds held by all applicants where these are not part of the application for funding.

I have attached the complete application for funding.

Appendix 2 Agreements and contracts

Are there agreements that may:

- limit your ability to share tissues that may be derived from hESC in the course of the research; or
- restrict the right to publish the results of the research using hESC (see '[Frequently Asked Questions](#)' for interpretation of what constitutes a reasonable delay, generally submission for publication within approximately 90 days); or
- impose commercial or other obligations that are related to the use of the hESC?

Yes

No, there are no agreements that would impede my ability to complete my thesis and/or publish research

If yes, please list and append the agreements, specifying the relevant provisions of each, with a brief explanation. Failure to append relevant contracts may delay grant approval, please see Article 12.20 of TCPS 2 (2014).

Appendix 3 Financial interest

Please see Article 12.19 of TCPS 2 (2014): In some instances, disclosure may not be a sufficient response to concerns about actual, perceived or potential conflicts of interest and researchers and/or their institutions may be asked by SCOC to remedy any possible distortion of proper procedures attributable to such conflicts.

Do you or your co-applicants have any financial interest in the outcome of the research described in this application?

Yes

No, neither I nor my co-applicants have any financial interest

If yes, please describe in detail any financial interest you may have in the outcome of the research described in this application and explain any commercial plan in a few short sentences and provide relevant documentation, and attach these as Appendix 3.

If no, then Appendix 3 is not required.

Appendix 4 Other conflicts of interest

Do you have any other conflicts of interest in the outcome of the research described in this application?

Yes

No

If yes, please append a description as Appendix 4.

If no, then Appendix 4 is not required.

ATTESTATIONS:

You must check each box below

i) An amended application will be submitted to SCOC for review and approval if new experiments involving human pluripotent stem cells are planned and/or if cell lines that have not yet been approved by SCOC are to be used before such work commences

Yes

ii) SCOC will be provided with written notification should the use of additional SCOC-approved stem cell lines not described in this application be planned (this notification would include the title of the original application, the name of the applicant and indicate which cell lines would be used).

Yes

iii) I understand my research institution's conflict of interest policy and will comply with that policy.

Yes

iv) SCOC will be notified of relevant contracts and/or potential conflicts of interest as they arise.

Yes

B. SIGNATURES

I certify that all information provided above is correct to the best of my knowledge:		
Name (Trainee)	Signature	Date
Name (Supervisor)	Signature	Date
Name (Supervisor)	Signature	Date