



Application form for a research licence to authorize activities in relation to non-therapeutic research on cannabis (NTRC)

Complete the required information. All fields in this document are required unless otherwise specified. If a section is not applicable, indicate it as such.

Refer to the [Cannabis licensing application: Research licence](#) web page for more information.

Part 1: Contact information	
Applicant information	
Applicant name (corporation or individual):	
Application number:	
Name of responsible person:	
Part 2: Application information	
Institution-wide research licence(s)	
<p>Is this application linked to an institution-wide research licence?</p> <p>Yes No</p>	<p>If yes, provide the licence number of the institution-wide research licence:</p>
Part 3: Study information	
Protocol title:	
Protocol number (if applicable):	
<p>Indicate the proposed risk category of the NTRC study:</p> <p>Category 1 Category 2 Category 3</p>	<p>Study site information:</p> <p>Single site Multiple sites</p>
<p>If you have selected multiple sites, please provide details explaining why additional sites are required:</p>	

Objective(s) of study

Provide the objective(s) of the study. This must be identical what is proposed in the study protocol:

Duration of the research licence

Provide the duration for which the research licence is sought, up to a maximum of 5 years, and a rationale for the duration. If you need to continue your research past the expiry date of the licence, you may apply for a renewal of the licence:

Cannabis information (Category 2 and 3 only)

Indicate the number of Cannabis information form(s) included as part of your application:

Part 4: Ethical framework attestation (Category 1 only)

Check the box below to attest.

I, the responsible person, attest that an ethical framework is in place to address any ethical considerations that may be inherent to the proposed research, in accordance with the principles outlined in the [Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans](#), and any other applicable law(s) governing ethics. This must include, but is not limited to:

- the safety and welfare of participants
- the rights, privacy and confidentiality of participants
- informed consent
- the use of the research findings
- any real, potential or perceived conflicts of interest

Part 5: Research Ethics Board (REB), Institutional Review Board (IRB) or Independent Ethics Committee (IEC) Information (Category 2 and 3 only)		
Section A		
<p>Check all the boxes below that apply to your study and situation. At a minimum, Box 1 must be checked. If you select boxes 2 or 3, please complete the additional information in section B below:</p> <p>Box 1. I will seek and obtain approval from a Research ethics board (REB), Institutional review board (IRB) or Independent ethics committee (IEC) before initiating the proposed non-therapeutic research on cannabis study and submit the letter of approval or certificate of ethics review from the corresponding REB, IRB or IEC once available.</p> <p>Box 2. I have sought and obtained approval from an REB, IRB or IEC for the proposed non-therapeutic research on cannabis study. If this box has been selected, you need to include the letter of approval or certificate of ethics review from the corresponding REB, IRB, or IEC in your application.</p> <p>Box 3. I have sought approval but have been previously refused from an REB, IRB or IEC for the proposed non-therapeutic research on cannabis study. If this box has been selected, you need to explain the reason(s) for the refusal.</p>		
Section B: REB, IRB or IEC name and contact information		
Note: This section only applies if boxes 2 or 3 in section A have been selected		
Study status:	<input type="checkbox"/> Approved <input type="checkbox"/> Refused	Date of approval/refusal (yyyy-mm-dd):
Name of REB, IRB or IEC:		
Name of chair:		
Position title:		
Email:		Telephone number:
Street/suite/PO box:		
City/town:	Province:	Postal code:
Reason(s) for refusal (if applicable):		

Part 6: Contents of the NTRC application	
Check the boxes below to confirm that all application requirements that apply to your study risk category have been included as part of your application.	
Required documents	Applicable category
Application form (this form)	All categories
Abridged protocol	Category 1
Full protocol	Category 2, 3
Cannabis information form(s)	Category 2, 3
Cannabis research and evidence dossier	Category 2, 3
REB, IRB or IEC letter of approval or certificate of ethics review, if available at the time of application	Category 2, 3
Informed consent form	Category 3

Part 7: Attestation	
I, the undersigned, attest that the information included in this application form is accurate and complete.	
Responsible person name:	
Responsible person signature:	Date (yyyy-mm-dd):