



Winnipeg Police Service

Application to Conduct Research

If this request receives approval with the Winnipeg Police Service, you may be asked to sign a Research Agreement.

** required*

Contact Information

Primary Researcher

Please provide Curriculum Vitae, indicating educational background and research experience.

First Name/s*: _____ Surname*: _____

Organization/University*: _____

Faculty/Department*: _____

Mailing address*: _____

Phone* (business hours): _____ Mobile: _____

Email*: _____

Research Partners/Assistants

First Name/s*: _____ Surname*: _____

Organization/University*: _____

Faculty/Department*: _____

Mailing address*: _____

Phone* (business hours): _____ Mobile: _____

Email*: _____

Research Organization

Role in the Research*: _____

Faculty/Department*: _____

Mailing address*: _____

Phone* (business hours): _____ Mobile: _____

Email*: _____

Academic Supervisor

First Name/s*: _____ Surname*: _____

Role in the Research*: _____

Organization/University*: _____

Faculty/Department*: _____

Mailing address*: _____

Phone *(business hours): _____ Mobile: _____

Email*: _____

Research Specifics

Title of proposed project*:

Summary of research*

Details of Research Proposal

Please describe the proposed research in detail or attach an existing Research Proposal. Include your:

- Research questions or goals
- Method
- Data analysis
- Ethics Committee confirmation

List participating organizations (if research is collaborative):

Statement of benefits the research will make in the support of the Winnipeg Police Service Strategic Plan*:

Details of funding or grant (if applicable)

Funding details, including shared funds with Winnipeg Police Service:

Funding Body: _____

If no funding sought, explain conditions that will allow completion of project:

Assistance requested from Winnipeg Police Service

Detail of methodology

Detail request for access to information (indicate all that apply). Access will be limited to records listed. Viewing of original records will only occur onsite for purpose of research indicated. Revision of request must be submitted in writing and requires approval from the Chief of Police.

- Statistical information
- Individual records (de-identified)
- Individual data (potentially re-identifiable)
- Use of employee surveys, interviews, research groups, observation, video recording or other research tools. Sample topics/questions to be attached.
- Other resources (please explain)

Details of Contact with Winnipeg Police Service

- If proposed research has been initiated, provide details of person contacted in Winnipeg Police Service.

Project Completion

Timing for Completion

Estimated time commitment with Winnipeg Police Service involvement and access to records*.

Projected completion date*: _____

Anticipated dissemination of findings

Date of submission* _____

Submit to: wps-researchapplications@winnipeg.ca



Your personal information is being collected under the authority of s.36(1)(b) of The Freedom of Information and Protection of Privacy Act. This information will be used in the administration of your application to access information held by the City of Winnipeg (Winnipeg Police Service), and will not be used or disclosed for any other purposes, except as authorized by law. If you have any questions about the collection of this information, contact the Corporate FIPPA Coordinator by mail to City Clerk's Department, Administration Building, 510 Main Street, Winnipeg MB, R3B 1B9, or by telephone at 311.