



PRIFYSGOL CYMRU

Y Drindod Dewi Sant

UNIVERSITY OF WALES

Trinity Saint David

E3 FORM – Sports Research Project

APPLICATION FOR ETHICAL APPROVAL – BA level

CAIS AM GYMERADWYAETH MOESEGOL – Lefel BA

Mae'r ffurflen hon i'w chwblhau gan bob BA myfyrwr. Rhaid i bob ffurflen gael ei ystyried gan diwtor y modiwl. Dylai un copi o'r ffurflen yn cael ei roi ar y ffeiliau Gyfadran ac un copi cadw ar y ffeil myfyrwr.

This form is to be completed by all BA students conducting research, projects or productions. This form should be completed by the student. All forms must be considered by the Module tutor. A copy of the form must be kept centrally and on the student file.

ADRAN 1 – MANYLION MYFYRIWR

SECTION 1 - STUDENT DETAILS

Enw Llawn  
Full Name

Benjamin, Cheley

Ysgol/Cyfadran/  
School/Faculty

School of business and  
management

Rhif Myfyriwr  
Student Number

P1600382

Cydlynnydd prosiect /  
Tiwtor  
Module Tutor/  
Programme Co-  
ordinator

Andrew Thomas

Enw'r Gradd  
Name of Degree

Sports Management

Teitl dangosol yr Traethawd Hir:

Indicative Title of Dissertation:

Trends and barriers in sports participation for middle aged adults

ADRAN 2 – MANYLION CYFRANOGWYR /  
CYNULLEIDFA

SECTION 2 - PARTICIPANT / AUDIENCE  
DETAILS

| Pwy yw'r cyfranogwyr arfaethedig?                                             | Who are the intended participants?                                        | Ydw /<br>Yes | Na /<br>No |
|-------------------------------------------------------------------------------|---------------------------------------------------------------------------|--------------|------------|
| Myfyrwyr / staff Y Drindod Dewi Sant                                          | Students / staff of Trinity Saint David                                   |              |            |
| Oedolion (dros oed 16 ac yn gymwys i gydsynio)                                | Adults (over the age of 16 and competent to give consent)                 |              |            |
| Plant a phobl ifanc dan oed                                                   | Children / legal minors                                                   |              |            |
| Cleifion neu gleientiaid gweithwyr proffesiynol                               | Patients or clients of professionals                                      |              |            |
| Rhywun sy'n cael ei gadw yn y ddalfa neu y mae'r llys wedi cymryd cyfrifoldeb | Anyone in custodial care or for whom the court has assumed responsibility |              |            |

Aelod o unrhyw sefydliad lle mae'n bosibl bod angen i unigolyn arall hefyd gydsynio.

A member of any organisation where another individual may also need to give consent.

Eraill: Nodwch: / Others: please identify:

| Nifer, Oed a Ffynhonnell y Cyfranogwyr<br>Rhowch fanylion yr demograffeg y cyfranogwyr / gynulleidfa. |                     |              | Participant / Audience Number and Age<br>Provide details of the demographics of the participants / audience. |
|-------------------------------------------------------------------------------------------------------|---------------------|--------------|--------------------------------------------------------------------------------------------------------------|
| Nifer o Gyfranogwyr / yn y Gynulleidfa                                                                | Participant/ number | Audience     | 50-100 people                                                                                                |
| Grŵp oedran y Cyfranogwyr/y Gynulleidfa                                                               | Participant/ group  | Audience age | 35-55years                                                                                                   |

### ADRAN 3 – GWEITHGAREDD YMCHWIL

### SECTION 3 – RESEARCH ACTIVITY

| 1. | Ydy'r prosiect yn cynnwys:                                                                                                                                                 | Does the project include:                                                                                                                      | Ydy / Yes                           | Nac ydy/N o                         |
|----|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|
|    | Defnyddio holiadur neu offeryn ymchwil tebyg                                                                                                                               | Use of questionnaire or similar research instrument                                                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
|    | Defnyddio prawf ysgrifenedig neu gyfrifiadurol                                                                                                                             | Use of written or computerised test                                                                                                            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
|    | Cyfweliad (cysylltwch gwestiynau posibl)                                                                                                                                   | Interview (attach provisional questions)                                                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
|    | Dyddiaduron                                                                                                                                                                | Diaries                                                                                                                                        | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
|    | Arsylwi ar gyfranogwyr a hwythau'n ymwybodol o hynny                                                                                                                       | Participant observation with their knowledge                                                                                                   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
|    | Arsylwi ar gyfranogwyr a hwythau ddim yn ymwybodol o hynny                                                                                                                 | Participant observation without their knowledge                                                                                                | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
|    | Recordio fideo neu sain                                                                                                                                                    | Video or audio-taping                                                                                                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
|    | Mynediad i wybodaeth bersonol neu gyfrinachol heb gydsyniad penodol y cyfranogwyr                                                                                          | Access to personal or confidential information without the participants specific consent                                                       | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
|    | Defnyddio unrhyw gwestiynau, ysgogiadau prawf, cyflwyniad y gallai rhai cyfranogwyr eu profi fel rhywbeth sy'n achosi niwed / tramgwydd corfforol, meddyliol neu emosiynol | Administration of any questions, test stimuli, presentation that may be experienced as physically, mentally or emotionally harmful / offensive | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
|    | Cyflawni unrhyw weithredoedd allai achosi embaras neu effeithio ar hunan-barch                                                                                             | Performance of any acts which may cause embarrassment or affect self-esteem                                                                    | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
|    | Ymchwilio i gyfranogwyr sy'n ymwneud â                                                                                                                                     | Investigation of participants involved in                                                                                                      | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |

|                                                           |                                                                         |  |
|-----------------------------------------------------------|-------------------------------------------------------------------------|--|
| gweithgareddau anghyfreithlon                             | illegal activities                                                      |  |
| Gweithdrefnau lle defnyddir twyll                         | Procedures that involve deception                                       |  |
| Gweini unrhyw sylwedd, cyfrwng neu blasebo                | Administration of any substance, agent or placebo                       |  |
| Dull arall o gasglu data neu fformat cyflwyno (esboniwch) | Other method of data collection or presentation format (please explain) |  |

|                                               |                                       |                                             |
|-----------------------------------------------|---------------------------------------|---------------------------------------------|
| 2.                                            | <b>Restru eich dull o gasglu data</b> | <b>List your method of data collection:</b> |
| Survey's, questionnaire, and past experiments |                                       |                                             |

|                             |                                                                                          |                                                                                |              |            |
|-----------------------------|------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------|--------------|------------|
| 3.                          | <b>Risg Posibl:</b><br>(corfforol, seicolegol, cyfreithiol, cymdeithasol neu economaidd) | <b>Potential Risk:</b><br>(physical, psychological, legal, social or economic) |              |            |
| A oes unrhyw risg bosibl i: |                                                                                          | Is there any potential risk to:                                                | Ydw /<br>Yes | Na /<br>No |
| A                           | Cyfranogwyr?                                                                             | Participants?                                                                  |              |            |
| B                           | Ymchwilydd?                                                                              | Researcher?                                                                    |              |            |
| C                           | BrifYsgol/Cyfadrn?                                                                       | University?                                                                    |              |            |

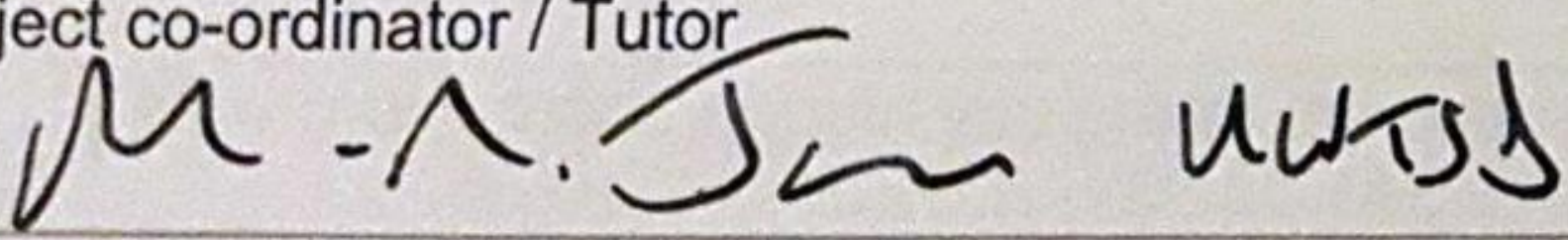
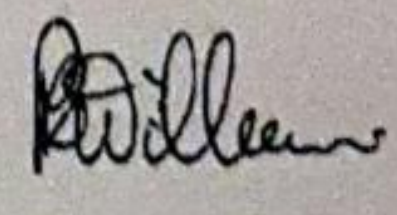
|    |                                                                              |                                                                                    |
|----|------------------------------------------------------------------------------|------------------------------------------------------------------------------------|
| 4. | <b>Rheoli Risg:</b><br>Os oes, beth yw'r risg a sut y bydd yn cael ei reoli? | <b>Management of Risk:</b><br>If yes, what is the risk and how will it be managed? |
|    |                                                                              |                                                                                    |

|    |                                                                                                                                                                                        |                                                                                                                                                                                     |            |
|----|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|
| 5. | Os ydych yn delio â phlant a / neu oedolion agored i niwed, rhaid i chi gyflwyno eich tystysgrif DBS i'ch tiwtor goruchwyllo i'w cymeradwyo cyn i unrhyw gysylltiad â cyfranogwyr hyn. | If you are dealing with children and/ or vulnerable adults you must present your DBS certificate to your supervising tutor for approval before any contact with these participants. |            |
|    |                                                                                                                                                                                        | Ydw /<br>Yes                                                                                                                                                                        | Na /<br>No |
| A  | Ydych chi wedi gwneud cais am dystysgrif DBS?                                                                                                                                          | Have you applied for a DBS certificate?                                                                                                                                             |            |
| B  | A yw eich tiwtor weld a'i gadarnhau eich tystysgrif DBS?                                                                                                                               | Has your tutor seen and approved your DBS certificate?                                                                                                                              |            |

|                                                                                                                                                                |                                                                         |                                                                  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|------------------------------------------------------------------|
| 6.                                                                                                                                                             | A fyddwch yn cael cydsyniad gwybodus ysgrifenedig gan eich cyfranogwyr? | Will you obtain written informed consent from your participants? |
| Yes                                                                                                                                                            |                                                                         |                                                                  |
| A                                                                                                                                                              | Os na fyddwch, pam hynny?                                               | If no, why not?                                                  |
| B                                                                                                                                                              | Os byddwch, sut byddwch yn sicrhau cydsyniad gwybodus?                  | If yes, how will you secure informed consent?                    |
| Rhowch eglurhad / Please explain:<br>Questionnaires and surveys will have a section asking to sign whether or not they are happy to take part in the research. |                                                                         |                                                                  |
| Cynhwyswch gopi o'r ffurflen gydsynio os ydych yn defnyddio un.                                                                                                |                                                                         | Please include a copy of the consent form if you are using one.  |

|                                                                                                                                                                                                                                                                        |  |                                                                                                                                                                                                                                                                          |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <b>ADRAN 4</b>                                                                                                                                                                                                                                                         |  | <b>SECTION 4</b>                                                                                                                                                                                                                                                         |  |
| <b>CEFNOGWYD /APPROVED</b>                                                                                                                                                                                                                                             |  | <b>NIS CEFNOGWYD/ NOT SUPPORTED</b>                                                                                                                                                                                                                                      |  |
| Datganiad<br>Mae'r wybodaeth a gynhwysir yma yn gywir, hyd eithaf fy ngwybodaeth a'm cred. Rwyf wedi ceisio dynodi unrhyw risgiau a phroblemau sy'n gysylltiedig â'r prosiect / ymchwil neu gynhyrchiad ac rwyf yn cydnabod fymrwymadau innau a hawliau'r cyfranogwyr. |  | Declaration<br>The information contained herein is, to the best of my knowledge and belief, accurate. I have attempted to identify any risks and issues related to the project/research or production and acknowledge my obligations and the rights of the participants. |  |

|                                                                                                                         |                                                                                                                           |
|-------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------|
| <b>Llofnodau</b><br>Dylai'r ffurflen hon gael ei chwblhau a'i llofnodi gan y myfyriwr a'r Cydlynnydd y prosiect /Twitor | <b>Signatures</b><br>This form should be completed and signed by the student and the Module tutor/Programme Co-ordinator. |
|-------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------|

|                                                                                                                                                       |                                                                                                                      |
|-------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------|
| Myfyriwr / Student: B.Cheley                                                                                                                          | Dyddiad: / Date: 27/01/2020                                                                                          |
| Cydlynnydd y prosiect /Twitor<br>Project co-ordinator / Tutor<br> | Dyddiad: / Date:<br>30.01.2020                                                                                       |
| Sefydliad / Organisation<br>Langland bay lifeguard club                                                                                               | Dyddiad: / Date:<br> 29/01/2020 |



PRIFYSGOL CYMRU

**Y Drindod Dewi Sant**

UNIVERSITY OF WALES

**Trinity Saint David**

Cyfranogwr Rhif Adnabod:  
Participant Identification Number:

**CWESTIYNAU CYFWELIAD SAMPL**

**SAMPLE INTERVIEW/ SURVEY QUESTIONS**

TEITL Y PROSIECT: / PROJECT TITLE: Trends and barriers in sports participation for middle aged adults

|    |                                                                                                                                  |
|----|----------------------------------------------------------------------------------------------------------------------------------|
| 1  | How regularly do you exercise per week?                                                                                          |
| 2  | How many hours on average do you participate in physical activity each week?                                                     |
| 3  | If given the chance, would you like to participate more in sport?                                                                |
| 4  | What are the main motivators driving you to participate in sport?                                                                |
| 5  | Do you feel that there are any barriers holding you back from further participation, if so what are these barriers?              |
| 6  | What sport would you be most interested in taking up if the opportunity arose?                                                   |
| 7  | Do you think there is a lack of opportunity for you to participate more in sport?                                                |
| 8  | How much money would you prefer to spend on physical activity per week?                                                          |
| 9  | Would a sport group/club aimed at a more mature audience; entice you to join more than a flexible sport club?                    |
| 10 | If you have children, would you find it easier to participate in sport within the same club as them or at the same time as them? |

ENW A CHYFEIRIAD YR YMCHWILYDD

NAME & ADDRESS OF RESEARCHER

Ben Cheley  
72 Huntingdon Way  
Tycoch  
Swansea  
SA2 9HN



PRIFYSGOL CYMRU

**Y Drindod Dewi Sant**

UNIVERSITY OF WALES

**Trinity Saint David**

Cyfranogwr Rhif Adnabod:  
Participant Identification Number:

**FFURFLEN GANIATÂD CYFRANOGIAD**

**PARTICIPATION CONSENT FORM**

TEITL Y PROSIECT: / PROJECT TITLE: Trends and barriers in sports participation for middle aged adults

Name of Researcher: Ben Cheley

**Please initial box**

1. I confirm that I have read and understand the information sheet dated 27/01/2020 for the above study. I have had the opportunity to consider the information, ask questions and have had these answered satisfactorily.

2. I understand that my participation is voluntary and that I am free to withdraw at any time, without giving any reason.

3. I understand that any information given by me may be used in future reports, articles or presentations by the research team.

4. I understand that my name will not appear in any reports, articles or presentations.

5. I agree to take part in the above study.

\_\_\_\_\_  
Name of Participant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

Ben Cheley

12/11/2019

B.Cheley

\_\_\_\_\_  
Researcher

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

You may decline to participate in this study. You may end your participation in this study at any time. If you decide to remain anonymous, maintaining your anonymity will be a priority and every practical precaution will be taken to disguise your identity. If you prefer anonymity, there will not be any identifying information

on audiotapes or transcripts of this or any interview. No-one will hear any audiotapes or see any transcripts without your prior consent. All materials generated from this or any interview will remain confidential.

**When completed, please return in the envelope provided (if applicable). One copy will be given to the participant and the original to be kept in the file of the research team at:**  
**PLACE:**

|                                |                                                                                                 |
|--------------------------------|-------------------------------------------------------------------------------------------------|
| ENW A CHYFEIRIAD YR YMCHWILYDD | NAME & ADDRESS OF RESEARCHER<br>Ben Cheley<br>72 Huntingdon Way<br>Tycoch<br>Swansea<br>SA2 9HN |
|--------------------------------|-------------------------------------------------------------------------------------------------|



PRIFYSGOL CYMRU  
**Y Drindod Dewi Sant**  
UNIVERSITY OF WALES  
**Trinity Saint David**

Cyfranogwr Rhif Adnabod:  
Participant Identification Number:

**FFURFLEN GANIATÂD CYFRANOGIAD**

**SAMPLE PARTICIPANT INFORMATION SHEET**

TEITL Y PROSIECT: / PROJECT TITLE: Trends and barriers in sports participation for middle aged adults

**\*THIS FORM IS TO BE AMENDED AND ADAPTED AS NECESSARY**

Dear Participant:

My name is Ben Cheley and I am studying in the School of University of Wales Trinity Saint David

I would like to invite you to participate in my research project. This project aims to critically evaluate the barriers holding middle aged people from participating in sport.

\*Attached to this letter is a short questionnaire developed by myself which will look at sports participation in adults, the regularity in which they exercise and the reasons for it. I believe your opinions will be extremely helpful to me.

Through your participation in the questionnaire and/or interviews, I hope to ascertain any key knowledge you have into why you may or may not participate in sports, and what factors could help improve that.

All questionnaires will be kept strictly confidential to the researchers involved and at **NO** time will individual questionnaires be released to the general public. This gives you a chance to express your views on your programme a confidential and anonymous forum and still be able to make a

difference. Your participation in this study is completely voluntary so you can withdraw from the questionnaire at any stage.

Our questionnaire should take about 5 minutes to complete, but there is no time constraint. There are also no right or wrong answers. Attached to this letter along with the questionnaire is a consent form. As this is a new project, your feedback is also important to us and we would be much obliged if you could also complete the feedback sheet along with the questionnaire. We understand that your time is at a premium but your opinions are very valuable to us.

After careful and precise analysis of the data obtained from this questionnaire, I will be happy to provide you with a copy of the findings at your request. The results of this questionnaire will hopefully enhance my understanding of barriers in adult sports participation. The results of the research will be fed back to if you wish to know the outcome of this research.

We thank you in advance for your time and participation. If any questions do arise, feel free to contact me at your convenience.

|                                |                                                                                                 |
|--------------------------------|-------------------------------------------------------------------------------------------------|
| ENW A CHYFEIRIAD YR YMCHWILYDD | NAME & ADDRESS OF RESEARCHER<br>Ben Cheley<br>72 Huntingdon Way<br>Tycoch<br>Swansea<br>SA2 9HN |
|--------------------------------|-------------------------------------------------------------------------------------------------|