

**REQUEST FOR A LISTING TO BE PLACED ON  
THE "ONLINE REPOSITORY OF RESEARCH"**

Title of Research or Resource: \_\_\_\_\_

Author: \_\_\_\_\_

Publisher: \_\_\_\_\_

Date of Publication or Availability: \_\_\_\_\_

Description: (please no longer than five sentences)

To obtain a copy (specify price): \_\_\_\_\_

For more information: \_\_\_\_\_

I have attached a version of this listing in French  Yes  No

I would like this listing to be included under the following subject headings (please check)

- |  |   |
|--|---|
| <input type="checkbox"/> Labour Force, Employment, Unemployment      | <input type="checkbox"/> Diversity                            |
| <input type="checkbox"/> Housing and Homelessness                    | <input type="checkbox"/> Poverty                              |
| <input type="checkbox"/> Quality of Life Indicators                  | <input type="checkbox"/> Health                               |
| <input type="checkbox"/> Disability Issues                           | <input type="checkbox"/> Gender Issues                        |
| <input type="checkbox"/> Civic Participation                         | <input type="checkbox"/> The Voluntary Sector                 |
| <input type="checkbox"/> Education                                   | <input type="checkbox"/> How to do program evaluation         |
| <input type="checkbox"/> How to do a needs assessment                | <input type="checkbox"/> How to prepare a program logic model |
| <input type="checkbox"/> Participatory social research methodologies | <input type="checkbox"/> Geographic Information Systems       |
| <input type="checkbox"/> Other Community Based Research Networks     | <input type="checkbox"/> Other (please specify) _____         |

I hereby give my permission to the Community Based Research Network of Ottawa (CBRNO) and to the Social Planning Council of Ottawa (SPC) to include the information contained in this form in the "Online Repository of Research", I understand that this is a joint project of the CBRNO and the SPC. I understand that the "Online Repository of Research" will be located on the website of the Social Planning Council of Ottawa. I realize the name of this initiative is expected to change from the current name "Online Repository of Research" and my permission to include the information remains in force when the name is changed. I am authorized to give this permission.

Name of authorized person (please print clearly)

\_\_\_\_\_

Signature of authorized person

\_\_\_\_\_

Date

\_\_\_\_\_

Please fax this form to Dianne at 613-236-7060 or mail to Ste. 501, 280 Metcalfe St., Ottawa, Ont. K2P 1R7