

**Institutional Review Board (IRB)**

**Proposal Application for Protocol Review and Approval**

To ensure your IRB application is complete, please check each box to indicate that you have included the required documents with the application. Depending on the nature of your document, you may not need all of the materials listed below. Carefully review the last page of this application for more details regarding these documents:

* This IRB application form
* The survey /interview questions
* The certificate of training on protection of human subjects
* The Adult Participant consent form
* The Participant Consent/Child Assent Form
* The Parent Consent Form
* The Preliminary Participant Checklist
* Documents from any outside organization stating approval to conduct research
* A faculty advisor statement (when the proposal is from a student) to supervise the research.

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Phone: Department:

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Campus Address:

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Faculty Advisor (if this is a student’s project):

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Proposed - Start Date: - End Date:

Sponsor (If project is funded by an outside agency):

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Project Title:

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Provide a brief description of the purpose for the research:

(The input boxes below will expand if additional room is needed.)

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Participants: Describe the number and type of participants, the source from which they will be recruited, and the method of recruitment. [Those under age 18, except college students, require written parent permission. For those under the age of 18 who are not college students, please use the child assent form.]

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Describe the procedures (what participants will be asked to do) in detail. Note any form of recording that will be used (e.g., audio, video, field notes, etc.). If participants are being compensated in any way, please describe.

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Does the research involve an off campus organization? Yes  No

If yes, provide a document from an appropriate authority giving the approval to conduct research. (See the listing of required documents provided at the end of these guidelines.)

What is the risk to the participants?

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How will the potential participants be informed that they do not have to participate in the study and may withdraw at any time with no penalty? This information is often provided in a consent form. (A template is available under *forms*.) If you are providing IRB with a copy of a consent form, just note that in the box below. If it is not possible to obtain a written consent form, describe below just how the participants will be informed of their rights.

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In what way have the confidentiality and privacy of the participants’ responses been ensured? This information is often provided in a consent form. If you are providing IRB with a copy of a consent form, just note that in the box below. If it is not possible to obtain a written consent form, describe below just how the participants will be informed of their rights to confidentiality and privacy.

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Are you going to use deception? Yes  No

If yes, how is it going to occur and what is the rational for its use? What are you going to do to remove the effects to the participants?

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Are the procedures potentially physically invasive or harmful? Yes  No

If yes, describe the medical referral process.

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Might the procedures be emotionally upsetting? Yes  No

If yes, describe the psychological counseling process.

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Education in how to protect human research participants is required. Please check all the boxes below that apply. At least one of the boxes must be checked for project approval. If none are checked, the researcher may submit this proposal for preliminary review, but must contact the IRB chair to identify how the necessary education will be achieved. Note: Free training is available online. Please refer to our website for more information. Training takes approximately 3 hours and provides a certificate of completion.

*Choose the appropriate box below & attach a copy of the certificate or statement of completion from the faculty advisor.*

The researcher has completed a certificate training course.

The faculty advisor has completed a certificate training course.

Please submit via electronic mail the following:

1. This application form with complete responses to the guideline questions (Saved as ***Last Name- Application***)
2. A copy of survey/interview questions used as part of the research, if appropriate (Saved as ***Last Name-Survey***)
3. A copy of the certificate of completion from training on how to protect human research participants or a brief statement from the faculty advisor with this statement. (Saved as ***Last Name-Training Certificate/Statement***)
4. The adult consent form, if appropriate, revised to match current project. \*The example on the website is just an example. Be sure to read and revise the entire document to match your study. (Saved as ***Last Name-Consent***)
5. The Participant Consent/Child Assent Form, if appropriate, revised to match current project. \*The example on the website is just an example. Be sure to read and revise the entire document to match your study. (Saved as ***Last Name-Participant Assent***)
6. A copy of the Parent/Representative Consent Form (if appropriate). \*The example on the website is just an example. Be sure to read and revise the entire document to match your study. (Saved as ***Last Name-Parent Consent***)
7. The Preliminary Participant Checklist. (Saved as ***Last Name-Preliminary Participant Checklist***)
8. A document from any outside organization stating approval to conduct research, if appropriate). (Saved as ***Last Name-Outside Approval***)
9. A statement from the faculty advisor (when the proposal is from a student) assuring IRB of the student’s competence to conduct research and the advisor’s approval of and willingness to supervise the research. (Saved as ***Last Name-Faculty Approval***)

to Dr. Nicholas DiFonzo, IRB (Institutional Review Board) Chair, [difonzo\_nicholas@roberts.edu](mailto:difonzo_nicholas@roberts.edu) Incomplete applications will be returned. Please allow 3-4 weeks for the IRB review process to be completed. No data collection should be started without formal approval from IRB.

May 2024