



<i>Office Use Only</i>	
IRB Tracking # _____	
_____ Exempt Review	
_____ Full Review	

Institutional Review Board

Investigator's Summary Description of Research Involving the Use of Human Subjects

PROJECT TITLE:	
SUBMISSION DATE:	PROPOSED START DATE: PROPOSED END DATE:
DEPARTMENT:	
PRINCIPAL INVESTIGATOR (PI)/FACULTY RESEARCH ADVISOR:	
PI CONTACT (E-MAIL):	
STUDENT RESEARCHER:	
STUDENT RESEARCHER CONTACT (E-MAIL):	
OTHER RESEARCHERS	
RESEARCH INVOLVES EXTERNAL ORGANIZATION?	REASON FOR RESEARCH CONDUCTED
<input type="checkbox"/> No: <input type="checkbox"/> Yes: _____ (Approval Documentation Must be Provided)	<input type="checkbox"/> Faculty Research <input type="checkbox"/> Student Project: (Class Name and #) _____ <input type="checkbox"/> Independent Student Research: _____ <input type="checkbox"/> Other: _____
DOES ANY MEMBER OF THE RESEARCH TEAM WORK OR VOLUNTEER AT THIS GROUP?	HAVE YOU REQUESTED EXTERNAL FUNDING?
<input type="checkbox"/> No <input type="checkbox"/> Yes: _____ (Approval Documentation Must be Provided)	<input type="checkbox"/> No <input type="checkbox"/> Yes: _____ (Approval Documentation Must be Provided)
Please explain whether the member of the research team, while fulfilling his/her normal work or volunteer obligations at this group, will have access to information about subjects and/or interact with subjects:	

I hereby certify that all the information contained herein is accurate. I understand that it is my responsibility to protect the rights and welfare of my subjects. I will protect the confidentiality of the information provided by my subjects unless I have obtained their written permission to disclose this information to others. Upon approval of this proposal by the IRB, no changes will be made without approval of the IRB, and that any problems, adverse reaction, or unforeseen conditions encountered in the use of human subjects will be immediately reported to the Chair of the IRB.

Faculty Advisor: As a faculty advisor I understand that it is my responsibility to ensure that I and all students working on this project have received the training needed to conduct the study and to safeguard the wellbeing of the subjects with whom they interact..

Principal Investigator's Signature

Date

Faculty Advisor's Signature

Date

Defiance College IRB Proposal

Consent/assent forms, instruments, recruitment material and other requested documentation
to be attached as appendixes to this proposal

1. Project Introduction/Overview					
<i>Please provide your statement of purpose, significance of study, and relevant supporting literature</i>					
2. Research Question and/or Research Hypothesis					
<i>Please provide concise answers</i>					
3. Data <i>Is the study conducted in, or recruited from the following categories?</i>					
Will this project involve a pre-existing data set?		___ Yes (Include source)		___ No	
If yes, did the subjects give permission for their information to be used for research purposes?		___ Yes		___ No	
Will this project involve observations of public behaviors?		___ Yes		___ No	
4. Subjects					
a. Characteristics of Subject Group <i>☑ Are any of the subjects in the following categories?</i>					
_____	_____	_____	_____	_____	_____
Pregnant women or fetuses	Economically or Educationally Disadvantaged	Children (Under the age of 18)	Seniors (Adults over the age of 65)	Victims of Crime or other traumatic experiences	Mentally /Physically Impaired/Learning Disabilities
<i>Please describe subjects used:</i>					
b. Recruitment of Subjects: <i>☑ Check which one applies to the recruitment of your subjects.</i>					
___ Recruitment of DC class, students, or personnel	___ Outside agencies, schools, organizations, or data base	___ Open call for participants (general public)			
<i>Please describe how you will recruit participants and attach copies or script (if recruiting orally) of the recruitment material (e.g. flyers, advertisements, letters, etc.):</i>					
c. Sampling Plan: <i>☑ Check which one applies.</i>					
___ Random Sampling	___ Stratified Sampling	___ Convenience Sampling	___ Other		

Please provide a rationale for your sampling plan:

d. Sample Size

Please provide the total number of expected participants and rationale.

5. Instruments (Attach all instruments to be used)

Please describe all means used to collect data and attach the instruments to be used (e.g. interview questions, surveys, assessments, etc.):

6. Procedures

Please describe the procedures used to collect data based on identified instruments and total time investment of the participant:

Will samples of blood or other bodily fluids be obtained from subjects? ___ Yes* ___ No

**If yes, please describe how the sample will be obtained, who will obtain it, and how :*

7. Risk to the subjects *Identify the following risk categories and your perception of the level of risk involved*

___ Physical ___ Psychological ___ Social ___ Legal ___ Economic

Please describe the risk in detail:

Perceived level of risk ___ Less than minimal ___ Minimal ___ Greater than Minimal

8. Mitigation of Risk to the Subject

a. Researcher Mitigation

Please describe how the researcher will try to mitigate the risk (a mitigation has to be supplied for every identified risk):

b. Research Gain

Please describe the importance of the information gained in relationship to the risk:

c. Equity and Equality

Please describe how the researcher will ensure equity and equality for the participants:

9. Compensations and Benefits

a. Are you offering any compensations to individuals for participating in your study? ___ Yes* ___ No

If yes, please describe:

b. Benefits to individual

Outside of any compensation offered what are the benefits for the individual for participating?

c. Benefits to society

How will participating in this study benefit society?

10. Consent Procedures

Federal regulations require precautionary measures to be taken to insure the protection of human subjects on physical, psychological, social, economical and other issues. This includes the use of “informed consent” procedures.

a. Type of Consent	<input checked="" type="checkbox"/> Which one(s) applies to your study?
<input type="checkbox"/> Oral Consent	<i>Script must be provided with short consent form</i>
<input type="checkbox"/> Written Consent	<i>Consent forms must be provided</i>
<input type="checkbox"/> Assent <input type="checkbox"/> Oral <input type="checkbox"/> Written <input type="checkbox"/> Parent Consent/Permission	<i>Assent form should be provided</i>
b. Are your subject(s) minors or mentally impaired?	<input type="checkbox"/> Yes* <input type="checkbox"/> No <i>If yes, Please describe how and by whom permission will be granted. *Subject Assent form must accompany Parent/legal guardian’s Permission/consent form.</i>
c. Do subject(s) have a cognitive limitation/impairment and/or a language/literacy barrier?	<input type="checkbox"/> Yes <input type="checkbox"/> No <i>Please describe the limitation/impairments and/or barrier and how you plan to ensure participants understanding for informed consent.</i>
d. Will subject(s) be provided copies of all consent documentation including implied consent description?	<input type="checkbox"/> Yes <input type="checkbox"/> No <i>If consent/assent documentation is not provided to participants, please justify why.</i>

11. Disclosure Check which one applies.

Federal regulations require precautionary measures to be taken to insure the protection of human subjects on physical, psychological, social, economical and other issues. This includes the use of “informed consent” procedures.

Full-disclosure Less than Full Disclosure Necessary Deception

Please describe how you will disclose the study to the participants. If less than full disclosure or necessary deception is chosen, please justify the need for such action. All studies using less than full disclosure or necessary deception must provide a debriefing script or handout explaining to the participants the true purpose of the study and need for deception.

12. Data Confidentiality

a. Does this data fall within: Public Domain Confidential Domain
(Ex: public record document, public access documents, court transcripts, etc.) (Ex: data only accessible by through permission of the institution and/or subject being studied)

b. Data Access
*Please describe **all parties** who will have access to the data.
 Please provide (in an attachment) evidence of human subject training/confidentiality agreement for those who have access.*

c. Subjects’ anonymity/confidentiality
How do you plan to protect the individual subjects’ anonymity/confidentiality?

d. Data Storage

How, where and for how long will the data be stored? (Please note that for IRB purposes all data must be stored for a minimal of three years.)

e. Data Deletion

How will the data be destroyed? (Please address all data sources, e.g. video, audio-visual, interview, questionnaires, consent forms, electronic data, etc.)