



Request for Review

Project Title:

(note: funded project titles must match protocol titles)

Primary Investigator or Faculty Advisor Information.

| | | |
|----------------------|---|--|
| Name: | | Department (click to select) |
| Phone: | Email: | |
| Proposed Start Date: | Is project currently sponsored/funded? | Is this application for new or renewed funding? |

Check if PI is a student. Note: all student projects require faculty advisors. Provide student information below.

Additional Researchers

Please list any other researchers involved in this project, their status with the university, and their e-mail address in the format in the example. All student researcher information should be included in this box.

Funding Source
(select all that apply)**Funding Information****Funding Agency (if applicable):****Proposal or Award # (if applicable):****Requested Review Level (select one)**

•See website and other documentation for more information on category choice. IRB chair or administrator will verify.

Exempt/Limited

Expedited

Full Board

Unsure/request for determination

Select if continuing review

Below, please provide a brief explanation for the requested review level, including pertinent considerations to population (vulnerable vs. others), task demand, type of data collected, etc.

Request For Review

Project Description: The IRB Committee is comprised of individuals from a number of disciplines. Please write your responses to the questions below in a manner that clearly conveys the necessary information to an educated audience of peers outside your field of expertise.

All consent forms, surveys, questionnaires or interview questions to be used must be attached to the protocol.
(For funded projects, please attach a copy of the grant proposal in addition to this protocol.)

- 1) Concise abstract stating the purpose and significance of the project.

2) Recruitment and Sample:

- a. How many *total* participants are you looking to recruit?(describe the number per group, if applicable, below)
- b. Describe the subject population including recruitment methods, age, type and number of participants per group you are looking to recruit.
- c. Please provide a rationale for this sample size.
For example (if available) power analyses, basis in previous research, heuristics/norms for your field of study, characteristics/size of the population of interest, etc.
- d. Will you be purposefully recruiting members of a vulnerable population?Select all that apply.

3) Describe the research protocol: what will participants complete from beginning to end?

4) Describe any surveys, questionnaires, testing materials, or interview schedules to be used. Attach copies and provide citations/sources for those materials (if available or note if developed in-house).

5) Risk.

A) When considering the potential for harm to participant and researcher (economic, occupational, privacy (including disclosure of potentially sensitive material), legal, physical, psychological/emotional, and social) associated with your project, what level of risk do you foresee this project involving? See the IRB website and other documentation for more elaborate definitions.

B) Below, describe any risks and/or of benefits to participants, as well as what steps you are taking to minimize risks to participants. Be sure to describe: (a) short and long term benefits to the participant and/or society as a result of their participation, and (b) why the benefits outweigh the risks. Note: financial or course credit reimbursement is **not** considered a "benefit" (describe that in (5C) below).

C) How will participants be reimbursed for their time and effort? Reimbursements can include course credit, entries into lotteries for prizes, money, etc. Provide a brief justification of reimbursement, keeping in mind that too much can be coercive, and too little could be problematic depending on what you are asking participants to do.

D) Will deception **OR** incomplete disclosure be used in this study?

Deception is defined as deliberately providing false or misleading information about the study to the participant. Examples include: telling a participant they are being watched by an audience when they are not; participants are not aware they are in a research study in public when researchers place valuables in a busy area to monitor reactions.

Incomplete disclosure is deliberately withholding information about the true goals or methods of the research. Examples include: participants complete a test of cognitive ability but are not informed that the room temperature is a variable of interest; participants have electrodes attached to what they are told is a polygraph but the polygraph data were never going to be analyzed (i.e., a bogus pipeline).

6) Record keeping: describe how records will be kept, for how long, and who will have access to them.

7) Describe efforts to maintain confidentiality, circumstances in which confidentiality may not be maintained, and/or if there are situations in which researchers will deliberately breach confidentiality. Note that this is also a key element of a consent form.

6) Attestation

By signing below, you agree that you have reviewed and approved this application and accept responsibility for the research described, including work by students under your direction. It further attests that you are fully aware of all procedures to be followed, will monitor the research, and will notify the IRB of any significant problems or changes. Please type in your name as an electronic signature. For an electronic signature to be accepted, the protocol must be emailed from the Faculty sponsor's account.

PI Signature

Date

When submitting this protocol, please include (as separate documents) any other necessary information: consent forms (see elsewhere for the required components of a consent form), any surveys or tests with proper attribution, interview sequences, or any other pertinent information. If you are pursuing a waiver of consent, waiver of confidentiality, or use of deception, please include justification for those measures if not discussed above.

Submit completed forms to: irb@oldwestbury.edu

IRB Use Only

| Revision # | Version Date | Summary of Changes | Consent Change? |
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NOTE: Leave this section blank for the initial submission. The revision history should be documented for modifications to approved non-exempt studies.

| Type of Review | | |
|---------------------------------------|-----------|-------------------------------------|
| Exempt | Expedited | Full Board |
| Category Number | | |
| Receipt Date | | |
| Resubmit Date (if applicable) | | |
| Decision date | | Approved Through (if applicable) |
| Comments | | |
| Signature of IRB Chair or Designee | | Date |

After approval, this page also serves as a certificate of exemption or expedited review. Please inform the IRB if you need a separate certificate.