



# Institutional Review Board

LOG NUMBER \_\_\_\_\_  
REVIEW DATE \_\_\_\_\_  
LEVEL \_\_\_\_\_

## APPLICATION FOR USE OF HUMAN SUBJECTS IN RESEARCH

**Instructions:**

- Prepare your research project according to the following outline. **(Hand written forms will not be accepted.)**
- Submit the signed form to the Office of Academic Affairs. All forms must be completed in full with appropriate signatures to be reviewed by the committee.

**Principal Investigator** \_\_\_\_\_ Phone Number \_\_\_\_\_  
 Department \_\_\_\_\_ Campus \_\_\_\_\_ Email \_\_\_\_\_  
 Correspondence Address \_\_\_\_\_

**Faculty Sponsor (If Applicable)** \_\_\_\_\_ Phone Number \_\_\_\_\_  
 Department \_\_\_\_\_ Campus \_\_\_\_\_ Email \_\_\_\_\_

**Project Title:** \_\_\_\_\_

**Type of Project:** Faculty Research   
 Student Directed Research  
 Thesis  Dissertation  Other (\_\_\_\_\_)  
 Course Requirement:  16 week  8/9 week (course #: \_\_\_\_\_)

**Duration of Project:** Starting Date \_\_\_\_\_, **but not before written approval is obtained.**  
 Expected End Date \_\_\_\_\_

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I certify that to the best of my knowledge the information presented herein is an accurate reflection of the proposed research project. I accept the responsibility for the conduct of this research, the supervision of human subjects and maintenance of informed consent documentation as required by IRB. I certify that the research procedures for this project and the method of obtaining consent (if any), as approved by the IRB, will be followed during the period covered by this research. Any future changes will be submitted for Board review and approval prior to implementation. An End-of-Project Form must be submitted upon completion.

\_\_\_\_\_  
 Principal Investigator Date Faculty Sponsor (If PI is a student) Date  
 \_\_\_\_\_  
 Chair of Department Date  
 (If PI is a Faculty Member & Project is Level II)

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**REVIEWER(S)**  
 \_\_\_\_\_  
 Primary Reviewer (Level I) Date

**ACTION TAKEN:**  
 Approved through \_\_\_\_\_  
 Contingent  
 Disapproved

\_\_\_\_\_  
 Co-Reviewer (Level II) Date

**COMMENTS OR CONTINGENCIES:**  
 See Attached

**GENERAL INSTRUCTIONS**

1. This form (1040EZ-S) is to be completed if you are conducting research utilizing surveys or questionnaires. Webster records containing confidential information require Academic Affairs approval for release, prior submitting application. Level III projects containing possible risk(s) to human subjects that are considered “special populations” (including children under age 8, mentally handicapped, or legally incompetent) must be submitted on the 1040 form.
2. All researchers, instructors and students are expected to examine the information available on the IRB web site <http://www.webster.edu/irb> before beginning this form and prior to administering any surveys or questionnaires.

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**PART I:** Design Issues. Please answer the following by checking the correct answer.

1. Are subjects free to withdraw at any time without penalty? Yes  No
2. Is there deception of subjects? Yes  No

**You cannot use this form if you answered NO to question 1 and YES to question 2. Use form 1040 instead.**

3. Does the consent form correspond to the requirements stated on the web page? Please review the web site before answering this question (<http://www.webster.edu/irb>). Yes  No

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**PART II:** Attach a summary of your project. This addendum should include the following components:

- Introduction – Discuss the goals and purpose of the present study. Include citations to relevant studies if you feel this would help the Board make their decision.
- Methods – Describe the procedures you will be using to conduct the study. This should be **very** detailed. The Board should be able to “conduct” your research using this description.
- Stimulus materials – Provide all scripts, consent forms, and questionnaires cited in the Methods section.

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**PART III:** Please answer **all** of the following items providing additional information where appropriate. Use NA when questions are not applicable.

**A. Participants**

1. Describe your subject selection procedures
2. Describe the characteristics of your population(s). Include the size of your sample, the ethnic background, sex, age, and their state of health. If your population is all one gender or ethnic group, please explain.
3. Who makes the initial contact with the participants? (If you want to use patients/clients of another professional, the other professional must make the initial contact, to protect patient/client confidentiality)

**B. Confidentiality** (helpful tips to protect confidentiality are available at the IRB web site - <http://www.webster.edu/irb/>)

1. Will subjects be identifiable to anyone other than the researchers through records, responses or identifiers linked Yes  No

to the subjects?

2. **How** do you intend to record information so participants can not be identified directly or through identifiers? Address how you will protect their rights, welfare and privacy. (Identification of subjects requires Level II approval.)

**C. Risks**

1. Does research deal with sensitive aspects of subjects' behavior, such as illegal conduct, drug use, sexual behavior, or use of alcohol? Yes  No 
  - If yes, explain
  
2. Could subjects be at risk of criminal or civil liability, damage to employability, financial standing or undue embarrassment, if responses became known outside this research project? Yes  No 
  - If yes, explain
  
3. What safeguards will you use to protect the subjects from risks?
  
4. Identify any monetary expenses that participants will incur as a result of participation in your project. Any monetary expenses should also be presented on the front page of the questionnaire or in a separate cover letter.

**D. Benefits**

1. Describe the benefits you expect to gain from this project. (This should include any direct benefits to the participants as well as any general gain in knowledge.)
  
2. Describe any form of compensation to participants. (e.g., money, grade, extra credit) If money, extra credit, or grade is given to individuals who participate in the project, what opportunity for extra credit or grade is provided to those who choose not to participate? The nature of the compensation should be stated on the front page of the questionnaire or in a separate cover letter.

**E. Vulnerable Populations (Level I or Level II Research Projects)**

1. If you will be using children under age 18, explain in detail how you will obtain parental consent and assent (for children ages 8-11) or consent (for children 12 to 17). Projects involving children under the age of 8 are automatically Level III. If assent/consent will be obtained orally, supply a script of what you will say and how you will give the children the opportunity to say "yes" or "no."

2. If you will be using adults whose ability to give voluntary informed consent may be in question (e.g. institutionalized, mentally disabled, or legally incompetent), explain in detail how you will obtain guardian consent and assent/consent from the subject. If assent/consent will be obtained orally, supply a script of what you will say and how you will give the individual the opportunity to say "yes" or "no".

**F. Other**

1. In which Webster University faculty or departmental office will the signed consent forms be kept? (Consent forms must be kept on campus, not in a private home or office.) If the study does not involve consent forms, answer "NA" (see directions for anonymous questionnaires on the web page). Consent forms should be separated from the data to protect anonymity.

2. What do you intend to do with the data collected? (e.g., publish data, present paper)

3. Will any standardized test results (e.g., IQ tests, personality tests, medical tests) be disseminated to the subjects (and/or their parents or guardians)? Yes  No
- If yes, explain the qualifications of the person(s) interpreting the results.

4. Does the proposed study take place at an off-campus site? Yes  No

If Yes, please indicate the Site(s): \_\_\_\_\_

Guidelines for determining whether off-site approval is needed can be found at <http://www.webster.edu/irb/offsite.html>

- *If this project involves approval/permission from other institutions*, please attach documentation stating you have permission to conduct research at that specific site. This includes IRB approval from that site (if applicable). If documentation is not yet available, it must be submitted to the committee prior to the beginning of data collection. In addition, the principal investigator (and the faculty sponsor if the PI is a student) must sign below to certify the following statement: "I/we will not begin research at other institutions before having obtained their permission to do so."

\_\_\_\_\_  
Principal Investigator

\_\_\_\_\_  
Date

\_\_\_\_\_  
Faculty Sponsor (If PI is a student)

\_\_\_\_\_  
Date