# Institutional Review Board Research Application Form

IRB review is only for human-subjects research conducted by Lee College faculty, staff and students (on or off-campus) or by external applicants who have received permission from the college president to submit an IRB application, such permission being granted if the research provides significant benefits to the college and/or community.

**Email this completed form along with any attachments to** [IRB@lee.edu](mailto:IRB@lee.edu).

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| Check One: | New Application | | Continuing | Modification |
|  | | |  | |
| Project Title | | |  | |
| Principal Investigator (may not be an undergraduate student) | | |  | |
| Principal Investigator Email | | |  | |
| Principal Investigator Phone | | |  | |
| Institution affiliated with the Principal Investigator and this research | | |  | |
| Faculty Sponsor (if affiliated institution is not Lee College) | | |  | |
| Proposed Start Date | | |  | |
| Duration of Study (months) | | |  | |
| Research Location(s) | | |  | |
| List all investigators and affiliated people (add rows as needed). | | | | |
|  | | Name | Email | Organization |
| Co-Investigator | |  |  |  |
| Student Investigator | |  |  |  |
| Other Affiliated Person | |  |  |  |
|  | |  |  |  |
| Describe the overall objectives and specific aims of the research. | | | | |
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| Who are the subjects and how will they be recruited? | | | | |
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| Describe the procedures to be used for data collection and whether data collection will be confidential, private or anonymous. Describe who will have access to the records and what will happen to the data after completion of the study. | | | | |
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| What risks are faced by subjects participating in this research, e.g., injury, pain, emotional distress, or invasion of privacy? What measures will be taken to minimize these risks? | | | | |
|  | | | | |
| Will there be any costs to be borne by subjects by virtue of their participation in this research? | | | | |
|  | | | | |
| Will there be any compensation or reimbursement to subjects in this research, e.g., monetary payments, course credit, services etc.? | | | | |
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| What are the likely benefits of this research to the subjects as well as to public knowledge? | | | | |
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| How will information be disseminated at the close of the study, e.g., dissertation, presentation, publication, etc.? If information is for classroom or institutional use, please describe. | | | | |
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| Required Attachments:   * Consent Forms * Surveys or Questionnaires * Any disclosures explaining risks or procedures * Letters of approval if access to subjects is sought from clinics or other agencies * Approvals or documentation from external IRBs (if there are any) * Human Subject Protection Training certificate (must be current)   Principal Investigators are **required** to submit a Human Subject Protection Training certificate with their application. NIH offers a 1-2 hour online training course. Applications without an attached, valid training certificate will not be reviewed until the training is complete.  [NIH Protecting Human Research Participants Training](http://phrp.nihtraining.com/users/login.php)  Consent forms must include the following statement, which is usually at the end of the form: *Any grievance against this protocol or investigator may be filed with the Lee College System IRB Office at* [*IRB@lee.edu*](mailto:IRB@lee.edu) *or using the* [*Complaints, Grievances and Concerns*](https://cm.maxient.com/reporting.php?LeeCollege) *link at the bottom of the Lee College Website.* | | | | |
| **Do not write below this Section**  **This section for IRB representative use only** | | | | |
| IRB Process | Exempt  Expedited Review  Full Review | | IRB Decision | Approved  Not Approved  Conditional Approval (see comments) |
| IRB Reviewer Comments | | | | |
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|  |  | |  |  |
| IRB Reviewer Name | Signature | |  | Date |
| By filling in my name and the date I assert that I have reviewed the above document and made an official recommendation on behalf of the Lee College Institutional Review Board. | | | | |