

*Please complete and return form to the  
Office of the Registrar & Institutional  
Research (Bauer-North, 1<sup>st</sup> Floor)*



*IRB Protocol Number  
(IRB Administrative Use Only)*

## Institutional Review Board (IRB) Application for Review

*Please see [www.cmc.edu/IRB](http://www.cmc.edu/IRB) for a complete list of materials required for submission*

Principal Investigator \_\_\_\_\_ CMC ID # \_\_\_\_\_ Faculty \_\_\_ Staff \_\_\_ Student  
 Department (& Institution if non-CMC) \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_  
 Campus Address \_\_\_\_\_ Beginning and completion dates of research \_\_\_\_\_ to \_\_\_\_\_  
 Title of Project \_\_\_\_\_

Please indicate whether or not the following are involved:

|   |                |   |                |
|---|----------------|---|----------------|
| Patients as participants                  | Yes ___ No ___ | Film-, video-, or voice-recording of participants | Yes ___ No ___ |
| Minors as participants (under 18)         | Yes ___ No ___ | Questionnaires                                    | Yes ___ No ___ |
| Elderly participants (over 65)            | Yes ___ No ___ | Data banks, archives, or medical records          | Yes ___ No ___ |
| Non-English-speaking participants         | Yes ___ No ___ | Payment for participants                          | Yes ___ No ___ |
| Cognitively impaired participants         | Yes ___ No ___ | Interviews  | Yes ___ No ___ |
| Prisoners or parolees                     | Yes ___ No ___ | The use of alcohol, drugs, or medication          | Yes ___ No ___ |
| Participants in other countries           | Yes ___ No ___ | The taking of physical specimens                  | Yes ___ No ___ |
| Greater than minimal risk to participants | Yes ___ No ___ | The use of deception                              | Yes ___ No ___ |

The IRB requires that the principal investigator and faculty sponsor have read the Belmont Report (<http://ohsr.od.nih.gov/guidelines/belmont.html>) and taken the NIH training course (<http://phrp.nihtraining.com/users/login.php>).  
*Please indicate your compliance:* I have read the Belmont Report and attached a copy of the certificate for completion of the online NIH training for the principal investigator and each of my team members.....yes  no

The principal investigator assures the IRB that all procedures carried out under the project will be conducted by persons legally and responsibly entitled to do so, and that any deviation from the submitted project (change in principal investigator, participant recruitment procedures, research methodology, etc.) will be submitted to the IRB for approval prior to implementation.

**Principal Investigator (signature)** \_\_\_\_\_ **Date** \_\_\_\_\_

I have verified that this research proposal is methodologically sound, that it minimizes risk to participants, and that the consent form is adequate.

**Faculty/Director Sponsor (printed name)** \_\_\_\_\_ **Department** \_\_\_\_\_

**Faculty/Director Sponsor (signature)** \_\_\_\_\_ **Date** \_\_\_\_\_

**IRB Review Board Action:**

\_\_\_ Certified by chair as exempt from review  
 \_\_\_ Approved by chair under expedited review  
 \_\_\_ Approved by full committee  
 \_\_\_ Returned by full committee for additional details, clarifications, or adjustments

**IRB Representative (signature)** \_\_\_\_\_ **Date** \_\_\_\_\_