**Albion College Institutional Review Board**

**Cover Sheet: Self-Report of Review**

**Status Form C – 2: Expedited Review**

**STUDENTS, FACULTY AND COMMUNITY MEMBERS ARE ELIGIBLE TO SUBMIT THIS TYPE OF PROPOSAL.**

**Proposal type (please check one):**

 NEW [ ] Suggested Revisions [ ] Renewal [ ] Addendum [ ]

 (Pending approval) (Up to 12 months) (Changes to previously approved proposals)

Principal Investigator (PI):

(Principal Investigator name – **PLEASE PRINT**)

E-Mail address: Phone number:

\_\_\_\_\_In my judgment, the above named research project qualifies as an EXPEDITED IRB review. **C-2 form see below**

**Is this study receiving any external funding?** No \_\_\_\_

IF YES \_\_\_\_ **please provide the name of the funding agency and, the proposal title (if different from above)**

**For STUDENTS:** Is this proposal connected to a FURSCA project? No \_\_\_\_

IF YES \_\_\_\_ **please note the FURSCA committee requires IRB approval prior to the project start date.**

**For FACULTY:** Are you asking for FDC funding for this project? No \_\_\_\_

IF YES \_\_\_\_ **please note you must obtain IRB approval before funds can be relinquished from the college.**

\*\*\* Note to faculty: the committee encourages you to obtain a peer-review of your proposal.

--- --- --- --- --- --- --- --- --- --- --- --- --- --- --- --- --- --- --- --- --- --- --- --- --- --- --- --- --- --- --- --- --- --- --- --- --- ---

**PLEASE PROVIDE A BRIEF ABSTRACT/ SUMMARY OF YOUR PROPOSAL**

Project Title:

**EXACT** dates for Data Collection: Start: \_\_\_\_\_\_\_\_\_\_\_\_ End: \_\_\_\_\_\_\_\_\_\_\_\_

Summarize your proposal, to include what, when, how, and where:

**Albion College Institutional Review Board**

**Signature Page**

Signature Page for:

(Principal Investigator name – **PLEASE PRINT**)

Project Title:

I certify that the statements herein are accurate and complete. I agree to protect the rights and welfare of the human participants taking part in my research, to abide by College guidelines for securing informed consent, to safeguard the confidentiality of my research data, and to inform the chair of the IRB should any changes in the research protocol or human participant issues arise during the course of this research.

**Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_**  (Principal Investigator)

Principal Investigator **Email:**  **Phone:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Principal Investigator **Status**: Faculty/Staff Student Community Member

--- --- --- --- --- --- --- --- --- --- --- --- --- --- --- --- --- --- --- --- --- --- --- --- --- --- --- --- --- --- --- --- --- --- --- --- --- -- **Sponsor (Students must have a Faculty/Staff Sponsorship)**

Sponsor Name:

(Sponsor name – **PLEASE PRINT**)

I have reviewed this proposal and my signature indicates that the proposed project meets previously established standards for and I will oversee this research in its entirety. Failure to give proper oversight may cause a delay in the approval process.

**Signature:**  **Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

(Sponsor)

**Sponsor** **Email:**  **Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

COMMITTEE USE ONLY BELOW THIS LINE

Approval Signature of IRB Chair:

Date approved: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Approval of IRB Member:

Via email on: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Approval of IRB Member:

Via email on: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**IRB Form C-2: Expedited Review**

**Checklist for Research Qualifying for Expedited Review**

**Directions: Submit this form and the research proposal to IRB committee at** **IRB@albion.edu** **if you believe your project qualifies for expedited IRB review. Please answer the question in Part I, check all applicable items in Parts II and III. Research activities will only be considered for expedited review when all items in Part II and at least one item in Part III apply.**

**Part I:** Does the research involve minors, prisoners, fetuses, pregnant women, or mentally or cognitively disabled individuals as participants? \_\_\_\_\_\_\_ Yes \_\_\_\_\_\_\_ No

**Part II:** (Check all items that apply to your research project.)

|  |  |
| --- | --- |
|  | The research does not involve the collection or recording of behavior which, if known outside the research, could reasonably place the participants at risk of criminal or civil liability or be damaging to the participants' financial standing, employability, or reputation.  |
|  | The research does not involve the collection of information regarding sensitive aspects of the participants’ behavior (e.g., drug or alcohol use, illegal conduct, sexual behavior).  |
|  | The procedures of this research present no more than minimal risk to the participant (where minimal risk means that the probability and magnitude of harm or discomfort anticipated in the proposed research are not greater than those ordinarily encountered in daily life or during the performance of routine physical or psychological examinations or tests).  |

**Part III:** (At least one item should apply.)

|  |  |
| --- | --- |
|  | Research involving existing identifiable data, documents, records, or biological specimens (including pathological or diagnostic specimens), where these materials, in their entirety, have been collected or will be collected solely for non-research purposes. [NB: These sources are not publicly available and, although confidentiality will be strictly maintained, information will not be recorded anonymously (e.g., use will be made of audio- or videotapes, names will be recorded, even if they are not directly associated with the data).]  |
|  | Collection of data through use of the following proceduresa) non-invasive procedures routinely employed in clinical practice excluding procedures involving x-rays or microwaves; b) physical sensors that are applied either to the surface of the body or at a distance and do not involve input of significant amounts of energy into the participant or an invasion of the participant's privacy; c) weighing, testing sensory acuity, electrocardiography, electroencephalography, thermography, detection of naturally occurring radioactivity, electroretinography, echography, sonography, ultrasound, magnetic resonance imaging (MRI), diagnostic infrared imaging, doppler blood flow, and echocardiography; d) moderate exercise, muscular strength testing, body composition assessment, and flexibility testing where appropriate given the age, weight, and health of the individual.  |
|  | Collection of data from voice, video, digital or image recordings made for research purposes where identification of the participants and/or their responses would not reasonably place them at risk of criminal or civil liability, be stigmatizing, or be damaging to the participants' financial standing, employability, insurability, or reputation. |
|  |  |
|  | Research on individual or group characteristics or behavior (including but not limited to research involving perception, cognition, motivation, identity, language, communication, cultural beliefs or practices, and social behavior, or research employing surveys, interviews, oral history, focus groups, program evaluation, human factors evaluation, or quality assurance methodologies).  |
|  | Research involving the use of educational tests (cognitive, diagnostic, aptitude, achievement), survey procedures, interview procedures, or observation of public behavior. [Although confidentiality will be strictly maintained, information will not be recorded anonymously, e.g., use will be made of audio- or videotapes, names will be recorded, even if they are not directly associated with the data.] |
|  | Research that involves deception [NB: Deception must be scientifically justified and de-briefing procedures must be outlined in detail].  |
|  | Prospective collection for research purposes of biological specimens, research on drugs or devices for which an investigational new drug exemption or an investigational device exemption is not required, and collection of blood samples by finger stick or venipuncture.  |
|  | Research previously approved by the convened IRB as follows: (a) where (i) the research is permanently closed to the enrollment of new participants; (ii) all participants have completed all research-related interventions; and (iii) the research remains active only for long-term follow-up of participants; or (b) where the research remains active only for the purposes of data analysis; or (c) where the IRB has determined at a convened meeting that the research involves no greater than minimal risk and no additional risks have been identified; (d) where no participants have been enrolled and no additional risks have been identified. |

**All proposals must provide the following information:**

***Failure to meet these requirements will result in your application being delayed.***

**FINAL CHECKLIST**

Is there an EXACT beginning and ending date for the proposed data collection? Yes \_\_\_\_

Have you included a good description of your proposal, including citations of other related research? Yes \_\_\_\_

Is the participant sample described? Yes \_\_\_\_

Is the number of participants stated clearly? Yes \_\_\_\_

How and where will collected data be stored? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ for how long? \_\_\_\_ (Seven years is typical)

Is deception being used? Yes \_\_\_\_

Is a copy of the debriefing sheet included (required if deception is used)? Yes \_\_\_\_\_

Does the debriefing statement adequately address sensitive information and remind subjects of contact information? Yes\_\_\_\_\_

Is a copy of the research survey included with this proposal? Yes \_\_\_\_\_

Is a copy of the informed consent form included with this proposal? Yes \_\_\_\_

Will the participants experience any discomfort that is greater than in everyday life? Yes\_\_\_\_ No\_\_\_\_\_

Please explain, if yes\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What safeguards are in place? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**INFORMED CONSENT CHECKLIST**

Does the informed consent have a statement in the beginning that the study involves research? Yes \_\_\_\_

Is the consent form written at an appropriate reading level for the participants? Yes \_\_\_\_

Is there an explanation of the purpose of the research? Yes \_\_\_\_

Is the expected duration of participation stated? Yes \_\_\_\_

Is it stated that participation is voluntary, and refusal to participate or discontinue involves no penalty? Yes \_\_\_\_

Is a description of the procedures to be followed included? Yes \_\_\_\_

Are any foreseeable risks or discomforts to subjects described? Yes \_\_\_\_ No\_\_\_\_\_\_

Are any benefits to the subjects or others described? Yes \_\_\_\_ No\_\_\_\_\_\_

If compensation is to be given, is it described? Yes \_\_\_\_ No\_\_\_\_\_\_

Is there a statement describing the extent, if any, to which confidentiality of records identifying the participant will be maintained? Yes \_\_\_\_

Did you include contact information for answers to questions about research and participant rights? Yes \_\_\_\_

Does it include a signature line, and a line for the printed written name of the participants, and the date? Yes\_\_\_\_

In addition to PI’s contact information, you must include the following statement:

“If you have any question about your rights as a participant in this research project you can contact the chair of Albion College’s Institutional Review Board at: IRB@albion.edu.”

**PROTOCOL FOR RE-SUBMITTING, if the committee has questions:**

If the IRB committee has questions about your proposal, you will need to answer the questions via email. Once reviewed and agreement that no further changes are needed, conditional approval will be given. Then you need to re-submit the entire proposal with the new information. Once Schara has a clean copy of your re-submitted proposal, the email approval from the chair will be sent and the data collection can begin. This process can take several weeks, so plan ahead.

Revised February 2017