Full Review Application



Institutional Review Board

If another IRB is involved in your project, you may attach copies of the IRB application and of the IRB approval letter from the participating institution in lieu of completing this form.

Title of Research Project				
Contact Information	Principal Investigator/ Project Director	Co-Investigator/ Student Investigator	Co-Investigator/ Student Investigator	
Name				
Departmen	t			
Phone Ext.				
Email				
Anticipated I	Funding Source (if applicab	le):		
Projected Du	ration of Research:	months Projected Sta	arting Date:	
Other organi	zations and/or agencies, if a	any, involved in the study:		
Dlease retur	n this form with:			
ricase retui	ii tiiis ioiiii witii.			
	emo that briefly answers the questions outlined on the next page. It application, if applicable.			
		or recruitment materials to be	given to subjects.	
	mpleted copy of the Conse	nt Form Checklist at will be provided to the partic	cinante	
	. •	at will be provided to the partic	ырантэ.	
-	Information: ect Activity Status:			
,	New Project			
	Periodic Review of Conf	inuing Project		
	Revision to Previously A	approved Project		
B. This	project involves Henry Ford	d College students		
	Yes N	0		
C. Hum	an Subjects from the follow	ving populations will be involve	ed in this study	
	Minors	High School Students		
	Mentally Disabled	Prisoners		
	Elderly	None of the above		
D. Total	I number of subjects to be s	studied:		

Full Review Application



Institutional Review Board

Attach a document containing brief answers to the following questions.

II. Protocol:

What is the rationale or purpose of the study?

Why are you interested in using HFC as a basis in your research?

Who will be the research subjects?

Where will the research take place?

How much time will be required of each subject?

How will you recruit participants?

What methods will you use to gather your data?

Does the study require class time? (Note: using class time is discouraged)

Do you have an internal contact who is already willing to comply?

Attach copies of any recruitment materials and research instruments (exams, surveys, questionnaires, etc.).

III. Precautions:

How will you ensure that each subject's participation is voluntary? If you plan to offer inducement in return for participation, what would that be?

IV. Confidentiality of data:

What methods will you use to ensure the privacy of the participants and confidentiality of data obtained, including plans for publication, disposition or destruction of data, etc.? What are your plans for distribution, dissemination, or publication of the data?

V. Consent

What are the potential risks to the participants?

What steps have you taken to minimize risk to the participants?

Attach copies of all consent forms to be signed by the subjects and/or any statements to be read to the subject.

Responsibilities of the Principal Investigator:

- Any additions or changes in procedures in the project will be submitted to the IRB for written approval prior to these changes being implemented
- Any problems connected with the use of human subjects once the project has begun must be communicated to the IRB Chair
- The principal investigator is responsible for retaining informed consent documents for a period of three years after the project.
- The principal investigator should include with the IRB submission a confirmation that the research has been approved by the HFC chairperson(s) and Dean(s) of the academic area(s) where the research will be conducted.

Full Review Application



Institutional Review Board

- The principal investigator shall notify the HFC IRB chairperson when the research proposal has been approved or modified by another institution's IRB.
- The principal investigator will provide a copy of the final research results to the chairperson of HFC's IRB.

Principal Investigator Signature:		_ Date:
Co-Investigator/Student Signature (if applica	ble):	_ Date:
Dean/Director Signature		Date
Vice President Signature (if applicable)		Date
Signature of IRB Committee Chair: Date	e:	
IRB Chair: Check one	Approved Approved with conditions Requires Periodic Review	