Exempt Review Application



Institutional Review Board

Date Submitt	ed		
Title of Resea	arch Project		
Contact Information	Principal Investigator/ Project Director	Co-Investigator/Student Investigator	Co-Investigator/Student Investigator
Name			
Department			
Phone Ext.			
Email			
•	nding Source (if applicable)	: months Projected Starting D	
ther organiza	ntions and/or agencies, if an	y, involved in the study:	
XEMPT UNDE	ER CODE (see Exempt Review C	Checklist – check one):	
1			
2			
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4			
5			
6			

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Summary Abstract: Please attach a document that supplies the following information:

BRIEF description of the rationale or purpose of the study, the participants, the location(s) of the project, the procedures to be used for data collection, whether data will be confidential or anonymous, how the data will be used and shared, and data disposition procedures.

Does the study require class time? (Note: using class time is discouraged.) If so, do you have an internal contact person who is willing to comply? <u>Attach a confirmation</u> of this agreement.

Attach a copy of the Informed Consent Form and the measures (questionnaires/surveys) to be used in the project.

If another IRB is involved in your project, <u>attach copies of the IRB submission and approval</u> documents.

Responsibilities of the Principal Investigator:

- Any additions or changes in procedures in the protocol will be submitted to the IRB for written approval before these changes are 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 Dean or Director of the academic or functional area(s) where the research will be conducted.
- 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.

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Principal Investigator Signa	ture:		Date:		
Co-Investigator/Student Signature (if applicable): Date					
Dean/Director Signature (if applicable): Date					
Vice President Signature (if	applicable):		Date		
Signature of IRB Committee Chair: Date:					
		Approved			
	IRB Chair: Check one	Approved with conditions			
		Refer to Expedited			

Refer to Full Committee