**NOTE: No research involving human subjects is to be conducted without the prior written approval of the IRB.**

**APPLICATION**

**TO**

**JACKSON STATE UNIVERSITY INSTITUTIONAL REVIEW BOARD FOR**

**THE PROTECTION OF HUMAN SUBJECTS IN RESEARCH**

*Each question should be thoroughly completed. Attachments should be used when appropriate and not in place of completing the application. Please read the instructions and questions prior to completing the application.*

**⁪ Faculty ⁪ Staff**

 **FOR OFFICE USE ONLY**

 Date rec’d.\_\_\_\_\_\_\_\_\_\_

 Type of Review:

  Exempt  Expedited  Full

 IRB Action:

  Approved  Disapproved  Modification Required

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_

 IRB Chair Date

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_

 Date

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_

**⁪ Student Anticipated Graduation \_\_\_\_\_\_\_\_\_\_\_\_**

**1. Name:**

**Address:**

**City/State/Zip:**

 **Phone:(daytime)**

**Phone:(evening)**

**Fax:**

**JSU E-mail Address:**

**Alternate E-mail Address:**

 **YOU MUST SUPPLY BOTH!**

**Department:**

**2. Title of Project:**

**3. Research Project Period: from \_\_\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_\_ (Do not predate your research. It must be a date after you would receive IRB approval.)**

**4. Funding Source:**

**5. Site(s) of Research:**

1. **Please provide:**
2. **A brief description of research project (*should be equal to the size of a journal abstract*):**
3. **A brief description of the research design: Qualitative/descriptive (nominal or ordinal data)? Quantitative (interval or ratio data)? True experiment, quasi-experimental, etc.?**
4. **Have you conducted a statistical power analysis?**
5. **Have you determined the sample size needed?**
6. **What were the results?**
7. **If you need assistance, go to http://www.psycho.uni-duesseldorf.de/aap/projects/gpower/ or consult your advisor and a statistical text book.**
8. **If you have not conducted a power analysis or determined the sample size needed for statistical significance (inadequate numbers), then you must state your study is a “Pilot Study” in the Title of your project.**
9. **A brief description of your proposed data analysis: (T-test, chi-square, correlation, ANOVA, MANOVA, Regression, Discriminant Analysis, etc.)**

**7. Describe in detail the research procedure related to subjects’ participation; minimally, the following information must be included:**

1. **How will the subject(s) be selected and/or recruited? (Append copy of letter and/or transcript of verbal announcement).**
2. **Do you supervise, teach, or have direct contact with the participants you plan to recruit? Research conducted with persons whom you have an established relationship could be coercive in nature and represent a conflict of interest.**
3. **What inducement is offered, if any?**

 **d) Number and salient characteristics of subjects, i.e., age range, sex, institutional affiliation,**

 **other** **pertinent characterization(s).**

**e) If a cooperating institution (school, hospital, prison, etc.) is involved, prior written permission must be obtained. (Append approval letter.)**

**f) Number of times observations will be made or instruments administered?**

 **g) What do the subject’s do, or what is done to them, in the study (method of recruitment and how you will collect the consent and the data)?**

 **(1. You must append a copy of questionnaires or test instruments.  Self-designed; Purchased-name of publisher\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_; Published in a journal-provide citation and permission from the author to use the survey.**

 **2. Description of procedure using the participant in your study.)**

**h) How is it made clear to the subject that their participation is fully voluntary? (Use the language of the consent/assent form.) The Consent form states, “Taking part in this study is completely voluntary.”**

1. **How is it made clear to the subject that they may withdraw at any time? (Use the language of the consent/assent form.) The consent form states, “Participants may withdraw at any time without penalty or prejudice.”**
2. **How is it made clear to the subjects that they may refuse to answer any specific question that may be asked of them? (Use the language of the consent/assent form.) The consent form states, “You may refuse to answer any specific question.”**
3. **Cite your experience with this type of research. Student applications must include their own experience, as well as, the advisor’s research experience.**

 **Student experience:**

 **Faculty experience:**

**8. How do you intend to obtain the subjects’ informed consent? If in writing, attach a copy of the consent form. If not in writing, include a summary of what is said (Oral script) to the participant(s) and justify, if necessary, the reasons that an oral rather than a written consent is being used. Also explain how you will ascertain that the subjects understand what they are agreeing to. REMEMBER TO PROVIDE YOUR PARTICIPANTS WITH A COPY OF THE CONSENT FOR INFORMATION ABOUT THE STUDY.**

1. **Justify:**
2. **Why do you need to use human subjects in this research? Has your topic been research previously? (Consider if your research could be completed with secondary data.)**

 **b. How will your research add to the body of scientific literature?**

**10. a. What are the benefits gained by the individual for participation in your project? (Remember, most research is conducted for the benefit of the researcher and the participants receive no benefits unless they are involved in treatment or clinical trial research.)**

1. **Do you see any chance that subjects might be harmed in any way?**
2. **Are there any physical risks?**
3. **Psychological risks? (Might a subject feel demeaned or embarrassed or worried or upset? All research has some psychological risk.)**

1. **Social? (Possible loss of status, privacy, reputation?)**

**11. Do you deceive them in any way? If yes, explain why deception is justified and provide information about how the participants will be debriefed about your project.**

**12. How do you ensure confidentiality of the information collected? (By Federal Law, you must state where and who will be responsible for maintaining your data for a period of 3 years.)**

 Raw data will be kept in a secure location until the information has been saved as data file for analysis. Information will stored in the most secure manner as possible for 3 years as required by federal law. Although the information in this study is private, security of the data can only be promised within the boundaries of the university and researcher or faculty advisor.

 **Your name:**

 **Your advisor’s name and the location of his/her office:**

**13. STUDENT APPLICATIONS ONLY: Has your committee reviewed and approved your proposal prior to submitting your IRB application? Yes No**

**14. STUDENT APPLICATIONS ONLY: If no, have you reviewed the approval process with your department? Yes No. If you answered no, please see your advisor or chair of your committee for their approval process.**

1. **Due to recent changes in the Federal Regulations, the IRB is requiring that students, faculty, and researchers obtain a certificate from a tutorial regarding research with human subjects. This may be obtained online.**
2. **Research Certification**

[**https://www.citiprogram.org/**](https://www.citiprogram.org/)

**This requires 1-2 hours and allows you to start and stop until all sections are completed.**

1. **At the recommendation of OHRP, the Board is requiring that students, faculty, and researchers read “The Belmont Report.” This may be found at http://ohrp.osophs.dhhs.gov/educmat.htm. Go to (1) Policy Guidance, and scroll down (2) under Guidance Materials to the link.**
2. **The final recommendation for the IRB is a requirement that all students, faculty, and researchers read the ethical principals for research with human subjects from their respective disciplines.**

**Please sign the following, I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and my**

**Advisor \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ have completed all three requirements as of**

**this date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.**

**16. As of January 16, 2003, the researcher must use a consent form that has been stamped with an approval date and expiration date. This will be mailed/e-mailed to you along with your approval letter. Failure to use the stamped consent form may result in suspension of data collection until the proper form is utilized. Please notify the IRB when your data collection has been completed.**

#  Applicant’s Name (type) Faculty Advisor’s Name (type) Date

**Applicant’s Signature Faculty Advisor’s Signature Date**

 **Faculty Advisor’s Telephone No.**

 **Faculty Advisor’s Fax No.**

 **Faculty Email Address (if available)**