## HAMILTON COLLEGE

## HUMAN SUBJECTS INSTITUTIONAL REVIEW BOARD

## Request for Approval for Use of Human Participants in Research

**For use by IRB members only:**

**Proposal No:** **Date Received:** **Action Date:**

**Action Notes:**

**Reviewer Initials:****Notification sent:**

**Email your completed application to the Chair of the IRB. In addition, sign and submit THE LAST PAGE ONLY as hard copy. *(Students will also need to have their faculty supervisor’s signature.)* Proposals will not be approved unless a hard copy of the signatures has been received. To ensure expeditious review of your project, please be as specific and complete as possible in your responses, and include all necessary supporting materials as appendices (e.g., consent forms, surveys, interview scripts, debriefing script). Please email the application and appendices as a single document.**

**Date:**

**Principal Investigator:       Course No., if applicable:**

**Phone Number:       Email:**

**If Principal Investigator is a student:**

**Name of faculty supervisor:       Email:**

(Note: Faculty supervisor’s signature must appear at the end of this form. Faculty supervisor must currently be employed by Hamilton College.)

**Project Title:**

**Project involves** (check all applicable; to check a box, double-click on it and follow instructions)**:**

**[ ]  Faculty research**

**[ ]  Student research in fulfillment of a course requirement**

**[ ]  Independently conducted student research**

**[ ]  Other** (specify)

**Anticipated Start Date:       Anticipated End Date:**

*(Maximum length is one year; project approval must be renewed annually.)*

**A. NATURE OF THE PROJECT**

**A1.**  **Briefly describe your research project and explain why it is of interest.**

 This information is important in weighing the benefits of the research against any risks that might be incurred by the participants in the study. Keep in mind that IRB members are not necessarily specialists in your field, so write for a lay audience.

**A2.** **Specify the procedure that will be used in the study.**

 Your description should include verbal statements that will be made to participants, particularly any statements that will be misleading or deceptive. Please attach the following documents as appendices to the proposal: (a) the experimenter’s script, if deception is involved, (b) all written materials to be given to participants, including questionnaires, surveys, or tests, (c) all interview questions, if applicable, and (d) a copy of the debriefing script, if the study involves deception. Note that drafts of surveys or interview questions are not acceptable; only final versions can be approved.

**B. PARTICIPANT POPULATION**

**B1.**  **Type of participants** (check all applicable):

[ ]  **adults**

[ ]  **minors** (under 18 yrs. old)

[ ]  **mentally disturbed** (e.g., mentally ill, mentally retarded, emotionally disturbed, senile)

[ ]  **special minority groups** (specify: )

 **B2. Institutional Affiliation of participants** (check all applicable)**:**

Due to HIPPA regulations, research involving off-campus institutions such as hospitals or other social service agencies may **ALSO** require approval from that institution’s IRB. Documentation of approval from external agencies may also be necessary.

**[ ]  No institutional affiliation outside of Hamilton College is involved**

**[ ]  Schools** (specify):

**[ ]  Hospitals** (specify):

**[ ]  Other** (specify):

**B3.**  **Estimated number of participants:**

**B4.** **How will the participants be solicited or contacted?** (e.g., flyers, email, social networking sites, telephone, announcements made in courses, online recruitment program)

**B5.** **Will any inducements be offered to the participants for their participation?**

 **(e.g., money, extra credit in course, gift card)**

**[ ]** yes (please specify type and amount of inducement: **)**

 [ ]  no

**C. RISKS**

**C1.** **Will the participants incur any psychological, social, physical, or legal**

 **risk?** This includes any psychological distress associated with experimental manipulations.

[ ]  yes

[ ]  no

If yes, please explain the nature of the risk and why it is necessary. Is there any alternative way of conducting the research that would be less risky to participants? If so, why have you not chosen the alternative?

**C2.**  **What steps will be taken to minimize the risks to participants?**

**C3.**  **Will the participants be deceived or misled in any way?**

 [ ]  yes

[ ]  no

If yes, please explain the nature of the deception and why it is necessary.

**C4.**  **Will there be any probing (either verbal or written) for information that participants might consider to be personal or sensitive?**

[ ]  yes

[ ]  no

If yes, please explain the nature of the information.

**C5.** **Will participants be presented with materials, or be exposed to social interactions, that they might consider to be offensive, threatening, or degrading?**

[ ]  yes

[ ]  no

If yes, please explain the nature of the materials or social interactions.

**D. VOLUNTARY PARTICIPATION/INFORMED CONSENT**

*(The questions in this section do not apply to unobtrusive observation of public behavior.)*

*Federal law requires that, except in special circumstances, informed consent must be obtained. In brief, consent forms must (1) explain the purpose, procedures, and duration of the project, (2) describe the benefits to the participant and others, (3) state any risks involved, (4) describe the manner in which confidentiality will be maintained, (5) provide contact information should questions arise in the future, and (6) state that participation is completely voluntary. Web-based surveys should include a consent form in which respondents check a box to indicate consent.* ***A sample consent form can be downloaded from the Hamilton IRB web page.***

 **D1.** **Will a written consent form be used?**

[ ]  yes (Attach a copy as an appendix.)

[ ]  no\*

### **\*If a consent form is not to be used**, you must provide a justification such as the following:

### the research is of minimal risk and could not practicably be carried out if a consent form were used

### the consent form is the only record linking the participant to the research and the principal risk is breach of confidentiality

*Even if you do not use a consent form, you must still provide participants with a written statement about the research and the contact information of the researcher, supervisor, and IRB chair.*

**D2.** **If participants are minors (under 18), you must obtain consent of the parents or guardians, as well as the assent of the participants. Explain how this will be accomplished. Attach the parent/guardian consent form as an appendix.**

**D3.** **What information about the study will be provided to potential participants?** If it is necessary to obtain participation without informing participants of the true nature of the study, include a script for information to be provided by research personnel or written material to be given to participants prior to or at the outset of the study.

**D4.** **If research involves participant observation, how will the researcher’s role be explained to other participants in observed activities?**

**E. CONFIDENTIALITY**

 **E1.** **Will data be collected that identifies individuals or be recorded**

 **in a way that allows observations to be linked to individuals?**

[ ]  yes

[ ]  no

If yes, please explain the nature of the information.

**E2.** **Will any personal data be drawn from institutional files or archives (e.g., school files)?** If yes, explain the source and nature of such data.

**E3.** **Who will have access to the data from the study?**

**E4.** **What steps will be taken to insure confidentiality of personal data?**

Be specific. Will research personnel (including students) be informed of their responsibilities in maintaining confidentiality? How will confidentiality be preserved as data are collected, stored, analyzed, and published? When will data identifying individual participants be destroyed?

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# ASSURANCE STATEMENT

Complete this page, sign, and submit a hard copy to the Chair of the IRB.

**Project Title:**

**Principal Investigator:       Email:**

**Name of Faculty Supervisor (if applicable):       Email:**

**FOR PRINCIPAL INVESTIGATOR:**

I confirm that the procedures described above are accurate and will be followed in the course of the research project. I will notify the IRB of any changes to procedures and if unanticipated problems arise during the research process.

Signature of Principal Investigator

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

**FOR FACULTY SUPERVISOR:**

**If principal investigator is a student, the faculty supervisor must also sign:**

I have reviewed this completed application and find it acceptable with respect to the research design and the protection of human participants.

Signature of Faculty Supervisor

Form Revised 8/17/10