**Institutional Review Board (IRB) Application**

AP Research

To the Board members:

Thank you for taking the time to review my IRB application for AP Research at Helena High School

An Institutional Review Board (IRB) is a type of committee that reviews the ethics of a research project, by reviewing the methods proposed for the research to ensure that they are ethical.

Such boards are designated to approve, to question, or to reject any research methods involving humans (including the questions being asked, the population being used, the time and circumstances under which subjects are used).

The board reviews the risks to human subjects, and the ethics of the research, to determine whether or not the proposed research project can be conducted. The purpose of the IRB is to assure that appropriate steps are taken to protect the rights and welfare of humans participating as subjects in a research study.

Please take the time to review my application below, including any appendices (interview questions, survey questions, consent forms, permission slips, confidentiality forms, etc.). Please add your feedback throughout my application as you see fit, and then sign the last page where you find appropriate.

Thank you for your time and for your expertise. I look forward to receiving this application back from you by

November, 2019.

Thank you,

Name

Signature

AP Research student

Application Contents:

Part I: Project and Researcher Information

Part II: Subjects of Study Checklist

Part III: Further Explanation

Part IV: Appendices

Part V: Researcher Certification and Signature

**Part I. Project and Researcher Information**

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| X | This is an initial application for my research project. |
|  | This is a revised application for my research project. |

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| Researcher Name |
|  |
| Student Email Address |
|  |
| Project Title |
|  |
| Research Question |
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| Estimated Start and End Dates of Data Collection |
|  |
| Location of Data Collection |
|  |

**Part II. Subjects of Study Checklist**

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| Subjects from special / vulnerable populations (place X) | |
|  | Children under 18 |
|  | Economically disadvantaged |
|  | People with intellectual disabilities |
|  | Senior citizens/elderly |
|  | Prisoners |
|  | People with physical disabilities |

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| --- | --- |
| Number of research subjects in the following categories (place numbers) | |
|  | ASFM high school students |
|  | Other high school students |
|  | General public |
|  | Faculty |
|  | Children under 18 (ASFM students) |
|  | Children under 18 (non-ASFM students) |

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| --- | --- | --- |
|  | Yes  **X** | No  **X** |
| 1. Does the project/study involve collection of data that identifies individuals? (i.e., name, student number, etc., attached to survey, interview, databases, etc.) If Yes, include waiver of confidentiality form in Appendices. |  |  |
| 1. Will data individually identifiable be shared with anyone (i.e, conference presentation, report for funding source, published article, etc.)? If Yes, include waiver of confidentiality form in Appendices. |  |  |
| 1. Are participants being offered any incentives to participate, such as money, extra credit, etc.? (further explanation in Part III) |  |  |
|  | **Yes**  **X** | **No**  **X** |
| 1. Is participation in the project or study voluntary for individuals participating? If Yes, include voluntary consent form in Appendices. (further explanation in Part III) |  |  |
| 1. Will participants be fully informed of any risks and/or benefits? If Yes, include informed consent form in Appendices. (further explanation in Part III) |  |  |
| 1. Will participants be videotaped or audiorecorded during the project/study? If Yes, include informed consent form in Appendices. |  |  |
| 1. Will participants’ privacy and personal information be protected? If Yes, include confidentiality form in Appendices. (further explanation in Part III) |  |  |
| 1. Will participants be debriefed following completion of the project/study? |  |  |
| 1. Does any funding source have any potential for financial/professional benefit from the outcome of the study/project? (further explanation in Part III) |  |  |

**Part III. Further Explanation**

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| 1. **Abstract Describing Project and Purpose:** Briefly describe (a) the project or study and (b) what human participants will experience during the proposed study or project. Describe all strategies or experimental methods to be used, design and program activities. Indicate what data, measures or observations will be collected and used in the study or for the project. If any questionnaires, surveys, tests or other instruments are to be used, include a brief description and one copy of the instruments in the Appendices. |
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| 1. **Method:** Specify who the project participants or research subjects will be. Indicate how they will be solicited, recruited, or contacted. Include any recruitment letters, materials and letters of agreement from cooperating institutions or entities in the Appendices. State how much time will be required of each participant or subject. Describe procedures to which individuals will be subjected. |
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| 1. **Voluntary Participation:** Specify the steps that will be taken to ensure that each individual’s participation is voluntary. State what, if any, inducements will be offered for their participation. |
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| 1. **Confidentiality of Data and Privacy Protection:** Describe the methods to be used to safeguard the privacy of participants and ensure the confidentiality of data obtained, including plans for publication, disposition and destruction of data, including that of computer, print, videotape and audio materials. |
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| 1. **Informed Consent:** Attach a copy of all consent forms to be signed by the participants and/or any statements to be read to or provided to the participant. In the space provided below, give the page number of this application where the IRB committee may find this consent form. |
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| 1. **Risks to Participants:** (a) Describe any potential risks to participating individuals — physical, psychological, social, legal, or other; (b) include all known and anticipated risks to the participants such as side effects, risks of placebo (inert) treatments, etc.; and (c) in research that proposes substantial risk to human participants, list emergency backup procedures that are in place such as medical or counseling interventions. |
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| 1. **Benefits:** (a) Describe the benefits and/or any compensation that the participating individuals can expect and (b) describe the gains in knowledge that may result from the project or research study. |
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**Part IV. Appendices**

Appendices Table of Contents:

Appendix A. Likert Value Scale

Appendix B. Informed Consent

Appendix C. Confidentiality Statement

Appendix A.

Appendix B.

**Part V. Researcher’s Certification and Signature**

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| In making this application, I certify that:   1. I have read and understand the protocol and method of obtaining informed consent, and will follow them during the period covered by this research project. 2. I agree to comply with federal, state, and local laws regarding the protection of human participants in research. 3. I will submit any future changes to the research project to the institutional review board (IRB) for review and approval before implementation, as these may alter the exempt status of the project. 4. I agree that any new findings that develop during the course of this study that may affect the risks and benefits to participants will be promptly reported to the IRB in writing. 5. I agree that any adverse events that occur in the course of this study will be promptly reported to the IRB in writing. 6. I agree and understand that records of the participants will be kept for at least three years after the completion of the research. 7. I may begin research when the IRB gives notice of its approval. |
| Researcher Signature:  Date: |

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| **FOR INSTITUTIONAL REVIEW BOARD MEMBERS’ USE ONLY:**  Researcher Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Board Member Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Board Member Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  I consider this application to be:   * **Approved**   Notes:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   * **Approved, but subject to restrictions**   Notes:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   * **Tabled** (insufficient information to make a final decision)   Notes:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   * **Rejected**   Notes:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |