

Instructions

- The form must be typed. Any hand-written form will be returned to you.
- Answer all questions in their entirety. Some questions may contain sub-questions. Failure to answer all questions will result in your application being returned to you.
- Research Design: Attach as a separate document a detailed description of the study to include the purpose, methodology, planned data analysis section. **Please DO NOT append your entire thesis/dissertation/grant proposal as a substitute for this document.** Your document should not exceed 5 pages.
- Supporting Documentation: Attach the Consent Form, all surveys, questionnaires, certificates, or third party support letters along with the IRB Submission application.
- Remember both the Principal Investigator, and Co-Investigator/Advisor must sign the Investigator's Assurance Page. Both the Principal Investigator and Co-Investigator/Advisor must also provide evidence of CITI training.
- **Email the documents as one pdf or Word file, do not email documents separately. Email the application to irb@vsu.edu**
- **Visit our web page for IRB submission and meeting dates <http://www.vsu.edu/files/docs/research/irb-meeting-dates.pdf>.**

Contact:

Virginia State University
P.O. Box 9407
Petersburg, VA 23806
Email: irb@vsu.edu



Virginia State University

Institutional Review Board

Research with Human Subjects

Submission Form

Federal regulations and Virginia State University policy require that all research involving human subjects are to be reviewed and approved by the University Institutional Review Board (IRB). Any person (faculty, staff, student or non-VSU person) wanting to engage in human subject research at Virginia State University must received written approval from the IRB before conducting research.

Please complete this entire form, sign and return with the required documentation to the address located at the bottom of the form.

I. GENERAL INFORMATION (Type in the gray area)

A. Research, Dissertation or Thesis Title: _____
Is this research part of a thesis? <input type="checkbox"/> Yes <input type="checkbox"/> No Is this research part of a dissertation proposal? Yes <input type="checkbox"/> No If yes, has the thesis or dissertation proposal been approved? <input type="checkbox"/> Yes <input type="checkbox"/> No Date approved: _____ Name of Thesis/Dissertation Advisor: _____ Department: _____ Phone No.: _____

Principal Investigator Information (If the PI is a graduate student please indicate advisor's name in item 3).

1. Principal Investigator _____	Department and Campus PO Box No. _____
2. Telephone and Fax Numbers _____	Email Address _____
Please check if PI is: Faculty () Staff () Graduate Student () Non-VSU faculty/staff or student	Non-VSU members complete this section: Name of University and mailing address _____
3. Co-Principal Investigator or Advisor _____	Department and Campus PO Box No. _____
4. Telephone Number _____	Email Address _____
Please check if Co-PI is: () Faculty () Staff () Graduate Student () Non-VSU faculty/staff or student	Non-VSU members complete this section: Name of University and mailing address _____

COMPLETE THIS SECTION IF PI IS AN UNDERGRADUATE STUDENT

Check one:	<input type="checkbox"/> Class Project	<input type="checkbox"/> Research Paper	<input type="checkbox"/> Other
Has the Thesis/Dissertation Committee approved the proposal?			
<input type="checkbox"/> Yes, Date approved: _____			
<input type="checkbox"/> No			
Name of Research Supervisor: _____			
Department: _____		Phone No. _____	
Course Name (if applicable) _____			

II. PROTOCOL DESCRIPTION

Reason(s) for review by Human Subjects Committee (please check all that apply):

- Virginia State University employees/students
- Persons otherwise dependent on the researcher (such as students of the researchers, etc.)
- Minors
- Students in a school system

Name of school system: _____

Other populations (explain): _____

III. RECRUITMENT (Begin typing in the gray area)

- A. Give an estimate of how many participants will be included in the study? _____
- B. What is the age range? _____
- C. Where will participants be recruited? (i.e., specific department, public school system, etc)

- D. Describe in detail how participants will be recruited, or approached to participate in the research study.

- E. Explain procedures/steps for obtaining informed consent from participants. Be specific regarding who will obtain informed consent, and in what setting/time frame.

- F. Describe any alternative activities available to those who choose not to participate in the study, if applicable.

IV. DATA

A. How will the data be stored and kept secure? (Briefly describe where the data will be stored and kept secured from persons other than the researcher)

B. 1) Who will have access? 2) How will the data be used [during and after the research (i.e., research publications, journals, conferences, scholarly presentations)]?

C. How will the data be disposed and after how many years?

V. CONFIDENTIALITY

A. How will participant's identity be kept confidential? (Describe how the participant privacy and confidentiality of the research data will be protected)

B. Will participants be recorded (e.g., audio, video)

No

Yes – describe the type of recording(s) and specify how they will be used, stored/secured, and their final disposition.

VI. BENEFIT

A. Who might find these results useful?

VII. RESEARCH INSTRUMENTS

Attach copies of surveys, interview or focus group questions that will be used in the project and if applicable, any signed agreements between agencies/collaborators/school districts, etc.

VIII. TRAINING

VSU policy requires all investigators and/or researchers conducting human subjects' research to complete The **CITI Responsible Conduct of Research (CITI RCR)** training on protecting the rights and welfare of research participants.

The training requirements may be satisfied by completing an online course at CITI RCR <https://www.citiprogram.org>.

NOTE:

Students, who are submitting their thesis, dissertation, or class projects for IRB review, please do not complete the Basic/Refresher course, the Conflict of Interest or the Class project curriculum.

Investigator's Assurance

The signature(s) below certify that:

- The information provided in this application is complete and accurate
- Each individual listed as principal, co-investigator, or research team possesses the necessary experience for conducting research activities in their assigned role, and is aware of and will abide by VSU policies and procedures for the protection of research participants
- Each individual listed as principal, co-investigator, or research team member has received the required human research protection education
- No research procedures with human subjects will be initiated until documented approval has been obtained from the IRB Office.
- I also agree to report any significant and relevant changes in the procedures or research instruments to the Human Subjects Committee for additional review

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Investigator's Signature

Date

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Co-investigator's/Advisor's Signature

Date

NOTE: Carefully review the application to ensure it is complete, contains sufficiently detailed responses to all questions, and all required attachments. Incomplete applications will be returned to the researcher potentially delaying the research.

DO NOT COMPLETE THIS SECTION [For Sponsored Research & Programs Use Only]

IRB Number: _____

Date Received: _____

Review Status:

Exempted

Categories 1 2 3

4 5 6

Date Reviewed: _____

Expedited

Categories 1 2 3

4 5 6

Name of Reviewer: _____

If Expedited: Name of Referred Committee Member: _____

Date Committee Member Reviewed: _____

For Committee Use Only

Full Committee Review Action:

APPROVED: _____ **DATE:** _____
Chairman or Designee of IRB

CONDITIONALLY APPROVED: _____ **DATE:** _____
Chairman or Designee of IRB

Conditional Provisions: (Use reverse side if necessary)

NOT APPROVED: _____ **DATE:** _____
Chairman or Designee of IRB