# **HUNTER COLLEGE**

INSTITUTIONAL REVIEW BOARD (IRB) FOR THE PROTECTION OF HUMAN SUBJECTS 695 PARK AVENUE, ROOM E1426 NEW YORK, NY 10021 PHONE (212) 650-3053 ◆ FAX (212) 650-3055

http://www.hunter.cuny.edu/IRB

		If	RB PROTO	COL	COVERSHE	ET		
INSTRUCTIONS: This form must be reviewed and completed in its entirety. This form must be signed by the Principal Investigator, and if applicable the Faculty Advisor or Co-Principal Investigator(s). Attention to these elements will facilitate the IRB's review of your protocol.  PLEASE TYPE OF PRINT LEGIBLY				• •				
			PROTOC	OL IN	FORMATION			
TITLE								
FUNDING SOURCE	•							
OCONOL		JNDING SOURC	E REQUIRE NOTI	FICATIO	N OF THE IRB'S DEC	ISION?	Yes <u></u> No	
PR	NCIPAL IN	VESTIGAT	OR (PI) and	FAC	JLTY ADVISOI	R (if applical	ble) INFORM	MATION
1) PI NAME					2) PI NAME			
DEPARTMENT	•				DEPARTMENT			
E-MAIL ADDRESS					E-MAIL ADDRESS			
HOME ADDRESS (necessary for mailing)					HOME ADDRESS (necessary for mailing)			
Faculty Hunter Advisor Faculty/S		Undergraduate Student	Other		Faculty Hunter Advisor Faculty/Staff	Graduate Student	Undergraduate Student	Other
3) PI NAME					4) PI NAME			
DEPARTMENT E-MAIL	•			_	DEPARTMENT E-MAIL			
ADDRESS HOME ADDRESS (necessary for mailing)					HOME ADDRESS (necessary for mailing)	_		
Faculty Hunter Advisor Faculty/S		Undergraduate Student	Other		Faculty Hunter Advisor Faculty/Staff	Graduate Student	Undergraduate Student	Other
		C	THER PROT	госо	L INFORMATI	ON		
Will the study be a a language other the No Yes Be sure to attach the all instruments, coassent form(s), scrinstrument(s) or suapproval after the has been approved	nan English?  ranslations of one of the control of	surveyed, inter otherwise invol project? participants How many:	_ # of # female	participethnic No If yes,	ur sample include pants from diverse groups?  Yes what are the groups eir anticipated tions?	Does the study involv vulnerable subjects?	or mental h No Y Is the healt of the parti	h or mental healicipants the focus arch? No No her above, pleas

### PIFASE CHECK THE BOX NEXT TO EACH FIEM THAT YOU HAVE ADDRESSED.

* SECTION 1 - ITEMS REQUIRED FOR AN IRB PROTOCOL *				
COVER	SHEET  Did you complete and review this coversheet in its entirety? You must include all 12 pages of this coversheet with your application?			
APPLIC	A THO NI			
	Did you complete the HunterCollege Institutional Review Board Application for Approval to Use Human Subjects in Research (8 pages)? You must answerall questions asked in the format requested. Not adhering to the questions or format will result in delays, as your protocol will be returned.			
	Did you summarize your research question(s) and their significance? <b>DO NOTATIACH YOUR WHOLE RESEARCH PAPER.</b>			
	Did you se lect the type of review requested (Expedited, Exemptor Full Review)?			
	Did you provide only the original copy of the application? No copies are necessary. Please do not staple individual sections of the application.			
	Did you sign the protocol forms and obtain the signature of the Co-Principal Investigator or Faculty Advisor?			
	SONNELFORM  Did you complete a keypersonnel form? Keypersonnel are defined as any individual who will be involved in the design and conduct of human subjects research project. A copy of this form is available on our website.			
EVIDEN	CEOFTRAINING  Did you complete the Collaborative Institutional Thaining Initiative (CIII) and attach a copy of the certificate for all key personnel. Thaining can be completed at: <a href="www.citiprogram.org">www.citiprogram.org</a> . If your certificate is on file at the IRB Office, you do not need to re-submit. Your certificate is valid for a three-year period. After that time, you must complete the CIII refresher course. Information about the training can be found on the IRB website. We cannot accept other certification programs to meet this requirement.			
CONSE				
Ш	Did you follow the template in Section 4 of this document?			
	Did you copy the first page of all consent/assent documents on letterhead? Studies conducted by Hunter students, faculty or staff must be on Hunter College letterhead. If you do not have Hunter College letterhead, please leave a 2 inch margin at the top of the document, and upon approvalit will be copied onto Hunter College letterhead.			
INSTRUI	MENTS			
	Did you include your mesearch instrument (questionnaire, interview protocol, mecord review summary sheet, etc.)? If your instrument is a questionnaire or interview, be mindful of the way the study is presented to the participants.			
	Is the language of the instruments to be used compatible with the reading/literacy level of the possible research participant?			
	Did you la belall instruments clearly?			
	If you are using an online instrument, did you provide the online version of the instrument and review the requirements on the IRB web site.			

LETTER	FROM COOPERATING AGENCY  Did you include a letter from an executive in the cooperating agency or organization (if applicable)? If the
	agency has an IRB, the approval lettermust be from the IRB. A sample of what this letter should entail is included on our website.
REC RUI	IMENT Did you provide recruitment materials?
	• You can contact participants by use of flyers, postcards, advertisements, press releases, brochures, verbalexchanges, and postings on the Internet.
	• For written contact (e-mail, letters, etc.) the recruitment script should be in the form of a letter. For some anonymous studies, researchers may choose to combine the consent form and recruitment letter. (see Chapter 8 of the Policies & Procedures Manual)
	• For in-person contact, a recruitment script should be an introduction which the researcher will use with potential participants to introduce the study.
	• For telephone contact, a recruitment script should be a introduction that the researcher will use with potential participants to introduce the study. Researcher should establish that the participant fits the group or class of participants you are seeking, i.e., "Are you/Iassume you are"
	• For flyers and advertisement did you include names of the researchers and contact information, Hunter's name and researcher's affiliation, purpose of the research, general eligibility criteria, accurate and honest description of benefits and/orcompensation (free treatment, payment), a statement that it is a research study?
	Did you indicate in the recruitment materials that you are conducting a research study?
	Did you include a brief synopsis of the study, your name, affiliation and contact information and criteria for participation in your recruitment materials?
	Did you specify how partic ipants are selected? Are you using an entire population? Are you using (number) potential partic ipants from (number) of the available population? Is it a random or systematic (5th person out of every 10 people) sample? Are partic ipants from a public list?
	Did you include language on how you will obtain your subject pool?
	Did you describe the challenges to privacy and confidentiality in the study and describe how you will address them?
	Were you sensitive to actual or perceived coercion?
	In describing your recruitment in the narrative, did you describe how you will eliminate or minimize actual or perceived coercion?
REFERR	AIS  If your study involves more than minimal risks, did you provide specific contact information for referrals? This includes a contact person within an agency and a direct phone number. e.g., Jane Doe, North General Hospital, (212) 595-1234.
	Did you include a list of referrals to help participants deal with unexpected outcomes, if participants should need them, which are appropriate to your research?
	If it is an agency based research did you provide in agency and out of agency referrals?
	If your study involves more than minimal risks, does this referral agency have specific expertise in the area of risk?

FOREX	EMPT STUDIES ONLY  Did you explain which exempt category yourprotocol qualifies for <u>and</u> justify why yourprotocol meets the exempt criteria?
	For review of records, did you attach a copy of the tool that will be used to transfer the data?
	For review of records, did you provide a model record which will be reviewed?
	For review of records from an agency, does the letter from the official state that you have permission to use the data?
	For review of records from an agency, does the letter from the official state how the data can be used?
	For review existing data, did you provide details about how the original data was obtained? Did you supply a letter of IRB approval?
	* SEC TIO N 2 - O THER TIEMS THAT MAY BE NEC ESSARY *
PERMIS	SION TO AUDIO TAPE OR VIDEO TAPE
	Did you complete a Video Recording or Audio Recording Release Consent Form if you will audio or video record participants? You should select the options that are appropriate for your study. A copy of this form is
	available on our web site. You must use this format.
UNAFFI	LIATED INVESTIGATOR FORM
	If you are a non-CUNY person, did you indicate a Hunter College faculty contact <u>and</u> complete the Unaffiliated Investigator Agreement Form? A copy of this form is available on the IRB website.
DATA U	SE AG REEM ENT
	If your study involves the use of existing data <u>and</u> it is created by or obtained from a HIPAA covered entity, you must provide a data use agreement. This form is completed by an official in the institution granting access to the data and specifies how the data may be used. Did you provide this form?
	Did you attach translations of all instruments, consent and/or assent form(s), script(s) and instrument(s) if your study is in a language other than English?  OR  Will you submit the translations once the English version is approved?
Ц	will you subtrib the trainsia tions once the rangiash version is approved:
	* SECTION 3 - OTHER ISSUES *
DECEA D	CH WITH MINORS
Fe d e ra	l regulations specify that minors deserve special care and protection as human subjects. This includes all nunder the age of 18. All of these research projects require full committee review.
	Did you provide an assent form? Assent is required for children age 5 and up. It should be in language appropriate for the age group. If you are using a range of ages you will need separate assent forms. Typic ally you should group ages 5-6, 7-9, 10-12 and 13-17.
	Did you provide a consent form for the parent/guardian allowing their child to participate in the study?
	Is the assent form written in language the child can understand?
	Did you provide this language in the assent form? "You do not have to participate even if your parent gave permission for you to do so."
	Did you provide this language in the parental consent form?  "My child will also be asked to participate. He   she does not have to participate, or he   she can withdraw at any time, even if I have given my permission."
	Did you remember that research involving participants at New York City public schools, must be approved by the NYC Department of Education IRB?

Please note that the concept of "passive consent" is not acceptable. Passive consent is providing parents with information regarding the study and asking them to return a form only if they do not want their child to participate with instructions that say that if the form is not returned the child will participate in the research.

#### RE

RESEARCH WITH COGNITIVELY OR MENTALLY IMPAIRED PERSONS
Federal regulations specify that cognitively ormentally impaired adults deserve special care and protection as human subjects. The category of cognitively ormentally impaired includes, but is not limited to, people suffering from mental retardation, neurological diseases and disabilities affecting judgment, mental disorders producing delusion orconfusion, and/ordementia. All of these research projects require full committee review.
<ul> <li>Does the informed consent process address the need to preserve participant decision-making autonomy?</li> <li>Did you show that you have made every possible attempt to seek the informed consent of the participant as well as the informed consent of the participant's proxy? As a general rule, all adults regardless of their diagnosis or condition, should be presumed competent to consent unless there is evidence of serious mental disability that would impair reasoning or judgment?</li> <li>Did you assure that potential participants are fully informed about the voluntary nature of their participation,</li> </ul>
and that they remain free to withdraw at any time, even when proxy consent has been obtained?  Are both participants and their proxies fully informed about the risks, costs, and risk/benefit ratio of the study?  If there is evidence of serious mental disability that would impair reasoning or judgment, did you explain how you will assess competency?  Did you include a description of appropriate psychological or medical screening criteria for competency and indicate how and when you will use them?
RESEARCH WITH PRISO NERS  Federal regulations specify that research which involves prisoners deserve special care and protection as human subjects. At Hunter, the category of prisoners includes, but is not limited to, prisoners, parolees and those on probation. All of these research projects require full committee review.
The following research is normally permissible:  a. Study of the possible causes, effects, and processes of incarceration, and of criminal behavior, provided that the study presents no more than minimal risk and no more than inconvenience to the participants;  b. Study of prisons as institutional structures or of prisoners as incarcerated persons, provided that the study presents no more than minimal risk and no more inconvenience to the participants.
<ul> <li>c. Re search on conditions particularly affecting prisoners as a class.</li> <li>d. Re search on practices, both innovative and accepted, which have the intent and reasonable probability of improving the health or well-being of the participant.</li> </ul>
The following criteria must be met:
Are any possible advantages accruing to the prisoner through his/her participation in the research, when compared to the general living conditions, medical care, quality of food, amenities and opportunity for earnings in the prison, of such a magnitude that his/her ability to weigh the risks of the research against the value of such advantages in the limited choice environment of the prison

_	when compared to the general living conditions, medical care, quality of food, amenities and opportunity for earnings in the prison, of such a magnitude that his/herability to weigh the risks of the research against the value of such advantages in the limited choice environment of the prison impaired?
	Are the risks involved in the research commensurate with risks that would be accepted by non-prisoner volunteers?  ** For prisoners, minimal risk is the probability and magnitude of physical or psychological harm that
	is no mally encountered in the daily lives or in the routine medical, dental or psychological examination of healthy persons.
	Are the procedures for the selection of participants within the prison fair to all prisoners and immune from arbitrary intervention by prison authorities or prisoners? Unless the principal investigator provide justification in writing to the IRB for following some other procedures, control subjects must be selected randomly from the group of available prisoners who meet the characteristics needed for that particular research project.
	Is the information presented in language which is understandable to the subject population?
	Are there adequate assurances that parole boards will not take into account a prisoner's participation in the research in making decisions regarding parole; each prisoner is clearly informed in advance that participation in the research will have no effect on his or her parole?
	Did you add to the consent form a statement that participants should not discuss open cases? This includes cases pending in the criminal justice/judicial system as they may be subject to subpoena.

\* Note: Research that is conducted or supported by HHS must be certified by OHRP. The IRB Office will aid in certification, after the protocol is approved.

## HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT (HIPAA) Do you use individually identifiable health information created by a covered entity? Do you use or disc lose health information that has been created by or obtained from HIPAA-c overed entities, such as hospitals, physicians' offices, or social service and mental health agencies? □No □Yes If you answered yes to the last question, have you attached a HIPAA Waiver Application or a HIPAA Re se a rc h Autho riza tio n? No Ye s Are you using key personnel that are not affiliated with CUNY? □No □ Ye s If you answered yes to the previous question, have you attached a Subject Information Confidentiality Agreement for each non-CUNY key personnel? No Yes Do you have a completed and signed Data Use Agreement between yourself and the covered entity? (see Section 2 on Data Use Agreements) SPECIAL RELATIONSHIPS Clients, students or staff of Hunter College or any other agency or institution may feel they HAVE TO or MUST partic ipate in a study if the irpractitioner, teacheror supervisor asks them. It is recommended that teachers not use class time to complete interviews or questionnaires. It is also preferable, if possible, to avoid having te a chers, staffor practitioners recruit the irown workers, students or clients directly for your study. If you are a sking staff/teachers to recruit participants on your behalf, it is preferable for the staff/teacher not to know if their worker/students have actually participated. Here are ways to handle that: a) they could provide information to the clients/students asking them to contact the researcher directly; They could get permission from the client/students to give client names to researcher. You, the re se arc her, would then contact them directly; b) If staff must or cannot help but know who participates, it must be stated in the recruitment script and consent form that the partic ipant's partic ipation is still voluntary, and there will be no withdrawal of services or other penalties if they choose not to participate. Be sensitive to the impact of group pressure when recruiting participants in a group session, public meeting or class setting. To minimize, the researcher (or someone else) could distribute cards to the potential subjects, asking people interested in participating to write down their contact information, and then the researcher can contact them. Collect the cards from everyone so no one in the group will be overtly aware of who volunteered. Alternatively, the re se arc her can distribute a recruitment flyer, which asks the potential subjects, in writing, to contact the researcher. RESEARCH WITH GROUPS

It is important to convey to the partic ipants in focus groups, that they should not discuss what is said in the group outside of the group.

Did you include the following statement or similar appropriate language to the consent form:  "To protect the privacy of the group members, please refrain from speaking to others about what is said within the group."
Did you include a statement that group members will know what the subject says and there fore confidentiality cannot be guaranteed?

#### ANONYMIIY AND CONFIDENTIALITY

Anonymity is the state of a person being anonymous or unidentified. The identity of the person is not known to the re se a rc he r.

When a researcher promises confidentiality to participants, they have agreed to a bond of trust. The researcher knows who the partic ipants are but has committed to and has the responsibility to keep the information private.

Confidentiality does not mean the participants are anonymous. These words are not interchangeable. Confidentiality means that the researcher can identify the participants and or the responses of the participants. A study can be conducted where the data is confidential but not anonymous. Conversely, if the data is anonymous, it more than likely will be kept confidential.

To determine if you should use the term anonymous, as a rule of thumb, ask yourself, "Will I know who partic ipated in the study?" If the answer is yes, the study is not a nonymous.

#### \* SECTION 4 - CONSENTINFORMATION AND TEMPLATE \*

- Valid informed consent requires:
  - (1) Disc losure of relevant information to prospective participants about the research;
  - (2) the ir comprehension of the information, and
  - (3) the ir voluntary agreement, free of coerc ion and undue influence, to research participation.
- Consent forms should be in the second person voice. Listed below are elements that should be included. The model that appears uses a block format to make it easier to read, though this format is not mandatory. The following elements must be included in the consent form.
- This template uses standard language for normal adults with a relatively high literacy level (8th Grade). For some populations (cognitively ormentally impaired, children, non-native English speakers and those with lower literacy levels) you will need to alter the language.
- If you alter the standard language, please be sure to explain how and why this was done.
- You can check the reading level of a document in Microsoft Word. (Click on Tool, then Options, then the Spelling & Grammartab, then click the box 'Show readability statistics.' Check the document as you no mally would and the readability statistics will appear.)

ELEMENT EXAMPLE

#### Purpose And Background

This section should present the introduction to the study, indicating who is conducting the research, stating the aim of the study, giving a brief summary of the background or reason for the project, and explaining why the individual has been asked to participate.

- Who is the researcher?
- What is the researcher's affiliation with Hunter College?
- What the study is about?
- Crite rion for Partic ip a tion
- How did the researcher find and/orselect this participant?
- Number of Antic ip a ted Partic ip ants
- A statement of voluntary participation

Sarah Brown is a graduate student in the Department of Health Sciences at Hunter College. She is conducting a study about how nurses deal with stress. You are being asked to participate in a study which explores how nurses experience and cope with stress in their roles. You have been identified as a possible participant because you are a nurse who has worked in the field for five years or more and you are over the age of 18. It is anticipated that 30 individuals will participate in this study. Participation in this study is voluntary, and refusal to participate will involve no penalty or loss of benefits to which you are entitled.

### Pro c e dure s

Each procedure should be discussed preferably in the sequence in which it occurs. If the study involves screening procedures, these should be mentioned first and identified as tests that will determine eligibility to participate in the study. This section should clearly state what will be done to the individual as a result of participation in the study, and, where appropriate, how this differs from standard treatment or practice or what would happen to the individual if he/she did not participate in the study.

- What will the partic ipants be asked to do?
   Will it be interviews, focus groups, etc.
- Where will it take place?
- Expected duration of the participant's participation. How long will it take?

You are being asked to participate in an in-person interview. During the interview you will be asked questions about your day-to-day experiences as a nurse. The interview will take place at a mutually agreed upon public location and will take about one hour.

#### Risks and/or Disc om forts

The risks and/or possible discomforts of all study procedures should be listed and explained in this section. It is best to describe the risks of each procedure in a separate point and arrange them according to severity and the like lihood of occurrence. Where appropriate, the precautions that will be taken to avoid certain outcomes from occurring should be indicated and what will be done should they occur. It is important to consider the emotional impact of the research on the people who are your research participants, even if the study is of a seemingly impersonal subject matter. PIFASE NOTE: There is always the possibility of harm to the participants, even if remote and minor. Examples of types of risks to participants are: Physical – risk of heart attack if project involves participants working out on a treadmill; Psychological – survey questions remind participants of traumatic or emotional events; Social – disclosure of individual responses could lead to a loss of community standing; Legal – survey questions may be self-incriminating; Economic – disclosure of individual responses could result in loss of employment.

- Indicate risks
- Indic ate what the partic ipant should do if he/she is bothered or upset as a result of partic ipation.
- Include a statement about the partic ipant's ability to not answer any question.

The study may raise difficult issues about stress in your life. In the event that this happens, the researcher has a list of resources that you may contact for assistance should you need them. You can choose to not answer any particular question. You may also stop the interview process at any time.

#### Be ne fits

Any potential direct benefits to the participant should be described. In behavioral research there typically are no direct benefits.

• Indic ate the Benefit(s) to the partic ipant.

Note that accumulating knowledge that might help to understand a problem or change a policy in the future is not a benefit to the partic ipant and should not be advertised as such.

The reare no direct benefits. However, participating in the study may increase your knowledge of stress as it relates to nurses.

#### Alte mative s

This section should discuss any alternatives to participation in the study. If the study involves only normal, healthy volunteers, and thus the only alternative is to decline participation in the study, this need not be mentioned in a separate section because the individual's right to choose not to participate will be made clear in the last section of the form. If the study involves the use of a student's class time, alternatives that the child will be given if they choose not to participate must be detailed.

• Indic a te Alte ma tive

No ne

#### Financial Considerations

This section should state the total dollar amount that the participant will be paid for participation in the study, and should give any other relevant information such as pro-rating if a participant does not complete the study. If appropriate, a payment schedule should be included in this section. Participants should not be required to complete the entire study in order to be reimbursed.

Partic ip ants should be informed how payment will be made (e.g., in cash, by check) and when they will be paid (e.g., immediately after the interview, approximately six weeks after completion of the study or one-third upon completion of the first of three phases of the study). It is important that this information be clear and complete. If there will be no payment or reimbursement to participants for study participation, this information should be stated in this section.

• Indicate Payment

You will receive \$10 for your participation. Even if you do not complete the entire interview, you will still receive the \$10.

#### Privacy and Confidentiality

Indicate how confidentiality in the study will be maintained. If there are limits to confidentiality this must be spelled out.

- Tell partic ipants how the data will be collected.
- Explain how and where the data will be handled and stored.
- State when and how data will be destroyed.
- Tell partic ipants what will happen to the data that is collected.
- Indic ate if anyone will know if they have partic ip ated in this study, and if so, who will know

The researcher will tape record the interview with your permission. You will be given a separate form to indicate your permission. No one but the researcher and her faculty advisor will listen to the tapes. The tapes will use identifying codes. Your name will not appear on the transcripts. Tapes will be destroyed after interviews are transcribed. No personal identifiers can be linked to the data. All materials will be kept in a locked file cabinet in the faculty advisor's locked office to which only the researcher and her faculty advisor have access. The data will be stored for a minimum of three years. After that,

- Briefly describe how the confidentiality of private information will be protected, i.e., coding of records, limiting access to the study records, not using any individual identifiers in publications or reports resulting from the study.
- Limits to confidentiality This language is necessary in almost all instances regardless of subject matter. "If the researcher becomes concerned that you are a danger to yourself or others, she/he will alert (counselor, agency director/police, etc.)"
  - If you are talking to professionals or key informants about their feelings, this language is required.
  - ❖ You need not use this language with professionals or other key informants if you are asking about organizational or professional practices. Instead, use the phrase, "The information you disc lose will be kept confidential to the fill extend permitted by law."
  - Do not use this language if you are using a no nymo us surve ys.

all materials may be destroyed. As long as the data exists it will be kept secured. The information will be used to produce a paper for a graduate research project. Only aggregate data will be reported in any reports or publications derived from this research. All identifying information about you and others who participated will be omitted or disguised. The researcher is mandated to report to the proper authorities suspected child abuse, and any indications that you are in imminent danger of haming yourself or others.

#### Withdrawal

The following statement must appear in the consent form:

• Include a statement about discontinuing the study

You may discontinue participation at any time without penalty or loss of benefits or services to which you are entitled.

#### Contact Information

The contact information should read as follows:

• "If you have questions about the study, you can contact the researcher, (name of researcher at (xxx) xxx-xxxx or his/her faculty advisor (name of faculty advisor) at (xxx) xxx-xxxx. You should contact the Hunter College IRB Office at (212) 650-3053, if you have questions regarding your rights as a subjector if you feel you have experienced a research-related injury."

#### Or alte mately

"If you have questions about the study, you can contact the researcher, (name of researcher at (xxx) xxx-xxxx or his/her faculty advisor (name of faculty advisor) at (xxx)xxx-xxxx. "You should contact the Hunter College IRB Office at (212) 650-3053, if you have questions regarding your rights as a subjectorif you feel you have been harmed as a result of your participation in this research."

If you have questions about the study, you can contact the researcher, Sarah Brown at (555) 555-5555 or her faculty advisor Joe Black (555)555-5577. You should contact the Hunter College IRB Office at (212) 650-3053, if you have questions regarding your rights as a subject or if you feel you have experienced a research-related injury.

Sig n	ature s			
•	For a waiver of signed consent (i.e., use of an Information Sheet rather than a consent form) The last paragraph should read: "The information you provide is anonymous. No one will know how you re sponded to the se questions. Please do not put yourname or other identifying information on the questionnaire to assure anonymity. By completing and returning the instrument you are giving consent"			
•	For a signed consent form  The last paragraph should read:  "I have read (or have had read to me) the contents of this consent form and have been encouraged to ask questions. I have received answers to my questions. I give my consent to participate in this study. I have received (or will receive) a copy of this form formy records and future reference." (Note: this statement should be in the first person.)	I have read (or have had read to me) the contents of this consent form and have been encouraged to ask questions. have received answers to my questions. I give my consent to participate in this study. I have received (or will receive) a coof this form formy records and future reference.  Participant's Name  Signature  Date		sk que stions. I ny consent to receive) a copy
•	This should be followed by lines for the partic ipant's printed name, his or her signature and the date of signature.	Re se a m he r's Name	Sig nature	——————————————————————————————————————
•	This should be followed with the signature of person obtaining consent. This provides participants with a record of who explained the study to them. This should include the printed name of the specific individual obtaining consent, his orher signature and the date of signature.			

### PLEASE INDICATE WHICH FIEMS YOU HAVE INCLUDED WITH YOUR APPLICATION

CONSENT FORM(S) #	ASSENT FORM(S)			
REC RUIIMENT FLYER/ LETTER/ EMAIL	PARENTAL PERMISSIO N			
FORM FOR PERMISSION TO AUDIO TAPE	HIPAA RESEARCH AUIHO RIZATIO N			
FORM FOR PERMISSION TO VIDEO TAPE	DEBRIEFING SCRIPT			
INTERVIEW PROTOCOL	REC RUTIMENT/ O RALSC RIPT			
DATA TRANSFER SHEET  (FOR STUDIES INVOLVING USE OF EXISTING DATA)	SAMPLE REC ORD  (FOR STUDIES INVOLVING USE OF EXISTING DATA)			
LETIER FROM COOPERATING AGENCY or IRB APPROVAL FROM ANOTHER INSTITUTION	REFERRALS/ RESO URC E LIST  SUBJECTINFO RMATIO N C O NFIDENTIAILIY AG REEMENT			
UNA FFILIA TED INVESTIGATOR FORM				
DATA USE AG REEMENT	OTHER:			
UST HEMS:  Certify that I have read, completed and addressed all item	ns in the IRB Protocol Coversheet.			
Princ ip a l Inve stig a to r	Co-Princ ip a l Investigator Faculty Advisor			
Da te :	Da te :			
Co-Princ ip a l Investigator/Faculty Advisor	Co-Princ ip al Investigator Faculty Advisor			
Da te:	Da te :			