APPENDIX: IRB SUBMISSION FORM

St. Thomas University
16401 N.W. 37th Ave., Miami, Florida 33054

Institutional Review Board - Research Proposal Submission Form

[DO NOT WRITE IN THIS SPACE] Date Received ______________

Protocol Qualifies for: Full Review____ Expedited Review____
Exemption____

Instructions: The principal investigator or faculty supervising a student project should submit this form and research proposal (including consent forms and research instruments) to the chairperson of the University IRB committee. The IRB web page can be consulted for policy and procedures information.

A. Project Title:_____________________________________________________

__________________________

New proposal____ Continuation/Renewal_____ Revision____

Proposed Start Date_____________________________________________
Proposed Duration of Research_________________________
Performance Site(s)_____________________________________________

B. Principal Investigator____________________________________________

Faculty Project ______
Supervised Student Project ______
Class Data Collection ______

Department ___________________________________________________
Email Address _____________ Phone Number ___________________________
Co-Investigators ________________________________________________

Are there any special populations participating (children, handicapped, mentally ill etc.)

___ No

___ Yes (if YES, please describe in the attached research proposal)

Will any payment or course credit be awarded to participants?

___ No

___ Yes (if YES, please explain in attached proposal, and indicate what alternative means of obtaining course credit will be available to students who do not wish to participate)

In the attached proposal:

1. Describe the nature of the research/project being proposed
2. Explain if any physical, psychological or other risks to human participants are associated with the project, or if the project deals with “sensitive” subject matter (see IRB Guidelines)
3. Attach copy of the consent form and be sure it includes:

___ Description of project ___ Contact information

___ Statement of right to withdraw ___ Statement of risks/benefits

___ Statement of confidentiality ___ Description of any costs, credit or payments

___ Explicit statement of consent ___ Line for Signature and Date

Investigator/Faculty Supervisor Signature: ______________________________ Date: ______

Student Researcher Signature: ______________________________ Date: ______