Form C
Request for Expedited/Full Review

REQUEST FOR EXPEDITED OR FULL IRB REVIEWFOR HUMAN PARTICIPANTS RESEARCH

NAME _____ DATE _____
(Principal Investigator / Instructor)

TITLE OF RESEARCH PROJECT

BEFORE YOU MAY INITIATE ANY PHASE OF HUMAN SUBJECTS RESEARCH, THE INSTITUTIONAL REVIEW BOARD MUST REVIEW AND APPROVE A SUMMARY OF YOUR RESEARCH PROTOCOL YOUR DATA COLLECTION INSTRUMENT, AND YOUR INFORMED CONSENT FORMS. PLEASE FOLLOW THESE INSTRUCTIONS CAREFULLY.

Attach a copy of

1. A research protocol, to include:
   - setting for research (school, classroom, clinic, hospital, etc.)
   - anticipated dates of study
   - complete subject description including number, ages, adults, minors over 12, minors under 12, vulnerable populations (numbers 6, 7, 8 from Form A,) how selected or recruited
   - procedures including permissions from the site used, methods for attaining informed consent of subjects, methods for protection of anonymity or confidentiality of subjects, methods for protection from harm
   - data collection procedures including when administered, how administered, who administers
   - possible benefits and risks to subjects
   - where results will be disseminated (include on consent form)
   - where results will be kept for 3 years in locked storage
2. All consent forms (If minor, include ASSENT procedures).
3. All data collection instruments except copyrighted instruments, which require a letter giving written approval for use

I have received training on the Federal Regulations (45 CFR 46) relating to Human Subjects research and am familiar with university policies for this area of research, and I agree to abide by all pertinent regulations and policies.

I certify that all information submitted in this application for IRB approval is correct:

I have read and approve of the protocol:

Investigator / Instructor Date

Faculty Sponsor (if appropriate) Date

IRB Action: Date: _____