# RUSSELL SAGE COLLEGE INSTITUTIONAL REVIEW BOARD

# LIMITED IRB APPLICATION FOR 2021-2022

# \*\*PLEASE READ THE FOLLOWING INSTRUCTIONS PRIOR TO COMPLETING THE APPLICATION. REMOVE THESE INSTRUCTIONS PRIOR TO SUBMITTING THE APPLICATION\*\*

**Instructions for Submission of IRB Projects**

**Sage IRB Website Address:** [**https://www.sage.edu/academics/research/the-institutional-review-board/**](https://www.sage.edu/academics/research/the-institutional-review-board/)

In order to submit an application for review to the Sage IRB, please follow these steps:

1. Email the Sage IRB Chair at sageirb@sage.edu and request a new project number. To do this, please provide the chair with the following information.
	1. PPI (Primary Principal Investigator) Name, Email Address, Phone Number, Department, Campus Address

*\*\*If you are a student, remember that a faculty member is considered the Primary Principal Investigator for your project, even though you are conducting the research.*

1. There are two applications. Please read below to determine which application to submit. If, after reviewing all the relevant materials on the Sage IRB website, you are unsure which application is appropriate to your project, please send an email to the IRB chair for consultation (sageirb@sage.edu).
	1. Limited Review IRB application- If your project is considered “no risk”, you should fill out the Limited Review IRB application which can be found on our website. Definitions of No Risk research projects can be found in the IRB policy manual and on the Limited Review IRB application.
	2. *Full Review IRB application*- If your project is considered “minimal risk” or “risk”, then you **must** fill out the full review IRB application. Minimal risk projects will undergo the expedited review process. Risk projects will undergo the full board review process. If this applies to your project **STOP HERE** and fill out the Full Review IRB application available on the Sage IRB website.
2. Fill out the appropriate IRB Application**. Please read all instructions** priorto filling out the application. Remove all instructions prior to submitting the application. The application, signature page and all related appendices (Ethics certificates, agency support letters, recruitment materials, data collection materials, informed consent, etc.) should be consolidated into one document prior to submission. Please label your file with the IRB project number (For example IRB XXX-2021-2022)

IRB does not require the original hard copy of signatures to IRB. We accept scanned or electronic signatures. This does not include Typed Names without a signature. Please contact sageirb@sage.edu if there are any questions or concerns.

1. Email the completed IRB application to sageirb@sage.edu. Please put the IRB project number in the subject line: SUBMISSION IRB # XXX-2021-2022. If you do not get acknowledgment that your project has been received by the IRB within three working days (excluding weekends), you may contact the IRB by email: sageirb@sage.edu to ask about any concerns. This notification is done by the IRB Chair.

All communications about your project should be done through sageirb@sage.edu.

# HOW DO I COMPLETE THE LIMITED IRB PROJECT REVIEW APPLICATION?

The following includes an application form. It is a Word document, in table format. Do not submit attachments to answer the questions in the application. (Attachments are additional materials requested in the application form.) Simply replace the instruction text in each box in the right-hand column with your own project-specific information. Be sure to delete all instructions, including this instruction page and the instructions in the right column of the table. Material that does not fit in the blocks in the right-hand column may be included after the signature page of the application, in the same file. Please indicate in the relevant block where the material is located (e.g., “see Appendix A”).

Submit the completed application form with all required attachments (including human participants certifications, surveys, tests, consent forms, cover letters, agency permissions letters, etc.) via email to sageirb@sage.edu. This application should be submitted as one continuous document with all supplementary materials, CITI Certifications, and signature pages included as part of the application.

Once all required materials are submitted, your project will be reviewed. The chair will review each submission and assign it to reviewer(s). Projects that are deemed “risk” projects will always be asked to appear before the full IRB board at our monthly meeting. The IRB chair will send you the information at the time of submission. The IRB will approve, approve conditionally, or not approve the project. If approved conditionally, you will be asked to provide additional information to respond to the concerns identified. You may be asked to resubmit the entire application or simply respond to specific issues raised. Please submit changes by “reply” email to IRB, including your responses in a reply to the reviewers. If the IRB requests additional information, you must respond within one month or the project will be withdrawn. You may request an extension, if needed. If the project is not approved, you may request that the IRB reconsider its decision. Projects that are approved, are approved for one year only. They may continue for up to 3 years if so requested (in an annual report) and approved, after which a new application is required.

If you have questions, email the IRB Chair, Dr. Francesca Durand at: sageirb@sage.edu or contact any other IRB member. (See our website at <https://www.sage.edu/academics/sage-research-institute/the-institutional-review-board/> for names of IRB Board members.)

**FINAL REPORT/ANNUAL REPORT**

Projects judged to contain No Risk do not require a final report or an annual report (unless required by your academic department).

**Russell Sage College Institutional Review Board**

**Check Sheet for Limited Review Application Submission**

Please use the following check list to be sure your application includes all relevant documentation, as well as re-reading carefully all the instructions for submissions. Incomplete applications will not be reviewed, and will result in a delay.

An application submitted to the IRB email (sageirb@sage.edu) should contain the following in ONE document:

* + A completed application form
	+ Signatures of all researchers, including the Primary Principal Investigator, and other Principal Investigator(s), Student Investigator(s), and any Other Investigators. (Be sure that the type of investigator on your application matches the designation on the web submission site.) Electronic signatures or scanned signatures are acceptable.
	+ Certification of human participants research competency for all researchers and all others involved in collecting data or working with confidential data (issued within 5 years of the application)
	+ A cover letter or script to participants
	+ A copy of survey or interview or focus group questions (if any)
	+ Agency permission(s), including other institutions’ IRB approval (if any). (Concurrent review by other IRBs is permissible.)
	+ Participants’ informed consent form (if required). Note that only the form should be included. You must not contact participants before obtaining IRB approval, and so your application should not have their signatures.
	+ Participants’ debriefing form (if required)
* **All instructions are removed and all blue instructional text in the form is replaced with black text related to your project**.

Revised August 2021

|  |
| --- |
| **APPLICATION FOR LIMITED PROJECT REVIEW****RUSSELL SAGE COLLEGE INSTITUTIONAL REVIEW BOARD****2021-2022** |
| **IRB project number:** | [Put here the application number assigned by the IRB chair] |
| **New or revised application:** | [Indicate whether this is a new application or a revision of an earlier application. ] |
| 1. **Title of Project:**
 | [Be as specific as possible in identifying the topic under investigation.] |
| 1. **Proposed Starting Date:**
 | [Give your best estimate. Be sure to allow time for project review (1-2 weeks for limited project review)] |
| 1. **Funded By:**
 | [Who is paying for the project? The researcher, department, college, outside source, or a grant? If Not Applicable, please put self-funded or NA] |
| 1. **Co-operating Institutions**
 | [Identify any other organizations who are participating in data collection in any way. Please attach agency letter (on letterhead) as appendix] |
| 1. **No Risk Category:**
 | **Please check (or highlight) the category which identifies your study as No Risk to participants*** One-time anonymous surveys
* Confidential surveys or interviews on **non-sensitive** topics.
* Research involving interviews or observations of participants, the purpose of which is educational, and there is no intention to use the information beyond the classroom assignment.
* Educational studies in commonly accepted educational settings on educational practices, instructional techniques, curricula, classroom management.
* Benign Interventions
* Secondary Data Research Use
* Research involving the use of educational tests
* Observation of public behavior.
* Evaluation projects
* Taste and food quality evaluation or consumer acceptance studies.
* Retroactive Case Studies

**If none of these categories applies to your study, STOP HERE and fill out the FULL IRB PROJECT REVIEW APPLICATION.**  |
| 1. **Researchers conducting this study:**
 |
| 1. **Primary Principal Investigator (PPI)**
 | [Name the one Principal Investigator who is responsible for checking and submitting all documents. This person has primary responsibility for overseeing the project. It must be a faculty member, it cannot be a student]**PPI NAME; PPI Position and Department****PPI Phone Number; PPI Campus Address; PPI Email Address** |
| 1. **Other Principal Investigator(s) (PI)**
 | [In addition to the PPI, are there additional Principal Investigators? If yes, name them all here. If they are not members of the Sage Community, identification of their affiliations should be included.]**PI NAME; PI Position and Department****PI Phone Number; PI Email Address** |
| 1. **Student Investigator(s) if this is a student project**
 | [If this is a student project, name the student(s) whose project this is.For ALL students:**Student NAME; Department****Student Phone Number; Student Email Address** |
| 1. **Other personnel**
 | [Any other person who has data collecting responsibility or will be working with confidential data must be listed. } |
| 1. **CITI Human Subjects Research Certification**
 | **For each Human Subjects Research certification on file in the IRB office, put the name and date certification was obtained:****List the names and date of certification for all researchers whose Human Subjects Research certificates are being submitted with this application (those not on file):** |
| 1. **Study Information**
 |
| 1. **Description of Study:**
 | [Provide a thorough description of the research question(s) for the project being considered and the purpose of the study. Please note that reviewers will not be from your academic discipline and provide reviewers with enough context and refrain from jargon or acronyms without explanation.] |
| 1. **Participants.**
 | [Identify the potential participants in your study. Please do not provide names or identifying information to IRB. Estimate the number of participants you expect to study. Identify your potential participants ages and gender] |
| **c. Participant recruitment and remuneration** | [What sampling procedures will you use? How will participants be recruited? What compensation will they receive, if any? Compensation includes any kind of reward or enticement to participate.] |
| 1. **Cover letter or script to the participants, if any.**
 | [This letter (or script if given orally) briefly describes the project, the nature of the person’s participation, any benefits or risks, and asks for the person’s participation. If a cover letter or script is used in your research, you must attach it at the end of this form.] |
| 1. **Data Collection and Analysis**
 | [Describe the procedures involved in the collection and review of the data in sufficient detail so that the IRB can evaluate safety and risks to human participants. Attach copies of any materials (observation protocols, interview questions, surveys.) used in the study must be included in this application as an appendix. Take care to describe the nature of any interactions with the participants.] |
| 1. **COVID 19 precautions**
 | [Describe how you will address any safety protocols to make sure you and your participants are safe during COVID 19 pandemic. This must include following all current CDC guidance, state, and local requirements, and making your participants feel safe at all times. Regardless of vaccination status, if there are mask requirements where data collection is occurring, please note that you will follow the organization’s requirements. If data collection is occurring remotely, please note that and that COVID precautions are not relevant] |
| 1. **Anonymity / Confidentiality:**
 | **Is your study anonymous? ( ) yes ( ) no****If not anonymous, is your study confidential? ( ) yes ( ) no**[If the responses are to be anonymous, explain the procedure you will follow so that participants’ responses are anonymous. If the responses are NOT anonymous, explain the procedure you will follow so that the responses will held in confidence.] |
| 1. **Data Safety and Reporting:**
 | [Describe how data collected from participants will be stored (including how long data will be maintained) and in what ways will the data be shared (publications, presentations). Be specific as to the location and security of data storage, and who will have access to it. Describe when and how data will be destroyed, if that applies.] |
| 1. **Informed Consent**
 | **( ) See attached** **( ) Not applicable**  |

**Signature Page**

[No project will be reviewed without the signatures of all investigators. Each investigator must sign for himself or herself. Follow the directions on the Signature Page. The date when the page is signed must be included. If it is difficult to have all signatures on the same physical page, you may submit separate signature pages for individual researchers and compile them in your application. Signatures may be scanned versions – in other words, you must sign and then scan. You may not send a typed signature in a scripted font in place of your signature]

IRB Project Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (required)

I (we) certify that:

1. I (we) have read this completed proposal, and the information provided for this project is accurate.
2. No other procedures will be used in this project.
3. Any modifications in this project will be submitted for approval prior to use.
4. The IRB will be notified immediately of any harm or injury suffered by participants while participating in the study or of any potential or emergency problems posing additional risks to participants.
5. If required by the IRB, a final report will be filed with the IRB with 90 days of completion of the project.
6. If the project will take longer than a year to complete, the researchers will file an annual report and request a continuation before the one-year anniversary of IRB approval.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Primary Principal Investigator/Faculty Advisor Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_

Please print name legibly (Primary Principal Investigator)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Principal Investigator

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_

Please print name legibly (Principal Investigator)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of student (if student project) Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_

Please print name legibly (Student Investigator)

\* Duplicate the above lines if there are more than one Principal and/or Student Investigator.

\* Scan this signed page to submit with your IRB electronic application.

Revised August 2021

**APPENDICES (ATTACH HERE)**

Please attach all appendices. Appendices should be in the order they appear in the application. These may include:

* Additional Signature Pages (if needed)
* Data Collection Tools (e.g., Surveys, Interview Protocols, Observation Protocols, Diagrams, etc)
* CITI Certificates (or other approved Human Subjects Research training certification)
* Confidentiality and/or Informed Consent Forms
* Recruitment Materials
* Agency letters