Date Received

_____ one_____E-mail_____

Research Staff_____Phone_____E-mail_____

Mailing Address_____

Project Title:_____

Check one of the following:

Faculty Research

Graduate Student Research
Advisors

Anticipated source of funds, if any. (If th

RESEARCH PROJECT DESCRIPTION

Use lay terms and/or provide definitions of technical terminology. [Use extra pages as necessary.]

1. Briefly describe the background or justification for your research.

2. Describe your research focus (the purpose or questions to be answered).

3. Describe the research design including the use of a control group and any intervention or treatment to be administered to the subjects whether performed by the researchers or others.

4. Describe your data collection procedures in detail.
   What will the participants (and controls) be doing to create the data (e.g., filling out a survey, performing a task, etc.)?
   If the participant will need training, explain in detail. (Attach copies of any instruments, tests, surveys, interview guides, etc. and descriptions of any research data collection equipment.)

RISKS TO PARTICIPANTS

Will the human participants be placed at risk of physical, psychological, social, legal, or other harm as a consequence of participating in this research? Check (3): yes or no. If yes, answer the questions directly below.

		YES	NO
1.	Possible invasion of privacy of participant or family, including use of personal information or records?		
2.	The administration of physical stimuli other than auditory and visual stimuli associated with normal situations and levels?		
3.	Deprivation of physical or psychological requirements such as nutrition or sleep; manipulation of psychological and/or social variables, e.g., sensory deprivation, social isolation, psychological stresses, etc.		
4.	Deception as part of the experimental procedure (if the study involves the use of deception, the protocol must include a description of this fact and the a debriefing procedure which will be used upon completion of this study).		
5.	Any probing for information which an individual might consider to be personal or sensitive (sexual or illegal activities, alcohol or drug use)?		
6.	The presentation to the subjects of any materials which they might find to be offensive, threatening, or degrading?		
7.	The requirement of physical exertion beyond normal situations?		

If any of the above items are checked YES, indicate:

(1) What precautions have been taken to minimize these risks?

(2) What arrangements have been made for the care of a participant in the event of an accident or complication related to the research?

NOTE: Add this statement to the consent form if more than minimal risk of physical harm: In the case of an emergency a participant may be seen at a local or regional medical facility. All expenses associated with care will be the responsibility of the participant and his/her insurance.

CONFIDENTIALITY OF DATA:

1. Will any data be made a part of any permanent record that can be identified with the participants? If yes, explain.

2. What steps will be taken to ensure the confidentiality of the data? (How will the participant's privacy be protected?)

3. Where will the data be stored for the three (3) year minimum? Specify the precise location, preferably in a locked file cabinet with limited access by others. Please explain how the data will be destroyed after the 3 year storage limit has been satified.

CONSENT AGREEMENT CHECK LIST
If NO is checked, explain why.

PLEASE ATTACH WITH APPLICATION

Elements of Informed Consent:

	YES	NO	NA
1. States the name and the title of the research project at the top of the consent agreement.			

18. Incentives to Participate: what is offered and how to get it.

19. Reasons for Exclusion from this Study for participant's safety.

21. In Case of Injury s

APPLICATION CHECKLIST-DO NOT ATTACH WITH APPLICATION

This checklist is to help you verify the completeness of your research proposal application for HPRC review. Remember, if y

CATEGORIES OF EXEMPTION FROM FURTHER HPRC REVIEW

The HPRC retains final judgment as to whether a research study is exempt from further HPRC review.

Research activities in which the only involvement of human participants will be in one or more of the following categories are exempt from further HPRC review. The exempt status does not necessarily mean that the investigator is exempt from informed consent requirements. Please review the following information. If your research falls under one or more of these categories, fill out the exemption application forms only.

A. Research

Date Received in Office: _____ HPRC #: _____

APPLICATION FOR EXEMPTION

Exemption applies only to research with minimal risk. It does not apply to research involving prisoners, children or other vulnerable categories of subjects. Final determination as to whether a research project is exempt further review rests with the HPRC. If the project is determined to be exempt by the HPRC, the principal investigator is still required to submit any project modifications to the HPRC. The exempt status

RESEARCH CATEGORIES OF EXEMPTION FROM FURTHER HPRC REVIEW

Research activities in which the only involvement of human subjects will be in one or more of the following categories are usually exempt from further HPRC r

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PARTICIPANT INFORMATION:

Complete the following information and include with application for EXEMPTION STATUS.
Use N/A rather than leaving a blank space.

Attachments: Please check all that apply

questionnaire/survey, script, etc. to be used with participants

conse

The following pages contain temples for: informed consent agreement, informed consent cover letter, parental permission, informed assent. Please review the temples and choose the temple(s) that will be used for your project. Include a sample of informed consent form with your application to expedite HPRC review. If you need further assistance please contact the Office of Gran

Participation and Withdrawal

Your participation in this research study is voluntary. As a participant you may refuse to participate at anytime. If you decide to participate, you are free to withdraw at anytime. To withdraw from the study please contact the. . .(explain how to withdraw, whom to contact). Note: if the data are anonymous, subjects cannot withdraw after data collection has taken place.

Questions about the Research

If you have any questions about t

t

INFORMED CONSENT COVER LETTER TEMPLATE
(No signature required of participant, usually used with anonymous surveys.)

Note: One of the most common reasons for delay of HPRC approval is an inadequate informed consent. It is recommended that you follow this template, write in the 2nd person, use #12 font size and target a sixth to eighth grade reading level. Statements in bold type should be included verbatim; however they do not need

Questions about the Research
If you have any questions