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# **Form B-1: Research Review Status Self-Report**

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| --- |
| **Project Title:**       |
| **Proposal Type (Check One)** | New [ ]  | Modification [ ]  | Renewal [ ]  |
| **Anticipated Dates for Data Collection** | **Start:**       | **End:**       |  |
| **Principal Investigator:**       | **School/Division:**       |
| **Class Year (for Student Investigators):**       |
| **PI Address:**       |
| **PI Email:**       | **PI Phone:**       |
| **PI Status (Check One)** | NCWU Faculty [ ]  | NCWU Staff [ ]  | NCWU Student [ ]  |
| Not Affiliated with NCWU (please provide explanation) [ ]  | Explanation (Non-NCWU Individuals):       |
| **Name of Potential External Funding Agency (if any):**       |
| **Proposal Title (if different from above):**       |

**Review Status** (**to be completed by the Principal Investigator**):

In my judgment, the above-named research project (check one, and send electronically all required supporting documents):

Is exempt from expedited or full IRB review [ ]  (Attach Form B-2)

Qualifies for expedited IRB review [ ]  (Attach Form B-3)

Requires full IRB review [ ]  (Attach Form B-4)

I certify that the statements herein are accurate and complete. I have read the NCWU policy on human subjects research and agree: (1) to protect the rights and welfare of the human subjects participating in my research, (2) to abide by University guidelines for securing informed consent, (3) to safeguard the confidentiality of my research data, and (4) to inform the chair of the IRB should any changes in the research protocol or human subject issues arise during the course of this research.

Typed Signature of Principal Investigator:       Date:

## **Research by Students and Non-Wesleyan Individuals**

Any human subjects research project conducted by a NCWU student or an individual who is not affiliated with NCWU must be **sponsored** by a qualified member of the Wesleyan faculty or staff.

**To be completed by Sponsor:**

|  |
| --- |
| **NCWU Faculty Sponsor:**       |
| **Sponsor Address:**       |
| **Sponsor NCWU Email:**       | **Sponsor Phone:**       |

I have reviewed this application and will oversee this research in its entirety. In my judgment, the above-named research project:

Is exempt from expedited or full IRB review [ ]

Qualifies for expedited IRB review [ ]

Requires full IRB review [ ]

Typed Signature of Sponsor:       Date:

**NOTE:**  The Sponsor and the Principal Investigator MUST agree as to the research review status of the project BEFORE it is forwarded to the IRB Chair. This form must be emailed to the IRB Chair directly by the PI with the faculty sponsor (if applicable) copied on all correspondence.

# **Please email this signed form to the IRB Chair (Contact Information Provided on My.NCWU)**