**APPLICATION FOR EXEMPTION**

**\*\*\*\* Please be sure your project is eligible for Exemption before using this form \*\*\*\***

Visit <http://www.udayton.edu/research/compliance/irb/apply/index.php>

**Please read the instructions carefully, answer the questions completely, and direct all QUESTIONS and submit all Application Materials Electronically to** [**IRB@UDayton.edu**](mailto:IRB@UDayton.edu)**.**

**1a. Date of Submission:**

**1b. PRIMARY INVESTIGATOR INFORMATION**

Name:

Department:

Email (**PLEASE USE UDAYTON.EDU ADDRESS**):

Position in University (if student, must indicate faculty sponsor):

Faculty Sponsor Name:

Faculty Sponsor Department:

Faculty Sponsor Email:

**2. PROJECT TITLE:**

**3. PROJECT TIME FRAME** – Start Date: End Date:

**4. PROJECT EVALUATION** - Please **Check** ALL of the following that apply.

Target Populations Include:

Athletes

Children 0-12 (Parental Consent required)

Children 13-18 (Parental Consent required)

Developmentally disabled

Elderly

Mentally ill

Military personnel

Persons convicted of a crime or on parole

Persons over the age of 18 ONLY

Persons with English as a second language

Physically impaired

Pregnant women

Teachers

UD staff

UD students

College Students (non-UD)

Victims of crime

Compensation

Participants will receive an incentive or reimbursement of expenses

No incentives or reimbursement will be given

Site of Data Collection:

Classroom

Health care facility

Public place

Off-campus

Military or government-operated installation

Non-UD campus

UD campus

Other – Specify:

Reason for Research:

Faculty/Staff research

Undergraduate research  Graduate research

Type of Data Collected/Method of Storage:

Archives

Audio-recordings will be made (must be noted in consent document!)

Collection of existing data or records

Data will be collected anonymously

Data will be kept confidential

Pseudonyms will be used

Data will be stored anonymously

Medical records will be used (may need HIPAA releases and training)

Photographs will be taken (must be noted in consent document!)

Publicly available data

Specimens or data collected for non-research purposes

Participant data will be stored with participant’s identity

Video recordings will be made (must be noted in consent document!)

Instrument/Method of Data Collection:

Deception will be used

Focus groups

Includes follow-up contact with participants

Interviews – e-mail/text/on-line

Interviews – face to face

Interviews -- telephone

Non-UD personnel will collect data

Observation of public behavior

Psychological tests

Cognitive Performance Tests

Physical Performance/Endurance Tests

Research on established educational practices

Surveys – anonymous paper

Surveys – online

Educational or aptitude tests

Physiological devices or sensors

Does Your Research Involve Any of the Following Topics?

Alcohol use

Drug use

Emotional stress

Illegal activities

Sexual habits

Sexual orientation

**5.** **PROJECT STAFF**

*Please list personnel, including students, who will be working on this protocol (insert additional rows as needed). This includes anyone who interacts with participants or handles non-anonymous data.*

|  |
| --- |
| **Name, Title & Degree** |
| 1. |
| 2. |
| 3. |

**6. RESEARCH ABSTRACT** - In 2 to 3 sentences using **LAY language**, describe the aims of this project. Response:

**7. RESEARCH QUESTION** – In 1 to 2 sentences, describe the question you hope to answer. Response:

**8. STUDY POPULATION AND RECRUITMENT** - Describe the following: inclusion and/or exclusion criteria to be used, how many participants, how will you recruit participants, attach electronic copies of advertisements/brochures/scripts you will use for recruitment. Response:

**9. PROCEDURES/METHODS** - Describe procedures involving human participants for this protocol. Include electronic copies (if possible) of all surveys and outcome measures used. Response:

**10. RISKS** - Describe the risks to participants. Risks listed here should be included in the consent document. What steps will be taken to minimize risks? Response:

**11. CONFIDENTIALITY/DATA MANAGEMENT** - How will data and responses be managed, stored, protected, and reported? Will participant confidentiality be protected? Will participants be audio-recorded, photographed, video-recorded during this study? (Please note this in the consent doucment.) Response:

**12. COMPENSATION -** Will participants be compensated for participation? If so, please include details. \*\*Please review the IRB Guidance on Human Research Incentives.\*\*Describe how compensation will be administered and amounts to be given. Describe how recordkeeping will be handled and identify the source of funds. Response:

**13. ATTACHMENTS/APPENDICES.** These can be sent by e-mail to [IRB@udayton.edu](mailto:IRB@udayton.edu). (Check all that apply)

Consent forms will be used and are attached for review (Use UD consent form template; for anonymous surveys, use *Invitation to Participate* template only).

Consent forms will not be used (**Must justify request for waiver**).

Advertisements used to recruit participants (e-mail, brochure, fliers, etc.)

Survey or questionnaire to be used in this research.

**14. OTHER APPROVALS** - **CHECK** ALL that apply and submit copies with application

Has this protocol been submitted to any other IRBs? If so, please list along with protocol title, number, and expiration date.

If you will be collecting data OFF-CAMPUS, you must provide documentation of approval by a site administrator (e.g., school principal). **This can be sent by e-mail to** [**IRB@udayton.edu**](mailto:IRB@udayton.edu).

If you are a STUDENT, you must provide documentation that your faculty advisor (1) has read your IRB application, and (2) approves of the research as proposed. **This can be sent by e-mail by the faculty advisor to** [**IRB@udayton.edu**](mailto:IRB@udayton.edu)**.**

**15. IS THIS PROJECT EXTERNALLY FUNDED?** (Please indicate the funding source.) Response:

IMPORTANT NOTE: PLEASE LOOK OVER SECTIONS 13 AND 14 AGAIN TO BE SURE YOU HAVE ALL OF THE PARTS OF THE APPLICATION SUBMITTED. **INCOMPLETE APPLICATIONS CANNOT BE REVIEWED.**