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| wvc | **Institutional Review Board**  **Request for Review and Approval Form** |

In accordance with WVC policy 1000.250, protection of human subjects, the WVC Institutional Review Board must approve all research activity at Wenatchee Valley College (WVC) involving human subjects. Individuals who desire to conduct research of any kind within the context of the institution, including involvement of WVC students, employees, or facilities, must receive approval from the institutional review board before initiating a project. To ensure adequate time for review, requests should be submitted with complete documentation at least six weeks prior to the intended start of the research.

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| Date Submitted: | Title of Research Project: | | |
| Principal Investigator/Project Director: | Department: | Phone: | E-mail: |
| Co-Investigator/Student Investigator: | Department: | Phone: | E-mail: |
| Co-Investigator/Student Investigator: | Department: | Phone: | E-mail: |

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| Other organizations involved in this project, if any: |

**REQUEST FOR EXEMPTION:** (if applicable)

**❑** I have reviewed the criteria in WVC procedure 1000.250, Part D, and believe that this project qualifies for exemption from review under one or more of the stated criteria.

In the box below, please explain why the project should be exempt from review.

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**REQUEST FOR DEFERMENT TO PRIOR REVIEW:** (if applicable)

**❑** I have reviewed the criteria in WVC procedure 1000.250, Part E, and ask that WVC’s IRB defer its review to the review of a prior institution’s IRB.

In the box below, please explain why the project’s review be deterred to a prior institution’s IRB review. Remember to include documentation of prior Institution’s IRB review.

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**For all projects:** Please answer the questions below and attach the following required documentation:

1. A brief statement describing the intent/purpose of the research project and the question under investigation.

2. A description of the intended participants in the research (employees; students; specific programs or courses, etc.).

3. A copy of the informed consent information to be provided to participants.

4. A copy of any advertisements or recruiting materials and/or a description of participation incentives to be offered (if any).

5. A statement describing how confidentiality of data will be maintained, if personal information is to be collected. Also outline steps to be taken to provide for the anonymity of non-personal information.

6. A copy of the instrument/s to be used, or a summary of the research procedures as experienced by the participants.

7. If the investigator is a WVC faculty or staff member, a statement of support from the appropriate administrator/supervisor; if a WVC student, a statement of support from the supervising faculty member. Faculty/staff statements should address workload and/or release time if applicable.

8. Evidence that the principal investigator(s) have completed training in the protection of human research participants that addresses principles of ethical research and federal regulations

9. Copies of approvals obtained through other organizations, like federal departments, grant offices, theses/dissertation committees, institutional review boards, etc.

**Submit completed packets to:**

R. Ty Jones, Executive Director of Institutional Effectiveness, electronically at [tjones@wvc.edu](mailto:tjones@wvc.edu) or by mail to 1300 Fifth St., Wenatchee WA 98801.

**This project involves Wenatchee Valley College:**

Students ❑ Yes ❑ No

Employees ❑ Yes ❑ No

**Human subjects from the following populations will be involved in this study:**

❑ Minors ❑ High school students (includes Running Start)

❑ Mentally disabled ❑ Pregnant women

❑ Elderly ❑ None of the above

Total number of participants anticipated: \_\_\_\_\_\_\_\_\_\_

**Required agreements:**

❑ I hereby acknowledge that I have read WVC Policy 1000.250 regarding “Protection of Human Subjects.”

❑ I agree to comply fully with WVC policy 000.250 in conducting my project, including maximizing benefits and minimizing risk to each participant (minimizing risk includes keeping responses confidential and not asking respondents to disclose anything that could put them at risk for criminal or civil liability, or anything that could be damaging to their financial standing, employability, reputation, or wellbeing).

❑ I agree to notify the institutional review board in writing of any changes to the scope or methodology of the project ***prior*** to implementation of said changes.

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| Principal Investigator Signature: | Date: | Co-Investigator/Student Signature: | Date: |
| Signature of IRB Chair: | | | Date: |
| **IRB Chair:** (check appropriate box)  ❑ Exempt from review  ❑ Defered to prior institution’s IRB review❑ Approved  ❑ Approved with restrictions/modifications (attached)  ❑ Tabled for resubmission with requested information or changes (attached)  ❑ Disapproved | | | |

Rev: 6/2019