**Human Subjects Review Application**

Institutional Review Board | Ouachita Baptist University

*Email completed application and other required documents to Jeanie Curry, IRB Chair, at curryj@obu.edu*

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Application Date** | |  | | | | **Project Number** | (assigned by the IRB) | |
|  | | | | | | | | |
| **Project Title** | |  | | | | | | |
|  | | | | | | | | |
| **Project Investigators** | | Principle Investigator | | | |  | | |
|  | | Status (*faculty, staff,* or *student*) | | | |  | | |
|  | | Department or Program | | | |  | | |
|  | | School or Administrative Office | | | |  | | |
|  | | Course Name | | | |  | | |
|  | | E-mail Address | | | |  | | |
|  | | Mobile Phone Number | | | |  | | |
|  | | Street Address or Box Number | | | |  | | |
|  | | City, State and Zip Code | | | |  | | |
|  | | | | | | | | |
|  | | Associate Investigator | | | |  | | |
|  | | Status (*faculty, staff,* or *student*) | | | |  | | |
|  | | | | | | | | |  |
|  | | Associate Investigator | | | |  | | |
|  | | Status (*faculty, staff,* or *student*) | | | |  | | |
|  | | | | | | | | |  |
|  | | Associate Investigator | | | |  | | |
|  | | Status (*faculty, staff,* or *student*) | | | |  | | |
|  | | | | | | | | |  |
|  | | Associate Investigator | | | |  | | |
|  | | Status (*faculty, staff,* or *student*) | | | |  | | |
|  | | | | | | | | |
| **Estimated Number of Participants** | | |  | | |  | | |
|  | | | | | | | | |
| **Proposed Project Classification** | | | Exempt | | | Non-Exempt | | |
| **Funding Agencies and/or Research Sponsors** | | | | | | | | |
| Name | | | |  | | | | |
| Street Address or Box Number | | | |  | | | | |
| City, State and Zip Code | | | |  | | | | |
| Phone Number | | | |  | | | | |
|  | | | | | | | | |
| Name | | | |  | | | | |
| Street Address or Box Number | | | |  | | | | |
| City, State and Zip Code | | | |  | | | | |
| Phone Number | | | |  | | | | |
|  | | | | | | | | |
| Name | | | |  | | | | |
| Street Address or Box Number | | | |  | | | | |
| City, State and Zip Code | | | |  | | | | |
| Phone Number | | | |  | | | | |
|  | | | | | | | | |
| **Submission Status** | | | | New Project | | | | |
|  | | | | Renewal or Continuation | | | | |
|  | | | | Change in Procedure for Previously Approved Project | | | | |
|  | | | | Annual Review | | | | |
|  | | | | Re-Submission | | | | |
| **Purpose of Study** | | | | | | | | |
|  | | | | | | | | |
| **Dates of Study** | | | | | | | | |
|  | | | | | | | | |
| **Location of Study** | | | | | | | | |
|  | | | | | | | | |
| **Subjects** | | | | | | | | |
| Method of Recruitment and Selection | | | | | | | | |
|  | | | | | | | | |
| Age Range | | | |  | | | | |
| Gender(s) | | | |  | | | | |
| Investigator’s Relationship to Subjects | | | |  | | | | |
| Compensation | | | |  | | | | |
|  | | | | | | | | |
| **Study Procedure** | | | | | | | | |
|  | | | | | | | | |
|  | | | | | | | | |
| **Data Assessment Instrument(s)** | | | | | | | | |
| Please email a copy of the study’s data assessment instrument(s) along with this completed application. | | | | | | | | |
| **Required Statements** | | | | | | | | |
| Benefits to Individuals, Universities, and Humanity | | | | | | | | |
|  | | | | | | | | |
| Risks to Subjects | | | | | | | | |
|  | | | | | | | | |
| Procedure for Minimizing Risks to Subjects | | | | | | | | |
|  | | | | | | | | |
| Procedures for Maintaining Confidentiality of Data | | | | | | | | |
|  | | | | | | | | |
| Procedure for Final Disposition of Data | | | | | | | | |
|  | | | | | | | | |
| Conflict of Interest | | | | | | | | |
|  | | | | | | | | |
| **Authorization** | | | | | | | | |
| Please email a copy of the following along with this completed application: | | | | | | | | |
| * Studies involving subjects under the age of 18 require a *Parental Permission Form* and a *Minors’ Assent Form*. * Studies involving subjects age 18 and up require an *Informed Consent Agreement Form*. | | | | | | | | |
|  | | | | | | | | |
| **Action of the Institutional Review Board** | | | | | | | | |
| Approve | Approve with Minor Revisions | | | | Defer for Revisions | | | Disapprove |