# Application for IRB Review

# Institutional Review Board

# American University of Central Asia

*This form is required for both Full Review and Exempt from Full Review applications*

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| Indicate clearly with an “X” next to the application category you are applying for:  **Exempt from Full Review**  **Expedited Review Full Board Review** |

1. **Contact information**

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| --- | --- | --- | --- |
| Name of Principal Investigator: |  | | |
| Email: |  | Division: |  |
| Phone: |  | Program: |  |
| Institution/University: |  | | |

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| --- | --- | --- | --- |
| Name of Co- Investigator (if applicable): |  | | |
| Email: |  | Division: |  |
| Phone: |  | Program: |  |
| Institution/University: |  | | |

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| --- | --- | --- | --- |
| Name of Co- Investigator (if applicable): |  | | |
| Email: |  | Division: |  |
| Phone: |  | Program: |  |
| Institution/University: |  | | |

*If there are more than two co-investigators, copy and insert an identical table.*

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| --- | --- | --- | --- |
| Name of Supervising Faculty (to be filled only for students research thesis/projects): |  | | |
| Email: |  | Division: |  |
| Phone: |  | Program: |  |
| Institution/University: |  | | |

1. **Project Information**

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| --- | --- | --- |
| Title: | | |
| Expected date of research project completion: | dd/mm/yyyy | |
| Is the proposed research project going to be conducted at an institution or a university other than AUCA? | Yes | No |
| If yes, has the research been reviewed by that institution or university’s IRB? | Yes | No |
| If yes, please attach the IRB review results to your application. | | |

1. **Purpose**

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| Describe the purpose of the study (no more than 300 words including references): |

1. **Sponsor of the study:**

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| Provide the information about sponsors of the study: |

1. **Target Participants**

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| --- | --- | --- | --- | --- | --- |
| Total number of participants: \_\_\_\_\_\_\_\_\_\_\_ | | Females: \_\_\_\_\_\_\_\_\_ | Males: \_\_\_\_\_\_\_\_ | | |
| Use of existing/archival data *(strikethrough where inapplicable)* | | | | Yes | No |
| Categories of participants  *(check the appropriate box where applicable)* | | | | | |
| Age Group | Infants (0-2 years) | | | |  |
| Preschool (3-5 years) | | | |  |
| Mid-Childhood (6-12 years) | | | |  |
| Adolescents (13-17 years) | | | |  |
| Adults (18 years and over) | | | |  |
| Vulnerable Population | Children (under 18 years old) | | | |  |
| Prisoners | | | |  |
| Veterans | | | |  |
| Pregnant women | | | |  |
| Neonates | | | |  |
| Fetuses | | | |  |
| Cognitively impaired persons | | | |  |
| Economically/educationally disadvantaged  persons | | | |  |
| Students | | | |  |
| Staff | | | |  |
| Faculty | | | |  |
| Other | | | |  |

1. **Subject Selection Criteria**

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| ***Describe the sampling procedure(s) employed. Explain the scientific and ethical reasons for selection of the participants.*** |

1. **Vulnerable population**

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| ***Provide justification for use of any special or vulnerable subject population. Please be informed that the use of vulnerable subject populations should be justified scientifically and based on the previous literature. Use of vulnerable population should be non-avoidable to attain the scientific goals that your study is posing.*** |

1. **Procedures**

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| ***Describe in detail the procedures to be used on human participants. State what language(s) will be used to interact and collect information from participants. Describe how you will advertise your study on campus and outside of it, where and how you will approach your participants, at what point you are going to provide the participants with the consent form(s), what type(s) of the consent form(s) you are going to use (oral, written, assent etc.), what premises (rooms etc.) you will use, who will collect data (you personally or your assistants, their education and gender etc.), how you will distribute the materials (paper or electronic questionnaires etc. ). If your protocol includes concealing any information from the participants, please disclose, justify and describe.*** |

1. **Risks**

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| ***Describe any potential risks for human participants and the procedures that will be taken against or for minimizing them. Risks include potential social, financial, stigmatization, economic, age-related, health-related, emotional consequences of participation in the study, risk of one’s private information made known to other people or general public, and more.*** |

1. **Compensation**

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| ***Indicate if the participants will receive any compensation or token gifts. Note that compensation does not include any long terms effect of the study or the knowledge it might produce, only immediate monetary or equivalent compensation.*** |

1. **Confidentiality**

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| ***Please describe how the obtained data will be stored and what procedures will be taken to protect the confidentiality and right to privacy of human participants in your study. Be specific and describe how researchers will make sure participants’ data is not made known to third persons during interviews and surveys, how participants’ identifying information is kept anonymous if it is stated by the research design, and how and where collected identifying information will be stored after its collected (on which computer, if protected by passwords or not, who can have access to the computer, whether it will be locked if stored in paper format in someone’s desk, etc.). In case of participants’ data made public, a separate consent should be obtained for each type of publication or form of data usage.*** |

1. **Consent/Assent Process**

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| ***Be specific and describe in detail the process of providing information to the participant, or the process of obtaining the informed consent. Explain at which point of the procedure and in which format the consent will be provided (before enrollment into the study, right before taking the survey, whether in written or oral form, etc.), whether the participants will have a chance to save a copy of the consent form, whether they will need to sign the form, whether they need to do so with their real signature and name. In cases of collecting data from underaged persons, describe the assent process in addition to consent process.***  ***In case of participants’ data made public, a separate consent should be obtained for each type of publication or form of data usage.***  ***Please note that concealing of any information about your study from your participants should be well justified, and in cases of justified concealing debriefing procedure should be used and described. In case of debriefing describe the debriefing process.*** |

1. **Benefits**

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| ***Describe any potential benefits the participants/community/society/research field will receive from this research project. If you do not think that there are tangible or material benefits from the results of your research, you may state “No Expected Benefits”. Note: Benefits do not refer to monetary or non-monetary compensation participants will receive from the participation.*** |

1. **Supplementary documents (please check with an “X” in the appropriate box)**

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| --- | --- |
| Informed consent form |  |
| Informed consent waiver form |  |
| Copies of surveys, questionnaires, advertisement, etc. |  |
| Others |  |

1. **Signature**

Principal Investigator’s Name and Signature\* Date

Co-Investigator Name and Signature\* (if applicable) Date

Co-Investigator Name and Signature\* (if applicable) Date

*If there are more than two co-investigators, copy and insert new lines to provide their name, signature, and corresponding date.*

*\*Scanned images of signature may be admissible.*

1. **Undertaking by Supervising Faculty** (only applicable for student thesis or research projects)

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| By stating my name and signing below. I acknowledge I am the Supervising Faculty of the Principal Investigator of this application. I recognize the duties of the Supervising Faculty include, but are not limited to the following five points.   1. I will be the point of contact between the investigators and AUCA IRB for matters pertaining to this project. 2. I will be responsible for ensuring the ethical research conduct of the investigators in this project. 3. I will actively monitor the progress of the research project and immediately report any adverse events should they occur as a result of the research project. 4. I will submit a Final Report upon project completion if this project is approved under a full review.     Supervising Faculty Name and Signature\* Date  *\*Scanned images of signature may be admissible.* |