**Translation Certificate Form**

**Institutional Review Board**

**American University of Central Asia**

The Principal Investigator retains the overall responsibility for ensuring that every human subject in the study provides informed consent for participation in research and that the rights and welfare of all subjects are protected. For this reason, when the study is conducted in **languages other than English, Russian, or Kyrgyz**, the Principal Investigator must arrange for the translation of the consent form(s) and other documents, such as questionnaire, interview scripts, debriefing form, and recruitment ads into the language(s) the study will be conducted in. The translation must be performed by a competent translator and it is the responsibility of the Principal Investigator to provide the information to the IRB that the translation is performed by such competent translator.

This form must be completed and attached to the application with the accompanying the translated documents. Insufficient supporting information on the competency of the translator or incomplete information may result in reviewers rejecting or deferring decision. IRB may randomly send selected samples of translation to independent translators to assess the equivalence of the information across the various language versions of the submitted documents. Should non-equivalence of translated documents be detected, IRB may retract any approval given for the research project and commence non-compliance proceedings against the Principal Investigator.

|  |  |
| --- | --- |
| Research Project Title |  |
| IRB Application Number |  |
| Approval Expiration Date |  |
| Principal Investigator | Name:  Email: |
| Supervising Faculty  (fill only for student research project/thesis) | Name:  Email: |

**SECTION A: DOCUMENTS AND LANGUAGES**

What documents or information will be translated? Into what languages (other than Russian or Kyrgyz) will they be translated into? Please ensure the translated documents are attached when submitting your application.

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**SECTION B: TRANSLATOR QUALIFICATIONS AND/OR EXPERIENCE**

|  |  |
| --- | --- |
| Language Translated Into |  |
| Language Translated From |  |
| Name of Translator |  |
| Email of Translator |  |
| Contact No. of Translator |  |
| Certified Translator? | Yes / No |
| If Yes, State Name of Certifying Organization |  |
| If No, Provide Evidence of Language Proficiency of the base language and the language the documents will be translated into.  (e.g., it is my native language, I have X number of years of education and training in this foreign language, or other evidence of dual language fluency.) |  |

*Should more than one language is translated into (e.g., Japanese and Uzbek), copy the table in section B and fill-up accordingly.*

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| By stating my name and signing below. I declare that I am responsible for the accuracy of the translation and confirm that all translated materials related to this study reflect the intent and spirit of the English text of the materials submitted.    Principal Investigator’s Name and Signature\* Date    Co-Investigator Name and Signature\* (if applicable) Date    Co-Investigator Name and Signature\* (if applicable) Date    Supervising Faculty Name and Signature\* (if applicable) Date  *If there are more than co-investigators, copy and insert new lines to provide their name, signature, and corresponding date.*  *\*Scanned images of signature may be admissible.* |