Full Board Review Form

Macomb Community College

Institutional Review Board

___/___/____
Date Submitted

_____
IRB File Number

_____
Title of Research Project

_____
Principal Investigator/Project Director **Department** **Phone Extension** **Email address**

_____
Co-investigator/Student Investigator **Department** **Phone Extension** **Email address**

Anticipated Funding Source: _____

Projected Duration of Research: _____ **(months)** **Projected Starting Date:** _____

Other education institutions, organizations or agencies, if any, involved in the study: _____

Please answer all questions (Items I – VII) below and return with this form, along with the following documents:

- All brochures, advertisements or recruitment materials to be given to subjects.
- A copy of the completed Informed Consent Form Checklist.
- A copy of the Informed Consent form that will be provided to all participants.
- If the research is associated with a grant, include the complete grant application.

I. Project Description:

A. Project Status:

☐ New project
☐ Revision to previously approved or conditionally approved project

B. This project involves college students

☐ Yes ☐ No

C. This project is part of an evaluation of a state or federal grant. (Attach grant to application)

☐ Yes, Grant Name: _____ ☐ No

D. Human subjects from the following populations will be involved in this study. (Check all that apply)

☐ Minors ☐ Prisoners ☐ Cognitively Impaired ☐ None of the above

E. Total number of subjects to be studied (estimate, if exact count is not known): _____

F. The study involves deception (leading subjects to have false assumptions or beliefs).

☐ Yes ☐ No

G. Publication of this research is intended.

☐ Yes ☐ No

H. Check each of the following that will be included in your research:

☐ Research on regular and special-education instructional strategies, curricula, or classroom management methods.

☐ Test, survey, or observational research in which the subject *cannot be identified,* either directly, or indirectly, with their responses or information recorded about them.

☐ Test, survey, or observational research in which the subject *can be identified,* with their responses or information recorded about them.

☐ Survey or observational research in which the subject's responses or behaviors, if they become known outside the research, could reasonably place the subject at risk of criminal or civil liability or be damaging to the subject's financial standing, employability or educational advancement.

☐ Survey or observational research that deals with sensitive aspects of the subject's own behavior, such as illegal conduct, drug use, alcohol use, or sexual behavior.

☐ Research involving the collection or study of existing data, documents, records, or biomedical specimens, which *are not publicly available,* OR from which the information is recorded by the investigator in such a manner that subjects *can be identified.*

☐ Research on identifiable private information for secondary research, meaning research on materials originally obtained for non-research purposes or for research other than the current research proposal.

☐ Research involving physical exercise or exertion by the subjects.

☐ Research that will involve manipulating the subject's behavior in a way that could be physically or mentally stressful to them.

☐ Research involving noninvasive procedures routinely used in clinical practice.

☐ Research involving voice and/or video recordings.

☐ Research involving questionnaires or interviews, including focus groups.

☐ Research involving inducements or incentives to participate.

☐ Research involving test(s) not normally used in educational or clinical settings.
Specify test: _____

II. Project Abstract and Purpose - Include a description of all experimental methods to be used, research design and program activities. Describe the measures or observations that will be taken in the study. If any questionnaires, tests or other instruments are to be used include a brief description and a copy of such instrument(s).

III. Description of Protocol - Who will be the research subjects? How will they be solicited or contacted? Include any recruitment letters or other recruitment materials with this document. How much time will be required of each subject? Describe all procedures to which humans will be subjected.

IV. Description of Precautions - What steps will be taken to insure that each subject's participation is voluntary? What, if any, inducements/incentives will be offered to the subjects for their participation?

V. Risks and Benefits - What are reasonably foreseeable risks or discomforts which can result from a subject's participation in the study? For example: 1) a study about use of illegal substances could place a participant at risk of criminal liability if his information were made public; 2) research about a participant's work-related behaviors could risk her future employability if identifiable data about her were published; 3) studies that delve into a traumatic event in a subject's life could have a risk of psychological harm.

V. Confidentiality of Data - Describe the methods to be used to ensure the confidentiality of data obtained, including plans for publication, disposition, secure data storage, and destruction of data, etc.

VII. Consent - Attach a copy of all consent forms to be signed by the subjects and/or any statements to be read to the subject.

Principal Investigator Assurance:

I certify that the protocols described in this application are complete and accurate and are consistent with applicable protocols submitted to external funding agencies. All activities will be performed in accordance with Macomb Community College policies/procedures, as well as state, and federal regulations. The protocol as approved by the Macomb Institutional Review Board will be followed during the period covered by this research project. Any future additions or changes to the research project will be submitted to the IRB for review and approval prior to implementation, except in case of immediate hazard to subjects. No activities involving the use of human subjects will be initiated without prior review and approval by the Macomb Institutional Review Board. Any problems connected with the use of human subjects once the project has begun will be communicated to the IRB Chair. The principal investigator is responsible for retaining informed consent documents for a period of three years after the project ends.

_____ __/___/__ _____ __/____/__
Principal Investigator/Project Director Date Co-Investigator/Student (if applicable) Date

If this is a Student Project:

_____	_____	__/___/__	_____
Supervising Faculty (Print Name)	Faculty Signature	Date	Course Name/Number

Submit this completed, signed form in hard copy OR electronically to the IRB Chair, Deirdre Syms, symsd@macomb.edu, Office of Institutional Research.

Disposition: You will be notified of the IRB's decision regarding your proposed research. Disposition may be *Approved, Approved with Restrictions, Further Review, or Disapproved*. You may not begin the project until you receive notification of the IRB's approval.

If the IRB requires modifications in the project prior to approval, the IRB will notify the PI who can make the modifications and resubmit the application for final approval.

Signature of IRB Chair:				**Date:**__/__/__
IRB Chair: Check one:	☐ **Approved**	☐ **Approved with Restrictions**	☐ **Tabled**	☐ **Disapproved**