**Institutional Review Board**

Research Protocol  
Involving Human Participants

When completed, please email this form to the Chair of the IRB.   
(As of March 2019, Dr. Jessica Alexander, jalexander@centenary.edu).

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| --- | --- | --- | --- | --- | --- | --- | --- |
| **Project Title:** | | |  | | | | |
| **Principal Investigator:** | | |  | | | | |
| **(for student projects)**  **Staff/Faculty Supervisor:** | | |  | | | | |
| **Research Collaborators  (individuals and/or institutions):** | | |  | | | | |
| **Date you hope to begin data collection:** | | |  | | | | |
| **Date you expect to complete the project:** | | |  | | | | |
| **Do you need evidence of IRB approval for some outside agency?  If yes, what is the deadline?** | | |  | | | | |
| **Briefly explain the purpose of the project** | | | | | | | |
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| **Does your project involve any of the following procedures?** (indicate Y or N for each item) | | | | | | | |
|  | Deception or Incomplete Disclosure | Deception occurs when participants are deliberately given false information about some aspect of the research; incomplete disclosure occurs when participants are not given information about the real purpose or nature of the research | | | | | |
|  | Use of Minors | Research involving persons under the age of 18 | | | | | |
|  | More than minimal risk | Research in which the probability and magnitude of anticipated physical, psychological, or social harm or discomfort are greater than those ordinarily encountered in daily life | | | | | |
|  | Medical Procedures | Research using any type of medical procedure—collection of physiological specimens (fluid, biopsies, etc.), administration of drugs or placebos, etc. | | | | | |
| **Research Participants & Recruitment** | | | | | | | |
| **Who do you intend to recruit to participate in your project?**  **Mark all options that apply.** | | |  | Centenary Students  (please note, researchers are responsible for ensuring that all student participants are over 18 years old) | | |
|  | Centenary Faculty and/or Staff | | |
|  | Off-Campus: Children, age range | |  |
|  | Off-Campus: Adults, age range | |  |
|  | Off-Campus: Individuals with disabilities; cognitive, emotional, or physical | | |
|  | Other, please explain: |  | |
| **Approximate Number of Participants:** | | |  | | | | |
| **Does your project have any sex or gender requirements in participant recruitment? If yes, explain.** | | |  | | | | |
| **Does your project have any ethnic or racial requirements in participant recruitment? If yes, explain.** | | |  | | | | |
| **Explain below how you intend to recruit participants to participate in this project. Be sure to indicate whether participation is voluntary, and what, if any, inducement or payment will be involved.** | | | | | | | |
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| **Research Participant Protection** (include consent form as an attachment in your email to the IRB Chair) | | | | | | | |
| **Explain how participants will be informed of procedures, intent of study, and potential risks to them. What steps will be taken to allow participants to withdraw at any time without prejudice?** | | | | | | | |
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| **Explain how the privacy of participants will be maintained and confidentiality guaranteed.** | | | | | | | |
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| **Explain the potential risks and anticipated benefits to participants. What kinds of social, emotional, intellectual, or physical risks might participants be exposed to? What kinds of benefits are participants expected to receive from participation?** | | | | | | | |
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| ***If your project involves Deception or Incomplete Disclosure*, explain why the deception is necessary, whether the deception is likely to cause psychological discomfort (i.e., stress, loss of self-esteem, embarrassment) during or after the deception and how you will minimize this discomfort, and how participants will be debriefed (by whom, when). Be sure to include a Debriefing Statement in your documents submitted to the IRB Chair.** | | | | | | | |
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| **Research Methodology & Procedure** | | | | | | | |
| **Explain, in as much detail as necessary for the IRB to understand your project, what you will be doing in this study. A non-exhaustive list of issues to consider: What will participants be asked to do? Where will the study take place? What kinds of information will you record about your participants? What kinds of experimental manipulations does your project use? Please include all surveys, questionnaires, etc. that will be given to research participants. You may include them either at the end of this document or as attachments to your email to the IRB Chair.** | | | | | | | |
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When completed, please email this form and any necessary attachments to the Chair of the IRB.   
Do not forget to include your consent form and any other documents given to participants.  
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