Tarrant County College District Institutional Review Board Full IRB Research Form*

Date:			
Research Proposal Title:			
Principal Investigator:			
Department:			
Phone:		Email address:	
Co-Investigator:			
Department:			
Phone:		Email address:	
Anticipated Funding Source:			
Projected Duration of Research:	months		
Proposed Projected Starting Date:			

Other organizations and/or agencies, if any, involved in the study:

Please answer the questions below and return this form with the following items, a
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(a) memo	that briefly	y describes	the i	intent	of the	proje	ect,
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- (b) completed copy of the Informed Consent Form Checklist,
- (c) copy of the Informed Consent Form that will be provided to the participants and
- (d) a brief description and copy of survey instrument (if applicable).

I. Project Information	I. Pro	iect	Inform	ation
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a. This project involves Tarrant County College District students:
Yes No
b. Human Subjects from the following populations will be involved in this study:
c. Total number of subjects to be studied:
II. Abstract Describing Project and Purpose (Include a description of research design to be used,

including program activities and what measures or observations will be used in the study.)

III. 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 procedures to which humans will be subjected – use additional pages if necessary.)

IV. Precautions (What steps will be taken to insure that each subject's participation is voluntary? What, if any, incentives will be offered to the subjects for their participation?)
V. Confidentiality of data (Describe the methods to be used to ensure the confidentiality of data obtained, including plans for publication, disposition or 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.)

RESPONSIBILITIES OF THE PRINCIPAL INVESTIGATOR:

- (a) Any additions or changes in procedures in the protocol will be submitted to the IRB for written approval prior to changes being implemented.
- (b) Any problems connected with the use of human subjects once the project has begun must be communicated to the IRB Chair.
- (c) The Principal Investigator is responsible for retaining informed consent documents for a period of three years after the project.
- (d) The Principal Investigator shall notify the TCCD IRB chairperson when the research proposal has been approved or modified by another institution's IRB.
- (e) The Principal Investigator will provide a copy of the final research results to TCCD's IRB and complete the IRB's Research Closure Form.

Principal Investigator Signature and Date:

Co-Investigator Signature and Date (if appropriate):

*Please note that the IRB Chair uses the <u>Full Committee Checklist</u> as a guideline when review exempt research. It would behoove researchers to align their research proposal with the checklist's criteria.

Email forms and supporting documentation to: irb.irpe2@tccd.edu.