Institutional Review Board

Research Application

No research is to be conducted without prior approval of the JSCC Institutional Review Board.

All research to be conducted requiring Tennessee Board of Regents (TBR) information or Regents Online Degree Program data will be done through the Tennessee Board of Regents.
Application for Review by the Jackson State
Institutional Review Board

Date Submitted:

Title of Research Project:

Principal Investigator/Project Director:

Department/Program:

Organization/University:

Email: __________________________ Phone: __________________________

Co-investigator (1):

Co-investigator (2):

Anticipated Source of Funding: __________________________

Estimated Duration of Research: _____ months Projected Starting Date: ______________

Number of Subjects to be Recruited: ______

Project Status:  □ New Project  □ Change to Existing Project  □ Review of Ongoing Project

Type of Review Requested:  □ Exempt  □ Expedited  □ Full Review

Completed IRB/Human Research Participants (HRP) Training?  ____ at JSCC  ____ Elsewhere  ____ None

If Training was done elsewhere, please state where: __________________________

Type of Project:

□ Faculty Research

□ Student Research under Faculty Supervision

□ Student Class Project under Faculty Supervision

□ Federal Grant Application

□ Non-Federal Grant Application

□ Thesis or dissertation (Please give school name): __________________________

□ Other (specify): __________________________
Which, if any, of the following populations will be involved in this project?

- Children under the age of 18
- Veterans
- Elderly (65+ as defined by the American Medical Association)
- Individuals who are pregnant
- Individuals with Mental or Physical Disabilities (“physical, mental and/or sensory characteristics that affect a person’s ability to engage in activities of daily life” as defined by the U.S. Department of Health and Human Services, 2005).
- Economically Disadvantaged (“If a family’s total income is less than the family’s threshold, then that family and every individual in it is considered in poverty. The official poverty thresholds do not vary geographically, but they are updated annually for inflation with the Consumer Price Index (CPI-U). The official poverty definition uses money income before taxes and does not include capital gains or noncash benefits (such as public housing, Medicaid, and food stamps” as defined by the U.S. Census Bureau).
- Prisoners

Research Protocol Checklist

Yes   No

- Does this study involve the collection of personal identifying data (name, Social Security Number, date of birth, etc.)?
- Will identifying data be shared (in published reports, presentations, or reports to funding agencies)?
- Will any tangible incentives (examples: extra credit points, money, gift certificates) be offered as a result of participation? If so, what? _________________________
- Will subjects be recorded in any way during the project? (examples: Video, audio, notes, etc.)
- Is an individual’s participation in this study completely voluntary? If no, explain: __________________________________________

- Does this study involve the use of or testing of live animals?

Provide a memo that includes all of the following:

- A detailed description of the research project and its purpose.
- A description of protocol including the number of subjects needed, how subjects will be recruited, possible risks to participants, data sources (interviews, existing data, grades, focus groups, etc), informed consent procedures, and debriefing procedures.
- A description of methods used to measure all sources of data (interviews, grades, focus groups, etc) and/or observations.
- A detailed description of measures that will be taken to keep data confidential, including plans for publication, length of time, and how original documents/recordings will be destroyed.

Attach copies of the following (digitally):

- Consent Form
- Emails, Letters, or Flyers soliciting participants
- Surveys or Questionnaires (if applicable)
- Interview or Focus Group Questions (if applicable)
Responsibility of the Principal Investigator:

- Any changes or additions made to the original research methods, procedures, or purpose must be submitted in writing to the IRB for approval prior to being implemented.
- Any adverse events (serious or minor) must be reported in writing to the IRB immediately.
- Any problems concerning human subjects that occur once a project has begun must be reported to the IRB.
- The Principal Investigator is responsible for retaining all documents pertaining to informed consent and adverse events for a period of three (3) years.

The Jackson State Community College Institutional Review Board reserves the rights to change the review determination or to discontinue the study at any point during the research review and procedures. The IRB also reserves the right to request additional information from the Principal Investigator at any time during the research process.

I certify that the protocol and method of obtaining informed consent as approved by the Jackson State Institutional Review Board will be followed during this research project. Any changes that to the research project will be submitted to the IRB in writing for review and approval prior to implementation.

______________________________________          __________
Principal Investigator/Project Director signature        Date

______________________________________          __________
Co-investigator signature (if appropriate)                     Date

______________________________________          __________
Jackson State IRB Chair signature                                     Date

For IRB Use Only

<table>
<thead>
<tr>
<th>Project Identification Number:</th>
<th>Year:</th>
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<tbody>
<tr>
<td>☐ Approved</td>
<td>☐ Approved with Restrictions</td>
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Determination: ☐ Exempt ☐ Expedited ☐ Full Review

_______________________________________          __________
Signature of IRB Chair                                                            Date

_______________________________________          __________
President’s Signature                                                            Date