St. Louis Community College
Expanding Minds. Changing Lives.

Application for Full Review

Project Information

Title of Project: _____

Principal Investigator(s) Names: _____

Date of Submission: _____

Brief Description of Project:

_____

1. List the hypotheses or research questions.

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2. Describe the research method(s) (observation, experimental, etc.) to be used.

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3. What are the likely characteristics of study participants (e.g. students, race/ethnicity, gender, sexual orientation, marital status, etc.)? What characteristics would exclude people (who are otherwise eligible) from this study (e.g. pregnancy, disability, medications, etc.)?

_____

4. Identify whether the following special groups will include the following potential research subjects. Respond to each category with one of the following: Included, May be Included, or Not Included.

   Minors (under age 18) _____
   Human Fetuses or Neonates _____
   Institutionalized Persons _____
   Cognitively Impaired Persons _____
   Economically or Educationally Disadvantaged Persons _____
   Elderly (over age of 65) _____

5. How many research subjects are expected in the above groups, if any? If the study includes such subjects, what additional safeguards have been included to protect the rights and welfare of these subjects?

_____

6. Outline the procedures for recruitment and inclusion criteria for subjects (justify the involvement of any subjects in the groups listed in paragraph 3 above), and any compensation for participation. Include copies of any proposed recruitment materials, including scripts, flyers, letters, e-mails, etc.

_____

7. Describe the role of human subjects, including what they will be asked to do and whether deception will occur. If the project involves deception attach a copy of the debriefing statement explaining the deception to research subjects.

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8. Describe all measurement procedures. Attach copies of any survey instruments, interview guides, or other measurement documents to be used.

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9. Describe how long subjects will participate in this project.

_____

10. Describe any risks (e.g. injury, stress, discomfort, invasion of privacy, and other psycho-social or physiological risks) to the research subjects that might arise from participation in the study. Minimal risk means that the probability and magnitude of harm or discomfort anticipated in the research are not greater in and of themselves than those ordinarily encountered in daily life or during the performance of routine physical or psychological examinations or tests. For each risk:
    a. state whether the risk is minimal or greater than minimal risk and
    b. the steps taken to minimize the risk if it is greater than minimal.

_____

11. State whether the study overall is designed to minimize the risks involved. Please respond yes or no. Risks to subjects are minimized:
    a. by using procedures which are consistent with sound research design and which do not unnecessarily expose subjects to risk, and
    b. whenever appropriate, by using procedures already being performed on the subjects for diagnostic or treatment purposes.

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12. Describe the possible benefits of participation to the subject.

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13. Describe the possible benefits to society.

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14. Describe the possible benefits to students or St. Louis Community College.

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15. Submit all proposed consent forms (on STLCC letterhead) and indicate:
    a. who will obtain the consent,
    b. the manner in which it will be obtained,
    c. who will maintain the consent documentation, and
    d. how the consent documentation will be secured.

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16. Explain how the privacy of subjects will be assured (or why the subjects would not be at risk if their identity were disclosed).

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17. Explain how the confidentiality of consent forms and data will be protected (e.g., use of pseudonyms in reports, elimination of identifiers in data, coding system to track responses, identifiers and data kept in separate locked files, etc.).

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18. Is this research externally funded? If so, identify the funding source and include a copy of the grant/funding application.

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Investigator Name: _____

Signature: _____

Date: _____

Application Attachments Checklist

The following documents must be completed and submitted with this application:

1. Investigator Information Sheet
2. Human Subject Assurance Training Completion Certificates
3. Acknowledgment of Informed Consent Guidance
4. Informed Consent Document(s)
5. Research Sponsor Form