Date Submitted

Central Georgia Technical College
Institutional Review Board

File Number

FULL IRB REVIEW PROTOCOL SUMMARY FORM

Title of Research Project

College or University

Principal Investigator | Department | Phone Extension | Email address

Address (If not a CGTC Employee) | City | State | Zip | Phone

Co-investigator/Student Investigator | Department | Phone Extension | Email address

Project Director | Department | Phone Extension | Email address

Anticipated Funding Source:

Projected Duration of Research: ____ **months** **Projected Starting Date:** ____

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

Please answer the questions below and return this form with:

- A memo that briefly describes the intent of the project
- A completed copy of the Consent Form Checklist
- A copy of the Consent Form that will be provided to the participants
- A copy of any survey instrument to be utilized in the proposed research
- If TCSG approval gained, submit approval letter with this request

I. Project Information:

A. Project Activity Status:

- ☐ **New Project**
- ☐ **Periodic Review of Continuing Project**
- ☐ **Revision to Previously Approved Project**

B. This project involves Central Georgia Technical College students or personnel

Students: ☐ **Yes** ☐ **No** **Personnel:** ☐ **Yes** ☐ **No** **Archived Data** ___

C. Human Subjects from the following populations will be involved in this study

- ☐ **Minors**
- ☐ **Mentally Disabled**
- ☐ **Elderly**
- ☐ **High School Students**
- ☐ **Prisoners**
- ☐ **Other** ____
- ☐ **None of the above**

D. Estimated number of subjects to be studied: ____

II. Abstract Describing Project and Purpose (Include a description of all experimental methods to be used and design and program activities; what measures or observations 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.)

If you need additional space go to page 4

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)

If you need additional space go to page 4

IV. Precautions (What steps will be taken to ensure that each subject's participation is voluntary? What, if any, inducements will be offered to the subjects for their participation?)

If you need additional space go to page 4

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.)

If you need additional space go to page 4

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

If you need additional space go to page 4

RESPONSIBILITIES OF THE PRINCIPAL INVESTIGATOR:

- Any additions or changes in procedures in the protocol will be submitted to the IRB for written approval prior to these changes being implemented
- Any problems connected with the use of human subjects once the project has begun must 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.

I certify that the protocol and method of obtaining informed consent as approved by the Central Georgia Tech Institutional Review Board will be followed during the period covered by this research project. Any future changes to the research project will be submitted to the IRB for review and approval prior to implementation.

Principal Investigator Signature	Date	**Co-Investigator/Student/Facility Signature (if appropriate)**	Date

Signature of IRB Chair:				**Date:**_____
IRB Chair: Check 1 box:	☐ **Approved** ☐ **Exempt**	☐ **Approved with Restrictions**	☐ **Tabled**	☐ **Disapproved**

Central Georgia Technical College
Human Subjects Research Project
Consent Form Checklist

N/A	YES	NO	
○	○	○	1. Is the consent form written in "lay language"?
○	○	○	2. Is it free of any language that requires the subjects to waive their legal rights, including any release of the investigator, sponsor or college or its agents from liability for negligence?
○	○	○	3. If minors are included in the study, is provision made for obtaining parental consent?
○	○	○	4. Does the consent form include each of the following basic elements of informed consent?
○	○	○	a. A statement that the study involved research, an explanation of the purposes of the research and the expected duration of the subject's participation.
○	○	○	b. A description of the procedures to be followed.
○	○	○	c. A description of any benefits to the subject or others.
○	○	○	d. A description of any reasonably foreseeable risks or discomforts.
○	○	○	e. A statement describing the extent to which confidentiality of records identifying the participant will be maintained.
○	○	○	f. Information regarding whom to contact for answers to questions about the research study and the research subject's rights.
○	○	○	g. A statement that participation is voluntary, refusal to participate will involve no penalty or loss of benefits, and the participant may discontinue participation at any time without penalty or loss of benefits.
○	○	○	h. Appropriate FERPA notice and waivers (if appropriate).

If there was a "NO" response to any of the above questions, the consent form must be revised accordingly unless the investigator can satisfactorily justify why it is appropriate as submitted.

Clear this page only

ADDITIONAL NOTES

Section II

Click here to enter additional information for Section II

Section III

Click here to enter additional information for Section III

Section IV

Click here to enter additional information for Section IV

Section V

Click here to enter additional information for Section V

Section VI

Click here to enter additional information for Section VI