

**WILMINGTON COLLEGE
HUMAN SUBJECTS REVIEW COMMITTEE (HSRC)
RECORD AND REVIEW OF RESEARCH PROTOCOL**

Contact Information

Principal Investigator: _____
(last) (first) (middle)

Address: _____

City _____ State _____ Zip _____

Phone: Day _____ Evening _____ Cell _____

E-Mail: _____ FAX: _____

Project status

This research is for (check one):

Dissertation ___ Practicum ___ Master's _____ Undergraduate ___

Other (specify) _____

This research proposal is (check one):

New ___ Renewal ___ Re-evaluation ___

Instructor or assigned faculty sponsor: _____

Project Information

Title of study: _____

Research purpose or issue: _____

Population to be studied: gender _____ age _____ race/ethnicity _____
number of groups and number of participants in each group _____

inclusion and exclusion criteria _____

How will participants be recruited: _____

Describe the procedures that the participants will undergo in the proposed research project to include the physical location and duration of subject participation (attach a copy of all research instruments e.g., surveys, questionnaires, interview questions etc.):

Describe procedures that will be used to maintain confidentiality, including plans for storing/disposing of tapes and other data records at the conclusion of the research:

Research Protocol *Please answer yes or no to all questions below.*

Does this research involve:

YES NO

- _____ _____ prisoners, probationers, pregnant women, fetuses, the seriously ill or mentally or cognitively compromised adults, or minors (under 18 yrs) as participants
- _____ _____ the collection of information regarding sensitive aspects of the participants behavior (e.g., drug, or alcohol use, illegal conduct, sexual behavior)
- _____ _____ the collection or recording of behavior which, if known outside the research, could place the participants at risk of criminal or civil liability or could be damaging to the participant's financial standing, employability, insurability, or reputation
- _____ _____ procedures to be employed that present more than minimal risk* to participants
- _____ _____ deception or coercion
- _____ _____ benefits or compensation to participants
- _____ _____ a conflict of interest (e.g., teacher/student, employer/employee: is there any financial interest in this research)

If you answered NO to all of the questions please proceed to the next page.

If you answered YES to any of the questions your proposal must clearly indicate why the use of participants in any of these categories is scientifically necessary and what safeguards will be employed to preserve the participants anonymity/confidentiality. The proposal must identify all risks (physical, psychological, financial, social, other) connected to the proposed procedures, indicate clearly how such risks to participants are reasonable in relation to anticipated benefits, describe methods to protect or minimize such risks, and assess their likely effectiveness. Consent/assent forms must be included for research involving minors (see pg 4 regarding details on consent forms).

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- minimal risk means that the probability and magnitude of harm or discomfort anticipated in the proposed research are not greater than those ordinarily encountered in everyday life or during the performance of routine physical or psychological examinations or tests.

Consent Forms

YES ___ NO ___ Is a consent form included with this study? If so, attach a copy.

YES ___ NO ___ Are child assent forms included with this study? If so, attach a copy.
Minors must provide an affirmative consent to participate by signing a simplified form, unless the principal investigator can provide evidence that the minors are not capable of assenting because of age, maturity, psychological state, or other factors.

Who is obtaining consent? *Check all that apply.*

Principal Investigator ___ Research Assistant ___ Other ___ (specify) _____

How is consent being obtained? _____

What steps are being taken to determine that potential subjects are competent to participate in the decision-making process? _____

Obligations of Principal Investigator

HSRC meets on the second Thursday of each month September to May and twice during the summer months. Protocol must be received two weeks before that date.

Any changes made to the research protocol must be reported to division representatives of the HSRC for review prior to implementation of such change. Any complications, adverse reactions, or changes in the original estimates of risks must be reported at once to the HSRC chairperson before continuing the project.

Any data collection that extends beyond one year must be resubmitted before the anniversary for continuing review by the HSRC.

According to federal regulation all data, including signed consent form documents must be retained for a minimum of three years past the completion of the research.

I have read and understand my obligations as an investigator. I certify that the research proposal is accurate and complete.

Print name: _____ Date: _____

Signature: _____

Instructor or: _____ Date: _____

Assigned Faculty _____ print name

Sponsor

 signature

**WILMINGTON COLLEGE
HUMAN SUBJECTS REVIEW COMMITTEE (HSRC)
PROTOCOL REVIEW**

This section is to be completed by the HSRC

Principal Investigator: _____

Date submitted: _____

The protocol and attachments were reviewed:

___ The proposed research is approved as ___ Exempt ___ Expedited ___ Full Committee

___ The proposed research was approved pending the following changes:

___ see attached letter

___ resubmit changes to the HSRC chairman

___ The proposed research was disapproved. See attached letter for more information.

HSRC Co-Chair _____ Date: _____
Or Representative print name

signature

HSRC Co-Chair _____ Date: _____
Or Representative print name

signature