This is the newly revised IRB submission form. It is structured in the following way:

Sections A and B: all review categories (Exempt Categories 1, 2, 3, and 4; Expedited; Full)

Sections C, D, E, and F (Exempt Categories 2 and 3; Expedited; Full)

Section G (Expedited and Full)

**Reed College**

**Institutional Review Board (IRB)**

**NOTE: *This document is a protected fillable form. Please use Microsoft Word to complete this form****. Microsoft 365 is available to Reed students, faculty, and staff at no additional cost. Visit* [*https://www.reed.edu/cis/help/office.html*](https://www.reed.edu/cis/help/office.html) *for more information. If you have trouble editing this form, please contact Kayla Johnston at johnstonk@reed.edu.*

**COVER PAGE**

Project Title:

Submission Date:

Name of Primary Investigator (student or faculty):

Primary Investigator Email Address:

Department:

Faculty Advisor (if student is primary):

Faculty Email Address (if student is primary):

Please indicate your agreement to the following by signing below:

*I will promptly report changes in the proposed study and any unanticipated problems involving risks to participants, including adverse reactions, to the Institutional Review Board.*

Electronic Signature of Primary Investigator:

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**Please submit this application and additional materials through the IRB Portal (see** [**http://www.reed.edu/irb/**](http://www.reed.edu/irb/) **for instructions).**

**\*If you are a student, please note that your faculty advisor is expected to review a full draft of your proposal in advance of submission, and you should incorporate your advisor’s feedback. Once submitted, the proposal will be forwarded to your faculty advisor for an electronic signature of approval, and then it will be sent to the committee for review.**

If your submission is **similar to** a submission that has been approved previously (within the past two academic years), please identify that proposal by Project Name and Primary Investigator.

Project Name:

Primary Investigator:

Approximate Date of Approval:

**A. SUMMARY** (required for all review categories)

Provide a brief summary (one paragraph) of the research project. The summary should describe the specific purpose of your engagement with human subjects, how you expect to conduct that engagement, with whom, and the expected outcomes of those interactions.

**B. BASIC PROTOCOL INFORMATION (**required for all review categories)

1. The following populations require special consideration. Please review this list and follow the relevant instructions:

* Children (individuals <18 years). If your research exposes children to risky or deceptive interventions, your proposal requires **FULL** review. All research involving children must include **APPENDIX A.**
* Individuals who, for any reason, cannot give informed consent. Your proposal requires **FULL** review.
* Clinical populations. Your proposal requires **FULL** review.
* Incarcerated populations. Your proposal requires **FULL** review.
* Research conducted outside the US. Please complete **APPENDIX B.**
* Non-English speakers. Please complete the **LANGUAGE ISSUES** sectionof **APPENDIX B.**

2. If this study is being performed at sites other than the Reed College campus or online, please list the other sites:

3. Has this study received governmental funding and/or funding from an agency that requires certification of review by the Reed College IRB?

[ ]  YES [ ]  NO

**If YES,** list funding information (including agency and protocol number) and append a copy of the funding application.

4. Does the research require approval from one or more non-Reed organization(s) or IRB(s)?

[ ]  YES [ ]  NO

**If YES**, attach application(s) to other organization(s) and, if approval has been granted, documentation of the approval.

5. Does the research include in-person research activities?

[ ]  YES [ ]  NO

Please note that IRB review does not assess health and safety issues pertaining to COVID-19. If you have questions about conducting in-person research at this time, please contact April Sams in Environmental Health and Safety (karra@reed.edu) or Kayla Johnston (johnstonk@reed.edu).

6. Does the research include participants residing in the **European Union (EU)**, the **European Economic Area (EEA)**, the **United Kingdom**, and/or the **People’s Republic of China (PRC)**?

[ ]  YES [ ]  NO

**If No**, please be sure to exclude individuals residing in the EU, EEA, UK, and PRC from your recruitment mechanisms.

**If YES**, please note that the General Data Protection Regulation (GDPR) applies to all individuals residing in the EU, EEA, and UK and that the Personal Information Protection Law (PIPL) applies if personally identifiable information is collected in the PRC. Please contact IRB Chair Sameer ud Dowla Khan (skhan@reed.edu) and IRB Administrator Kayla Johnston (johnstonk@reed.edu) to ensure that your research will be in compliance with these regulations.

7. **CATEGORY OF REVIEW**. Although the IRB ultimately determines which type of review your protocol will receive, please consult the guidelines on the webpage entitled “Categories of Review” and then check the category of review you believe applies. Please note that research involving minors is not eligible for Exempt Categories 2 and 3. The minimum category for research with minors is Expedited.

[ ]  Exempt Category 1: Educational Practices **(no need to complete the remainder of this form)**

[ ]  Exempt Category 2: Educational Tests, Survey Procedures, Interview Procedures, or Observation of Public Behavior (will undergo Limited Review). **In order to qualify for this category, the research must be considered benign to participants.**

[ ]  Exempt Category 3: Benign Behavioral Interventions (will undergo Limited Review)

[ ]  Exempt Category 4: Use of secondary data for which consent is not currently required **(answer**

 **the following three questions (8-10), but no need to complete the remainder of this form)**

[ ]  Expedited (considered minimal risk to human subjects)

[ ]  Full (considered above minimal risk to human subjects)

**Questions 8-10 are required for Exempt Category 4 only:**

8. Provide a brief description of the data, the source of the data, and how consent was previously obtained.

9. Was the data collected in compliance with the Common Rule (if in the US) or international data regulations (if outside the US)?

[ ]  YES [ ]  NO

10. Was any identifiable personal information collected (e.g., names, social security numbers, detailed physical descriptions, genealogies, addresses, photographs, video or audio recordings, IP addresses, etc.)?

[ ]  YES [ ]  NO

**If YES,** which of the following applies?

**[ ]** The identifiable personal information is publicly available.

**[ ]** The identifiable personal information was de-identified such that participant identities cannot

 readily be ascertained, and the investigator will not contact or re-identify participants.

**C. PARTICIPANTS** (required for Exempt Categories 2 and 3, Expedited, and Full review categories)

1. How many participants do you anticipate?

2. Describe the sample population.

3. How will participants be recruited?

4. What individuals or groups of individuals will be included or excluded, and why?

**ACTION:** **Please ATTACH all recruitment materials.** Examples of recruitment documents can be found on the IRB website under *Participant Recruitment Materials*. Be sure to include the following information on recruitment materials: expected duration of individual participation, study location, and type or amount of compensation to participants, if any.

**D. CONFIDENTIALITY AND PRIVACY** (required for Exempt Categories 2 and 3, Expedited, and Full review categories)

1. Will you be collecting any identifiable personal information (e.g., names, social security numbers, detailed physical descriptions, genealogies, addresses, photographs, video or audio recordings, IP addresses, etc.)?

[ ]  YES [ ]  NO

2. Will you be collecting information that, in light of the potential participant pool, could lead to the identification of an individual participant? Examples include autobiographical accounts or identifiable patterns of demographic information given the sample population.

[ ]  YES [ ]  NO

**If YES** to either of these questions, describe confidentiality procedures, what will become of records after use (e.g., shown at scientific meetings, erased), the final disposition of the records (e.g., destruction, archiving), and a reasonable timeline for this disposition.

3. If you are collecting data online, please refer to our website FAQ for issues related to online research, and discuss here how you will protect participant confidentiality (e.g., collection of IP addresses, use of Amazon Mechanical Turk, etc.).

4. If data are identified by a code, will you retain a master list linking codes and direct identifiers?

[ ]  YES [ ]  NO

**If YES**, explain how and where you will secure the master list, and how long it will be kept.

5. Will information that could identify participants be shared in any way?

[ ]  YES [ ]  NO

**If YES**, explain.

**E. INFORMED CONSENT** (required for Exempt Categories 2 and 3, Expedited, and Full review categories)

The consent form should be a plain-language description of key information designed to facilitate comprehension and informed decision making (e.g., who will obtain consent, how and where the consent process will take place). It should also include specific information about how participant privacy and confidentiality will be protected. Please read the Participant Consent page on our website thoroughly, including the consent form templates provided. Then indicate what form of consent you will seek from participants, and **ATTACH** **the appropriate consent form or script.**

NOTES: (1) If the research includes audio or video recordings, your consent document/script should include a separate line asking for consent to record. (2) If you plan to archive potentially identifiable data for future use, your consent document/script should include a separate line asking for consent to archive.

1. How will informed consent be sought from participants?

**[ ]  Written consent**

**[ ]  Oral consent**

**[ ]  Implied consent**

2. Where will the consent process take place?

**[ ]** In person

Describe where:

**[ ]** Online

**[ ]** Other

Describe:

**F. PROCEDURES** (required for Exempt Categories 2 and 3, Expedited, and Full review categories)

**ATTACH** **all questionnaires and surveys, and include sample items from computerized tasks.** For structured interviews, provide your interview protocol. For unstructured interviews, provide sample questions and describe the goals of the interview. If Expedited or Full, please provide a more detailed description of the procedures, including specific information on what each participant will be asked to experience or do.

**G. RISK/BENEFIT ASSESSMENT** (required for Expedited and Full review categories only)

1. Benefits

Describe the potential direct and indirect benefits, if any, to participants (excluding incentives).

2. Risks

Indicate whether the research involves any of the following by checking the applicable items:

[ ]  Deception of participants

[ ]  Procedures that may result in mental or emotional stress, such as induction of negative mood, damage to self-esteem, manipulation of attitudes, or exposure to aversive stimuli

[ ]  Procedures that may involve physical harm to participants, such as ingestion of a substance, physical exercise, or invasive physiological measurements

[ ]  Presentation of materials and/or behaviors commonly regarded as socially unacceptable within the setting of the research

[ ]  Observations or questions that might be regarded as invading privacy, especially if these might lead to disclosure of information that could be harmful to participants (e.g., criminal behavior, immigration status, information that might affect academic or employment status, information that could affect the participant’s reputation or be considered stigmatizing)

3. For each of the items checked above, describe why each is necessary, and how you will seek to minimize each risk posed.