

Human Subject Research SRC Approval Form

Required for all research involving human participants not at a Regulated Research Institution. If at a Regulated Research Institution, use institutional approval forms for documentation of prior review and approval.
(SRC approval required before experimentation.)

Name(s) of student researchers

Title of Project

Adult Sponsor

Phone/Email

Must be completed by Student Researcher(s) in collaboration with the Adult Sponsor/Designated Supervisor/Qualified Scientist:

- I have submitted my Research Plan/Project Summary which addresses ALL areas indicated in the Human Participants Section of the Research Plan/Project Summary Instructions.
- I have attached any surveys or questionnaires I will be using in my project or other documents provided to human participants.
 Any published instrument(s) used was /were legally obtained.
- I have attached an informed consent that I would use if required by the SRC.
- Yes No Are you working with a Qualified Scientist?

BELOW - SRC USE ONLY

Must be completed by Scientific Review Committee (SRC) after review of the research plan. All questions must be answered for the approval to be valid. (If not approved, return paperwork to the student with instructions for modifications.)

- Approved with Full Committee Review (3 signatures required) and the following conditions: (All 6 must be answered)
- Risk Level (check one): Minimal Risk More than Minimal Risk
 - Qualified Scientist (QS) Required: Yes No
 - Designated Supervisor (DS) Required: Yes No
 - Written Minor Assent required for minor participants:
 Yes No Not applicable (No minors in this study)
 - Written Parental Permission required for minor participants:
 Yes No Not applicable (No minors in this study)
 - Written Informed Consent required for participants 18 years or older:
 Yes No Not applicable (No participants 18 yrs or older in this study)
- Approved with Expedited Review (1 signature required). Study involves either of the following:
- Human participants will only provide feedback on project design/student-designed invention or prototype. etc., no personal data will be collected and there are no health or safety hazards.
 - Student is the only subject of the research and no more than minimal risk is involved.

SRC SIGNATURES (All 3 signatures required unless expedited review checked above) None of these individuals may be the adult sponsor, designated supervisor, qualified scientist or related to (e.g., mother, father of) the student (conflict of interest).

I attest that I have reviewed the student's project, that the checkboxes above have been completed to indicate the SRC determination and that I agree with the decisions above.

Medical or Mental Health Professional (a psychologist, medical doctor, licensed social worker, licensed clinical professional counselor, physician's assistant, doctor of pharmacy, or registered nurse) with expertise related to this project.

Printed Name

Degree/Professional License

Signature

Date of Approval (Must be prior to experimentation.)

Educator

Printed Name

Degree

Signature

Date of Approval (Must be prior to experimentation.)

School Administrator

Printed Name

Degree/Professional License

Signature

Date of Approval (Must be prior to experimentation.)