

UNION COLLEGE HUMAN SUBJECTS REVIEW COMMITTEE

2020-2021 APPLICATION TO ENGAGE IN RESEARCH INVOLVING HUMAN SUBJECTS

Please type your responses in the fields provided. The fields will expand if more space is needed. When completed, please **print and deliver to Joshua Hart**, Chair of the Human Subjects Review Committee, Bailey Hall 302.

1. Name of student researcher (if applicable) >

Box number >

Email address >

Major >

2. Name of faculty researcher or sponsor >

Office location >

Email address >

Department >

3. Title of project >

4. Is this research funded? >

If yes, by whom? >

5. Approximate number of participants: >

Approximate age range of participants: >

Other important characteristics of participants (e.g., prisoners, minors, participants in poor mental or physical health, etc.) >

6. Where will the data be collected? >

7. If data will be collected at a location other than Union College's campus, identify how you secured permission from the appropriate individuals at the other location(s). Include this individual's name and contact information. >

8. How will participants be sampled, recruited, or otherwise enlisted? >

9. What rewards, payment, or other credit will be provided for participation, if any? >

10. How will the anonymity of participants and/or the confidentiality of the data be ensured? >

For the following items, indicate YES or NO. If the answer is YES, please explain.

11. Is it reasonably possible that any of the participants will be placed at risk with regard to physical pain or discomfort, psychological stress or discomfort, or social injury (e.g., diminished reputation or damaged social or personal relationships)? >

12. Will information that might affect participants' willingness to participate be withheld from them prior to securing informed consent to take part in the research? >

13. Will there be any coercion or penalties that might negate a participant's freedom to refuse to participate in the study or withdraw from participation? >

14. Will any of the researchers who will be conducting the study be placed at risk with regard to physical or psychological pain, discomfort, or harm? >

15. Will any deception be involved? If so, explain the nature of the deception, the need for the deception, and how risks from that deception will be mitigated. >

16. Will topics or questions about depression or about thoughts of or attempts to engage in of self-injury or suicide be included? >

For the following items, indicate YES or NO. If the answer is NO, please explain.

17. Will all promises and commitments made to the participants regarding their participation be duly honored by the researcher? >

18. Will it be made clear from the onset of the study that participants are free to withdraw from the study at any time? >

19. Immediately following their participation, will all participants be provided with a complete explanation (debriefing) of the nature of the study so as to eliminate any possible misconceptions about its purpose and to eliminate any stress or discomfort experienced by participants? >

20. If payment is offered, immediately following their participation, will all participants be provided with payment as promised (e.g., credit for course, gift certificate, etc) ? >

21. The United States Government, via [45CFR46.116](#), states that informed consent must be obtained from participants unless, among other criteria, it is not practicable to do so.

If you do plan to obtain informed consent, please indicate how, whether it be an informed-consent form, a clickable button on a Website, or via other documentable means: >

If you do not plan to obtain informed consent, please explain how your study meets each of the four criteria for waiving this requirement as set forth by 45CFR46.116(e). *You cannot simply state that you don't think informed consent is important or that the study is brief or anonymous. You must explain how your study qualifies for a waiver according to 45CFR46.116(e).* >

22 (*OPTIONAL*). In addition to the specific explanations that may have been provided with the responses to items #11 through #21, you are welcome to provide any further comments that might help the Committee determine whether the proposed research is likely to produce benefits so significant as to outweigh any questionable or risk-producing research procedures. >

PLEASE ATTACH THE FOLLOWING APPENDICES.

APPENDIX A: Briefly explain the purpose of the research and provide a general description of the methods to be employed (200 words should be sufficient).

APPENDIX B: Provide a copy of the informed consent materials you plan to administer to participants (unless you have made a case for not using one in #21. Whether you use the sample form found [here](#) or the OHRP checklist found [here](#), please ensure that your form contains all the elements called for by OHRP.

APPENDIX C: Provide a copy of **all materials** to be used in your study. If an interview procedure is to be used, a detailed list of the types of questions that will be asked should be described. If participants will be exposed to any stimuli, copies of those stimuli should be presented. In the case of oral presentations, a transcript is sufficient. **To be clear: anything a participant will read, see, be asked, or answer needs to be included here.**

APPENDIX D: Provide a copy of the debriefing to be presented to participants, either in text or orally. A debriefing statement is a statement presented to participants after their participation. It should provide some information about the research study in which they just participated. It need not provide detailed discussions to include literature reviews or full hypotheses, but it should provide the participants with at least a basic understanding of what the research is about. If it is not feasible to provide a debriefing, please explain why.

CERTIFICATION: I/we certify that:

The statements herein are factual to the best of my/our knowledge;
I/we have described our methods and materials accurately and completely;
I/we have not begun data collection in any way and will not do so until given HSRC approval;
If the proposal is approved, I/we will not make any modifications to the study until receiving additional HSRC approval;
I/we agree to immediately report any adverse events occurring in the course of this study to the HSRC chair.

Student researcher (if applicable)	date	Faculty researcher/advisor	date
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