Request for IRB Review of Course-Related Research

INSTITUTE FOR CLINICAL SOCIAL WORK

Address package to: The Chair, IRB, c/o Registrar
Institute for Clinical Social Work
200 N. Michigan Ave., Suite 407
Chicago, IL 60601-7202

Instructions:
Submit one copy each of class syllabus, and of general research proposal. Also submit one copy of each student research proposal

Title and Number of Course:

_____

Faculty:

_____

Home Address: _____

City: _____ **State:**_____ **Zip:**_____

Home Phone:_____ **Work Phone:**_____

How is the student informed of this course requirement?

_____
_____
_____

How is the student research project linked to grading?

_____
_____
_____

Does the proposed student research include any of the following procedures?

1. Y/ N Payment of participants?
2. Y/ N Written consent/assent forms?
3. Y/ N Data collection to exceed 6 months?

Does the proposed research include any of the following risks?

1. Y/ N Deception of participants about any part of research?
2. Y/ N Use of a vulnerable population?
3. Y/ N Any risks related to privacy or confidentiality?
4. Y/ N Anything likely to lessen subject's likelihood of volunteering?

Does the proposed research include any medical risks?

1. Y/ N Use of drugs or other controlled substances?
2. Y/ N Participants taking any substance or having it applied?
3. Y/ N Removal of any fluids, excreta, etc. from participants?
4. Y/ N Subject exposed to any physiological or psychological stress?

Certifications:

1. As the faculty member supervising this student project, I am familiar with the policies and procedures of ICSW regarding human subjects. I subscribe to the standards described in the *IRB Manual* and will adhere to those policies and procedures.
2. I am familiar with the published guidelines for the ethical treatment of subjects associated with my field of inquiry (i.e., American Psychological Association; National Association of Social Workers; American Sociological Association).
3. I assume full responsibility for ensuring that the students directing research under my supervision are familiar with and will conform to these standards.
4. I assume full responsibility for ensuring that all changes, accidents or unforeseen outcomes with regard to human subjects will be reported immediately to the IRB and no further data will be collected until the IRB gives approval to continue.

_____ _____

Faculty Member Date