



NOTRE DAME
C O L L E G E

**INSTITUTIONAL REVIEW BOARD
Research Proposal Form**

Date Submitted:

Investigator(s):

Investigator Address:

Investigator(s) E-mail:

Investigator Telephone Number:

Advisor's Name (if applicable):

Advisor's E-mail:

Advisor's Signature of Approval. Place ✓ here if advisor has approved research. []

Title of Research Project:

Date of Initial Data Collection:

For research requiring permission for access to proposed research sites, please supply documentation of permission.

Please describe the proposed research and its purpose, including specific aims, in narrative form:

Describe the research methodology data collection protocol, characteristics of participants, and recruitment procedures (**submit copies of materials**):

1. Do you have **external funding** for this research (money coming from outside the College)? Yes[] No[]

Funding Source (if applicable):

2. Will the participants in your study come from a **population requiring special protection**; in other words, are your subjects someone other than Notre Dame students (i.e., children 17-years-old or younger, elderly, criminals, welfare recipients, persons with disabilities, NCAA athletes)? Yes[] No[]

If your participants include a population requiring special protection, describe how you will obtain consent from their legal guardians and/or from them directly to insure their full and free consent to participate.

Indicate the approximate number of participants, the source of the participant pool, and recruitment procedures for your research:

Will participants receive any payment or compensation for their participation in your research (*this includes money, gifts, extra credit, etc.*)? Yes[] No[]

If yes, please explain:

3. Will the participants in your study be at any physical or psychological **risk** (risk is defined as any procedure that is invasive to the body, such as injections or drawing blood; any procedure that may cause undue fatigue; any procedure that may be of a sensitive nature, such as asking questions about sexual behaviors or practices) such that participants could be emotionally or mentally upset? Yes[] No[]

Describe any harmful effects and/or risks to the participants' health, safety, and emotional or social well being, incurred as a result of participating in this research, and how you will insure that these risks will be mitigated:

4. Will the participants in your study be **deceived** in any way while participating in this research? Yes[] No[]

If your research makes use of any deception of the respondents, state what other alternative (e.g., non-deceptive) procedures were considered and why they weren't chosen:

5. Will you have a written **informed consent** form for participants to sign, and will you have appropriate **debriefing** arrangements in place? Yes[] No[]

Describe how participants will be clearly and completely informed of the true nature and purpose of the research, whether deception is involved or not (**submit informed consent form and debriefing statement**):

6. Describe the nature of the data you will collect and your procedures for insuring that **confidentiality** is maintained, both in the record keeping and presentation of this data:
7. Identify the potential **benefits** (significance) of this research on research participants and humankind in general.

[Email the following documents: consent form, debriefing statement, questionnaires, and supplemental materials with this form in email.]

INSTRUCTIONS:

Please include the following statement at the bottom of your informed consent form:

“Research at Notre Dame College which involves human participants is overseen by the Institutional Review Board. Questions or problems regarding your rights as a participant should be addressed to Deborah Sheren; Institutional Review Board Chair; Notre Dame College; 4545 College Road; South Euclid, Ohio 44121; Telephone (216) 373-5347.”

Please submit this file and accompanying materials in a single email to the IRB Chair, Deborah Sheren, via electronic mail (dsheren@ndc.edu) for review.