Date ______________

HUMAN SUBJECT RESEARCH REVIEW FORM (SHORT)
NEW JERSEY INSTITUTE OF TECHNOLOGY
INSTITUTIONAL REVIEW BOARD (IRB) APPLICATION

Name of Principal Investigator(s) ________________________________________________

Principal Investigators must be staff or faculty members. Doctoral candidates can serve as co-principal investigators under faculty/staff supervision for PhD Thesis projects. Doctoral candidates applying for IRB approval must submit written documentation from their faculty advisor stating that the research is conducted under their supervision if the faculty advisor is different from the PI.

NJIT Address: ___________________________________________________________________

Department: ___________________________________________________________________

E-mail Address: __________________________________________________________________

NJIT Affiliation of Principal Investigators (Check all that apply):

☐ Faculty    ☐ Staff    ☐ Student    ☐ Other    - Describe:

Project Title: __________________________________________________________________

This project will be conducted:

☐ On Campus    ☐ Off Campus (Location): ___________________________________________    ☐ Both

Is this research funded or expected to be funded by outside source(s)?

☐ Yes    ☐ No

If yes, indicate name(s) and type of funding source(s).

<table>
<thead>
<tr>
<th>Name(s):</th>
<th>Type:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>☐ Government (County, State or Federal)</td>
</tr>
<tr>
<td></td>
<td>☐ Foundation</td>
</tr>
<tr>
<td></td>
<td>☐ Corporation</td>
</tr>
<tr>
<td></td>
<td>☐ Other</td>
</tr>
</tbody>
</table>

Anticipated Starting Date: ____________________________

Anticipated End Date: ____________________________

Training Requirements: All principal investigators, faculty, staff and students who will be interfacing with human subjects in this study must complete an online training course in the protection of human subjects. However, under the appropriate circumstances the IRB may waive this requirement for research found to be exempt from further IRB review.

Certificates indicating course completion must be submitted as requested by the IRB.

- For investigator training, please go to: http://www.njit.edu/research/compliance/citi-software.php
- In addition, all NJIT investigators must complete the Responsible Conduct in Research training (RCR Basic Course) of the Citi Program (http://citiprogram.org).
To Principal Investigator: In addition to the questions below, the IRB may require additional information and/or material.

1. List the names and status (faculty, student, etc.) of the persons conducting the research:
   a. Principal Investigator(s):
   b. Other Members of Research Team:
   c. NJIT Faculty Advisor(s), and if the PI is not the faculty advisor

2. Describe the objectives, methods and procedures of the research project. This summary will be used to describe your project to the IRB. Use up to 2 pages, if necessary. In addition, you may attach a copy of an abstract or full research proposal describing this work as an appendix to this form.

3. Describe the reasons for the request that the research is found to be exempt from further IRB review. Please refer to the article 45 CFR 46.104 (code of federal regulations) to justify your request

4. List names and institutional affiliations of research assistants, workers and students working on this project who are not listed above.

5. If research assistants, workers or students will be working on the project, describe their qualifications, special training and how they will be supervised.
6. What is the age (or age range) of the subjects?

7. Indicate any physical, psychological, social or privacy risk or pain, which may be incurred by human subjects, or any drugs medical procedures that will be used. (This includes any request for the subjects to reveal any embarrassing, sensitive, or confidential information about themselves or others.)

8. Indicate if any deception will be used, and if so, describe it in detail. Include your plans for debriefing.

9. Evaluate the risks presented in 7.
   a. Is it more that would normally be encountered in daily life?
   
   b. Do your procedures follow established and accepted methods in your field?

10. How will the risk be kept at a minimum? (E.g., describe how the procedures reflect respect for privacy, feeling, and dignity of subject and avoid unwarranted invasion of privacy or disregard anonymity in any way.) Also, if subjects will be asked to reveal any embarrassing, sensitive, or confidential information, how will confidentiality of the data be insured? Also include your plans for debriefing. If subjects will be placed under any physical risk, describe the appropriate medical support procedures.

11. Describe the benefits to be derived from this research, both by the subject and society (including the scientific community). (This is especially important if research involves children, pregnant women, prisoners and other members of protected communities).
12. Describe the means through which human subjects will be informed of their right to participate, not to participate, or withdraw at any time with no adverse consequences. Clearly describe how the subjects will be adequately informed about the procedures of the experiment so that they can make an informed decision on whether or not to participate.

13. Attach a copy of the permission for the facility to conduct the proposed research (if other than NJIT).

The completed forms should be sent electronically to: irb@njit.edu
DISCLOSURE OF FINANCIAL RELATIONSHIP
FOR SPONSORED PROJECTS

The following form must be completed by all Principal Investigators and members of the research team, including faculty advisors if student projects. Please use a separate form for each person.

Date: ____________________________________________________________

Name (Print and SIGN): (ORIGINAL SCANNED, FAXED, OR HARDCOPY SIGNATURE REQUIRED) __________________________________________________________________________________________

This form shall be completed by all members of the research team.

1. Funding Source. Does the research involve financial relationships that could create potential or actual conflicts of interest?

☐ Yes ☐ No

How is the research supported or financed?

________________________________________________________________________

2. Payment or Compensation for Services. Are you receiving any salary and other payment for services (e.g., compensation in the form of equipment, consulting fees; honoraria, study design; management position, independent contractor, service on advisory committees or review panels for for-profit entities, board membership of for-profit entities; seminars, lectures or teaching engagements for for-profit entities) for this research? (Do not include salaries received from federal grant funding agencies.)

☐ Yes ☐ No

If Yes, note amounts with explanation of source and activities:

________________________________________________________________________

If Yes, is this payment or compensation affected by the study outcome?

☐ Yes ☐ No

If Yes, explain:

________________________________________________________________________

Do you receive payment per participant or incentive payments?


☐ Yes  ☐ No

If Yes, note amounts with explanation of terms.


3. **Equity (Ownership) Interests.** Do you have any or all equity interests or ownership interests (e.g. stock, stock options, and partner) in entities related to the research activity?

☐ Yes  ☐ No

If Yes, note amount with explanation of source:


4. **Other Financial Interests or Relationships.** Do you have any financial interests in the product, including patents, trademarks, copyrights, or licensing agreements?

☐ Yes  ☐ No

If Yes, note amount with explanation of source:


5. **Incentives.** Will you receive any money, gift or anything of monetary value above and beyond the actual costs of enrollment, conducting of the research, and reporting on the results, including, but not limited to, finders fees, referral fees, recruitment bonuses, enrollment bonus for reaching an accrual goal or similar types of payments?

☐ Yes  ☐ No

If Yes, note amount with explanation of source:


6. **Other.** Are there any other interests or relationships (including volunteer services) that might constitute a conflict of interest or an appearance of conflict of interest in connection with the research project?

☐ Yes  ☐ No

If Yes, note amount with explanation of source:
Please address questions or concerns to the Office of Research (irb@njit.edu).