EXEMPT REVIEW RESEARCH PROTOCOL
FOR THE COLLEGE OF SAINT ROSE
INSTITUTIONAL REVIEW BOARD FOR RESEARCH WITH HUMAN PARTICIPANTS

Exempt protocol status will be assigned only to those research projects that meet the Federal Laws established for "Exempt Status" and the requirements established by The College of Saint Rose Institutional Review Board for research with human participants. Typically, exempt status is granted to **research that presents minimal risks to independent adult participants**. In some cases, exempt status may be assigned to **research with minors that is conducted in established or commonly accepted educational settings, involving normal educational practice (see items K1 and K2 on page 3 of this form for a more detailed explanation).** Some other conditions necessary for research to meet exempt status relate to the following issues: 1) the confidentiality of minor and adult participants cannot be breached 2) the participants cannot be identified by name, through place of employment, demographic information, etc., and 3) participants cannot include elected or appointed public officials or candidates for public office.

APPLICATION INSTRUCTIONS

The application should be typed or clearly printed in black ink**. Applications must include the completed exempt protocol form and a brief summary of the study including: the research question, a description of the participants, and a brief description of research methodology with copies of any and all instruments to be used (e.g., surveys, interview questions, questionnaires, checklists, observation sheets, psychometric assessments, etc.) attached.** Completed applications (original plus one copy) that are submitted by 4 PM Wednesday will be reviewed over the next seven days, with a decision rendered by the following Thursday. Applications received after the 4 PM Wednesday deadline will be included in the review cycle beginning the following Wednesday. Incomplete protocol packets (or too few copies) will be returned, without review, to the researcher for completion. Exempt protocols are assigned to the appropriate School IRB representative for review. Researchers will be notified of approval of their protocol as exempt, or, if it is determined that the research project does not meet exempt status, the researcher will be notified that he/she must complete the Expedited/Full Review protocol form.

Under some circumstances, protocols may be approved contingent upon the provision of additional information ("approval pending" status). Under these circumstances, the additional information must be provided before approval will be given and data are collected.

All research involving human participants conducted under the auspices of The College of Saint Rose must receive IRB approval before the initiation of data collection. Investigators who have questions about this form or the review procedures are invited to contact the IRB chairperson or any member of the IRB (members are listed on the IRB home page).

Enclose a self-addressed stamped envelope or regularly accessed email address to expedite your notification.

Applications from **faculty and students in the School of Education** can be delivered to Jean Esposito in the School of Education Office in the Lally Building, or mailed to:

Human Participants Research Review Committee
Attn: Jean Esposito
School of Education
The College of Saint Rose
Albany NY 12203

Applications from faculty and students in the Schools of Arts and Humanities, Business, or Mathematics and Sciences can be delivered to The Math and Science Office in room 255 Science Center, or mailed to:

Human Participants Research Review Committee
School of Mathematics and Sciences
The College of Saint Rose
Albany NY 12203

Certification: (to be completed by the primary investigator/faculty advisor)

I certify that the information concerning the procedures to be taken for protection of human participants is correct. I will seek and obtain prior approval for a substantive modification in the protocol and will report promptly any unexpected or otherwise significant adverse effects encountered in the course of study.

_____ _____

Signature of Primary Investigator(s) Date

In the case of student research, the application should be reviewed and signed by the faculty supervisor. It is the responsibility of the faculty supervisor to ensure that students have properly completed this form

_____ _____

Signature of Faculty Supervisor Date

I. General Information:

A. Name: _____

B. Email Address: _____

C. Phone #: _____

D. Mailing Address: _____

E. Date of Application: _____

F. Dates of Project: From Date of Approval to_____(not greater than 1 year)

G. Project Title: _____

H. Type of Project: ____Faculty / Staff / Administrator Research

____Student Research

I. Department or College Unit _____

J. School:

____Arts & Humanities ____Math & Science ____Business ____Education ____N/A

K. Exempt Categories:

	YES	NO
1. Is the research conducted in established or commonly accepted educational settings? (Established or commonly accepted educational settings typically refers to K-12 and college classrooms. This term may also apply to after school programs, preschools, day care centers, vocational schools, alternative education programs, etc. which are affiliated with K-12 schools or colleges.)	____	____
2. Does the research involve normal educational practices, such as research on regular and special education instructional strategies, or research on the effectiveness of or the comparison of instructional techniques, curricula, or classroom management methods? (Normal educational practices include curriculum/instruction that is planned and implemented by the classroom teacher. This might also include surveys or tests that teachers commonly give to measure the effectiveness of an educational practice. Any material, intervention, activity, etc. suggested or implemented solely by the researcher is NOT considered to be a normal educational practice. Attempts to understand an educational practice through observation, interviews, or surveys with teachers, parents, or students, etc. are not understood to be normal educational practices.)	____	____
3. Does the research involve the use of education tests (cognitive, diagnostic, aptitude, achievement), survey procedures, interview procedures or observation of public behavior?	____	____
If YES, will the research be conducted on any of the following groups?		
a. Participants who may be identified?	____*	____
b. Participants who are elected or appointed public officials or candidates for public office.	____*	____
c. Participants whose confidentiality may be breached after the research is completed.	____*	____
4. Does the research involve the collection or study of already existing data, documents, records, pathological specimens, or diagnostic specimens, if these sources are publicly available or if the information is recorded by the investigator in such a manner that participants cannot be identified directly or through identifiers linked to the participants?	____	____
5. Does the project involve research or demonstration projects which are conducted by or subject to the approval of Department or Agency heads, and which are designed to study, evaluate, or otherwise examine: (i) Public benefit or service programs; (ii) procedures for obtaining benefits or services under those programs; (iii) possible changes in or alternatives to those programs or procedures; or (iv) possible changes in methods or levels of payment for benefits or services under those programs?	____	____
6. Does the research involve taste and food quality evaluation or consumer acceptance studies of wholesome foods without additives that are consumed, or a food is consumed that contains a food ingredient at or below the level and for a use found to be safe (according to the FDA or approved by the EPA or USDA)? This also includes agricultural chemical or environmental contaminants at or below the level found to be safe (according to the FDA or approved by the EPA or USDA).	____	____
7. Does the proposed research project involve ANY research procedures that were not included in 1-5 listed above?	____*	____

L. Other Exempt Considerations:

	YES	NO
1. Will participants and/or their affiliations be able to be identified?	____*	____
2. Will research take place in a common public space? (common public spaces include sidewalks, bus stops, a park, etc. Schools, shopping malls, etc. are not common public spaces)	____	____
a. If NO, will permission be obtained from officials/owners for data collection (e.g. principal, teacher, mall owner, other academic institution, etc.)?	____	____*
3. Will confidentiality be maintained indefinitely? If yes, fully explain all of the following: the use of codes or pseudonyms; how and where data will be securely stored; and how and when data will be destroyed. _____	____	____*
4. Will disclosure of the data constitute a risk to the participants?	____*	____
5. Does the research project involve anything that would put a participant at risk (e.g. exposure to any unusual stimuli, physical exercise, pain, deprivation of physical requirements, deception, collection of biological specimens, etc.) or any information that might be considered highly personal or highly sensitive (e.g. sexual preference/activity, drug use, criminal behavior, etc.)?	____*	____
6. Does the research involve participants who are clinical patients or individuals who are unable to give personal consent for reasons of age (minors <18 years old), mental status, legal, or other such status? If your research involves minors, but you checked "YES" to both K1 and K2 in the section above, you may check "NO" for this item. However, if either K1 or K2 have been checked "NO," and your research involves minors, your research is NOT eligible for exempt status and you must submit an expedited form delineating appropriate consent/assent procedures (see FAQ page and sample consent/assent form on IRB website for more information).	____*	____
7. Will any demographic information be collected for this experiment (e.g. age, sex, ethnicity, race, employment, height, weight, family, marital status, etc.)?	____	____
If YES, will you use procedures to protect the identity of the participants? Address the following: how will you keep demographic data separate from research data? Or if that is not applicable: what other procedures will you use to ensure that including such data will not reveal the identity of the participants? _____	____	____*
8. Will participants be informed that participation is voluntary, they are free to withdraw from the study at any time and are not required to answer any questions or participate in any procedures that they do not want to?	____	____*

*** If you checked ANY of the spaces marked with an asterisk, your research is NOT eligible for exempt status and you must instead complete and submit the Expedited/Full Review IRB Protocol form.***

All researchers must submit a Certificate of Completion of National Institutes of Health (NIH) Office of Extramural Research Web-based training Course: "Protecting Human Research Participants" (Required by IRB as of July 1, 2015) A link to this course can be found on the IRB webpage.

Additional information, including other forms and FAQ's, is available at the IRB website at www.strose.edu, click on Academics, then Office of the Provost, then Institutional Review Board (IRB).

Researchers, do not write below this line. This section is to be completed by the IRB representative.

Action:

_____ Approved

_____ Revision Requested

_____ Denied. Please submit Expedited/Full Review Protocol to IRB for consideration according to the guidelines for Exempt/Full Review Protocols.

IRB Exempt Reviewer:

_____ Print Name

_____ Signature

_____ Date

Both copies should be signed and returned to the appropriate office. Once approved, one copy will be returned to the researcher and one copy will be maintained on file indefinitely.