

San José State University
Human Subjects- Institutional Review Board

Request to Use Human Subjects in Research
Cover Sheet

Date submitted: _____ Project Period: From: _____ To: _____

Funded by: _____

Name: _____ Department: _____

Phone: Work: _____ Home: _____ Email Address: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Check one:

SJSU Faculty Member _____

SJSU Student _____

SJSU Staff _____

Non-SJSU Investigator _____

Other (please describe) _____

Title of Proposed Project: _____

Abstract: _____

Number of Subjects: _____ Age of Subjects: _____

Type of Subjects: _____

Proposed research method: _____

What Kinds of Data Will Be Collected: _____

Is a copy or description of each data collection instrument attached: YES _____ NO _____

Are procedures to protect confidentiality delineated: YES _____ NO _____

Are agreements from participating institutions (on their letterhead) included: YES _____ NO _____

Is a consent form attached: YES _____ NO _____

Is it on SJSU letterhead? YES _____ NO _____

Possible Risks: _____

Category of Risk: _____

A. Research involving only minimal risks to human subjects: Probability and magnitude of harm or discomfort are no greater than they encounter in daily life.

B. Research involving reasonable risk to human subjects: Risks to the subject are reasonable in relation to anticipated benefits to the subjects and the importance of the knowledge that may reasonably be expected to result.

Please submit two copies of the completed protocol and supporting materials to:

HS-IRB Coordinator
Graduate Admissions and Program Evaluations
San José State University
One Washington Square
San José, CA 95192-0025.

For questions call the HS-IRB Coordinator at (408) 924-2480.

Responsible Faculty Member Form

It must be submitted with all student research protocols.

Title of proposed project: _____

Student Investigator(s): _____

Responsible Faculty Member(s): _____

I (we), the undersigned, have reviewed the above named study and believe the research conforms to federal, state, and SJSU policy for the protection of human subjects in research. Further, I (we) will monitor the course and conduct of the proposed research.

Faculty Signature: _____ Date: _____ Dept. : _____

Email Address: _____

Verification of Translation Accuracy

Title of Proposed Project: _____

I, the undersigned, verify that all translated materials related to the above named study reflect the intent and spirit of the English text.

Signature: _____ Date: _____ Phone: _____

Mailing Address: _____

Extension of Time Request Format

Name: _____ Dept.: _____

Phone work: _____ home: _____

Email Address: _____

Address: _____

Title of project: _____

Reason for request: _____

Changes or significant events that have occurred during the approval period:

Include a copy of the original protocol.