MINNESOTA STATE UNIVERSITY MANKATO

Application for the Conduct of Human Subjects in Research

This form must be submitted and approved before any research project conducted at the University or under its auspices involving human subjects or their data can be started. This means that IRB review is necessary prior to recruitment and data collection for all research, regardless of design, that involves human subjects. The principal investigator of an approved research project is responsible for assuring compliance with University policy (Protection of Human Subjects in Research) and applicable law (45 CFR 46) including co-investigators and student investigators. A student cannot serve as principal investigator on a research project. This includes student investigators who might also be University faculty or staff. Although the IRB is charged with an oversight role, we also take seriously the promotion of human subjects research. Toward that end, please don't hesitate to reach out to us with questions big and small at irb@mnsu.edu.

Ethics Training: Please remember to upload the CITI certificate for all investigators to their IRBNet profiles prior to submitting this application for review.

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1. PROJECT INFORMATION

1a. Title of Project: Click or tap here to enter text.

1b. Type of Application: Select
(If submitting a modified application, please type all modifications in BOLD text.)

1c. Principal Investigator: Click or tap here to enter text.
(name, department, and email)

1d. Co-Investigator(s): Click or tap here to enter text.
(name, department, and email)

1e. Student Investigator(s): Click or tap here to enter text.
(name, department, and email)

1f. External Investigator(s): Click or tap here to enter text.
(name, institution, and email)

Documentation: Please remember to upload all data collection, interview, and other documents when submitting this application for review.

2. QUALIFICATION

2a. Does the project involve human subjects or their data/information? Select

2b. Is the project intended to develop or contribute to generalizable knowledge? In other words, is there an intention or possibility of publishing and/or presenting the results? Select

2c. Is the project intended to being published or presented beyond your department/institution? Select

2d. Does the project involve activities authorized by a public health authority, criminal just agency, or state or federal intelligence or security agency? Select
If yes, please explain:

Documentation: Please remember to upload all data collection, interview, and other documents when submitting this application for review.

3. SUBJECT RECRUITMENT

3a. Approximately how many subjects will be recruited? Click or tap here to enter text.

3b. What will be the end date (month and year) of subject recruitment and data/information collection? Please enter the month and year, or "Ongoing". Click or tap to enter a date.

3c. Will subjects be recruited from among a vulnerable population such as minors, prisoners, pregnant women, cognitively impaired adults? Select

3d. Please describe in detail how subjects will be recruited and how informed consent (and assent, if relevant) will be obtained:

3e. Do any of the investigators have a pre-existing relationship with potential subjects? Select
If yes, please explain:

3f. Please describe any potential risks of participation, recognizing that no project is free of risk

3g. Please describe any internal and/or external funding in support of the project:

3i. Please describe any deception that will be used in the project:

Documentation: Please remember to upload all recruitment, consent, and assent documents when submitting this application for review.

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4. DATA/INFORMATION COLLECTION

4a. Will primary data/information be collected? Select

4b. Will secondary data/information be collected? Select

4c. Will an online platform be used to collect data/information? Select
If yes, please enter the URL:

4e. Please describe in detail how subject privacy and confidentiality will be protected during recruitment, data collection, and data analysis and maintenance.

Documentation: Please remember to upload all data collection, interview, and other documents when submitting this application for review.

5. INFORMED CONSENT/ASSENT

5a. Do you seek a waiver of consent (e.g., consent will not be obtained)? Select

If yes, please indicate all that apply:

- **i.** The project carries no more than minimal risk to the participants: Select
- **ii.** The project could not realistically be carried out without waived consent: Select
- **iii.** If the project involves using identifiable private information or identifiable biospecimens, the research could not practicably be carried out without using such information or biospecimens in an identifiable format: Select
- **iv.** The waiver will not adversely affect the rights and welfare of the participants: Select
- **v.** If deception was used, subjects will be debriefed after participation: Select

5c. Unless a waiver of consent was requested above, please describe in detail how informed consent/assent will be obtained:

Documentation: Please remember to upload all data collection, interview, and other documents when submitting this application for review.

6. RESEARCH WITH TRIBAL NATIONS AND/OR INDIGENOUS POPULATIONS

6a. Does the research project involve working with Indigenous populations and/or organizations, or within the jurisdiction of federally recognized American Indian/Alaskan Native Tribal governments/nations? Select
If yes to any part:

i. Does the project have approval from each tribal nation's research review process (IRB/Tribal Council/etc.)? Select

6b. Please describe in detail how relationships with the communities have been or will be built and how the procedures for subject recruitment, informed consent, and/or data collection will recognize and respect Tribal sovereignty?

Documentation: Please remember to upload all data collection, interview, and other documents when submitting this application for review.

7. REQUIRED STATEMENTS ON AN INFORMED CONSENT FORM

If you have any questions about this research study, contact {Principal Investigator] at {phone & email]. If you have any questions about participants' rights and for research-related injuries, please contact the Director of the Institutional Review Board at 507-389-1242 or irb@mnsu.edu.

If you would like more information about the specific privacy and anonymity risks by online surveys, please contact the Minnesota State University, Mankato IT Solutions Center (507-389-6654) and ask to speak to the Information Security Manager.

Your decision whether to participate will not affect your relationship with Minnesota State University, Mankato, and refusal to participate will involve no penalty or loss of benefits.

I have read this consent form and I fully understand the contents of this document and voluntarily consent to participate. I attest that I am 18 year of age or older. All of my questions concerning this research have been answered. A copy of this form has been offered to me.