## **External IRB Application**

This form is for individuals who are (1) not affiliated with CBU, but wish to conduct research approved by their home institution with CBU students, staff, or faculty, or (2) affiliated with CBU, but seeking to do research at CBU that has been approved by another IRB.

**Principal Investigator (PI) Information**

**PI Name:** Click here to enter text.

**PI Preferred Salutation:** Choose an item.

**PI college/school at CBU:** Click here to choose a School

**PI college/school if unaffiliated with CBU:** Click here to enter text.

**PI Position (Asst. Prof, Undergraduate student, etc.):** Click here to enter text.

**PI email:** Click here to enter text.

**PI phone:** Click here to enter text.

**PI Date of most recent CITI HSR Certification**: Click here to enter a date.

**Co-PI Information** (delete this section if there is no Co-PI; copy if additional PIs need to be listed).

**Co-PI Name:** Click here to enter text.

**Co-PI Preferred Salutation (.):** Choose an item.

**Co-PI college/school at CBU:** Click here to choose a School

**PI college/school if unaffiliated with CBU:** Click here to enter text.

**Co-PI Position (Asst. Prof, Undergraduate student, etc.):** Click here to enter text.

**Co-PI email:** Click here to enter text.

**Co-PI phone:** Click here to enter text.

**Co-PI Date of most recent CITI HSR Certification**: Click here to enter a date.

**Research Assistant (RA) Information** (delete this section if there are no RAs on this project; copy as needed if additional RAs need to be listed.)

*Note:* A research assistant includes any person who will assist in recruitment of human participants, data collection, data entry/cleaning, data analysis, etc. Engaging in a literature review or write up of results (already analyzed) does not constitute IRB-regulated research assistant activities.

**RA Name:** Click here to enter text.

**RA email:** Click here to enter text.

**RA Date of most recent CITI HSR Certification:** Click here to enter a date.

**Date of Application to CBU:** Click here to enter a date.

**Research Project Title:** Click here to enter text.

**The approved protocol was reviewed/approved as (select one and complete category of determination/approval; e.g., exempt category 2(ii)):**

|  |  |  |
| --- | --- | --- |
|  | **Category of approval** | **Criteria met and subcategory** |
|[ ]  Exempt | Click here to enter text. |
|[ ]  Expedited | Click here to enter text. |
|[ ]  Full Board | Click here to enter text. |

**Name of Institution/Agency who has approved the protocol:** Click here to enter text.

**FWA# (Federalwide Assurance number of approving IRB):** Click here to enter text.

**Administration Contact Information for External IRB:** Click here to enter text.

**Name of Faculty Advisor at home institution, if applicable:** Click here to enter text.

**Contact Information of Faculty Advisor, if applicable:** Click here to enter text.

**If Unaffiliated with CBU:**

PIs who are unaffiliated with CBU must find a School/College within CBU to sponsor their research. This request must be signed by the CBU Faculty Liaison and the dean of that school.

**Campus Liaison (CL) Name:** Click here to enter text.

**Sponsoring CBU College/School:** Click here to choose a School

**CL Email:** Click here to enter text.

**CL Date of most recent CITI HSR Certification**: Click here to enter a date.

**Dean Name:** Click here to enter text.

**Dean Email:** Click here to enter text.

**Required Attachments:**

In a single pdf, please submit this form, followed by the approval letter from the external IRB, the full submission approved by the external IRB (including all relevant documents, such as informed consent forms, data collection instruments, and recruitment materials), and current certification of training in human subjects research for all PIs, Co-PIs, Faculty Advisors, Campus Liaisons, Research Assistants, etc. All materials should be sent to IRB@calbaptist.edu. If this is a project that has not been approved by another IRB, please follow the protocol for a new CBU IRB application (exempt, expedited, or full board), with this form as the *first* document.

**In submitting this form, the PI ensures that the external IRB takes full responsibility for the approved protocol (e.g., initial and continuing review, approval, and the reporting of any unanticipated problems/events). The PI also agrees to conduct the research in the manner approved by the external IRB, following all policies and procedures of the external IRB/institution as well as the policies and procedures of CBU while conducting research on CBU’s campus/with CBU students, staff, or faculty. The CBU IRB should receive all relevant documentation to the ongoing research as well as the primary IRB (e.g., adverse events reporting, renewal approvals, etc.) The PI accepts the responsibility of protecting the rights and well-being of each human participant as more important than achieving the goals of the research and, as such, all laws, regulations, and policies (federal, state, local) relevant to the protection of human participants will be followed.**

**Signatures** (typed signatures are sufficient; severe penalties are enforced when false signatures are typed by someone other than the named individual. Delete any unnecessary fields.)

*As the PI/Campus Liaison, I/we certify this application and the attachments are an accurate and complete description of the proposed research and we agree to protect the rights and welfare of all human participants involved in the research as described herein. If RAs are involved in this project, I certify that I/we will oversee their work to ensure the proper protocols are being conducted.*

**PI Signature and Date:** Click here to enter text. Click here to enter a date.

**Co-PI Signature and Date:** Click here to enter text. Click here to enter a date.

**Campus Liaison Signature and Date:** Click here to enter text. Click here to enter a date.

*As the faculty advisor, I agree to supervise this student’s research and ensure the rights and welfare of all human participants are protected, as described in this protocol.*

**Faculty Advisor and Date:** Click here to enter text. Click here to enter a date.

*As the dean I have reviewed and support this research at California Baptist University. I am aware that my signature indicates that I approve of research of this kind proceeding.*

**Dean Signature and Date:** Click here to enter text. Click here to enter a date.

Note that if approved, the PI is responsible for the recruitment of participants; the IRB does not assist/provide means for participant recruitment.