

Version 01/01/2021

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| **Tracking #** | Reserved for IRB Committee |
| **Date Approved:** | Reserved for IRB Committee |
| **Date Submitted:** | Choose the Date |
| **Instructor:** | Enter Instructor’s Name |
| **Class Title & Number:** | Enter Class Title and Number |
| **Semester:** | Enter Semester |

**CERTIFICATION FOR STUDENT**

**CLASS PROJECTS**

**Instructor’s Assurance:** *By submitting this application, I attest that I am aware of the applicable principles, policies, regulations, and laws governing the protection of human subjects in research and that I will ensure that all student projects adhere to these principles. I also certify that all students submitted a completed FORM A application for review and that all human subjects’ protections were met. I also certify that I will maintain these forms for no less than three years and I understand that the Chair of the IRB may periodically audit my records. I also certify I have completed CITI training and have granted academic credit for these students to complete CITI training.* *All forms will be submitted by email to* [*irb@southern.edu*](mailto:irb@southern.edu)*.*

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| --- | --- |
| Enter Signature | Choose the Date |

**Instructor’s Signature Date**

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| **1. Student Name(s):** | | | |
| Enter Student Name(s) | | | |
| **2. Title of Project:** | | | |
| Enter Title of Project | | | |
| **3. Informed Consent Attached?** | **4. Confidentiality Assured?** | | **5. Study is Minimal Risk?** |
| Yes  No | Yes  No | | Yes  No (if No, submit Form A to the IRB) |
| **6. Permission was obtained from other sites to conduct research**  (if applicable): | | **7. Students will complete any CITI trainings related to their studies:** | |
| Yes  No | | Yes  No | |
| **8. Date of Project Completion:** | | | |
| Enter Estimated Completion Date | | | |

**To add more Projects, select the last project/table above and click on the ‘+’ icon located in the right bottom corner.**

**Note the ‘+’ icon is available only upon selection of the table.**

