

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 should be submitted by email to* [*irb@southern.edu*](mailto:irb@southern.edu)*.*

 Choose the Date

**Instructor’s Signature Date**

|  |  |  |  |
| --- | --- | --- | --- |
| **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** | | | |
| Choose the Date | | | |

|  |  |  |  |
| --- | --- | --- | --- |
| **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** | | | |
| Choose the Date | | | |

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

**(Note, the ‘plus’ icon available only upon selection of the table):**

