

Institutional Review Board (IRB) Approval Request Form
Permission to Survey LMU Faculty, Staff, and/or Students
*(Information must be typed, handwritten copies will be returned)

Title of research:

Date research will begin:

Expected completion date:

Is proposal for external funding: **Yes:** **No:**

Agency:

Deadline:

Signing this form indicates that you have followed LMUs IRB policies and procedures and that you will provide for the protection of the rights and welfare of the individuals who participate in this research. You also agree to submit any significant changes in the procedures of your project to the IRB for prior approval.

Name of Investigator:

School/Department/Program:

- ☐ Student
☐ Faculty
☐ Other (please describe)

Phone:

Date:

Email:

Description of Research

- a. Purpose of research:

- b. Nature of data to be collected:

- c. Data collection procedures (include copy of survey instrument):

d. Method of:

- Selection:
- Recruitment:
- Communications:

Signatures

Principal Investigator: _____ Date: _____

Signature of Professional School VP _____ Date: _____

Signature of Vice President for Academic Affairs (VPAA) _____ Date: _____

PLEASE SIGN AND RETURN TO GRANT LEE 108.

Signature of Professional School VP (Conditional Requirement): *If research is conducted within the Duncan School of Law or School of Medical Sciences the Vice President signature is required in addition to the LMU Vice President for Academic Affairs (VPAA).*

Signature of VP for Academic Affairs (Required): *All research conducted at Lincoln Memorial University that involves human participants associated with the LMU current faculty, staff or students, directed through the oversight of an Institutional Review Board requires the approval of the VPAA.*

Problems or concerns regarding these activities should be addressed to the Office of Research, Grants and Sponsored Programs at 423-869-6834 or IRB@LMU.net or Dr. Kay Paris, IRB Chair at 423-869-6323 or kay.paris@LMU.net.