

**Request for Continuing IRB Approval
Part 1 – Administrative Information**

All information must be typed; handwritten applications will be returned

1. Protocol Information

LMU IRB #:

Title:

Protocol approval date:

2. Contact Information

2.1. Principal Investigator (PI)

Name:

Department:

Email address:

Chair/Supervisor:

Email of Chair/Supervisor:

Status (student, faculty):

2.2. Please list current members of the research team: (add additional rows if necessary)

Name	Email Address	College and Department

3. Funding Information

3.1. Is this research being funded by an external funding agency? Yes No

Part 2 – Study Overview

1. Please provide a lay summary of the study purpose and the general research questions/objectives. [Click here to enter text](#)

2. Progress report for the past year (please explain the progress of the study since the initial IRB approval or last annual renewal of approval) [Click here to enter text](#)

Please select all of the types of research activities that were conducted on this protocol over the past year

- Active collection of data (not human biological materials or physiological data)
- Active collection and use of human biological materials or physiological data
- Use of physiological or biomedical devices, or drugs, biologics, or chemical agents
- Use of existing data (not human biological materials)
- Use of existing human biological materials

Please summarize the research activities during the past year:

During the past year, were there any participant withdrawals from the study or complaints about the research activities?

No Yes, please explain [Click here to enter text.](#)

During the past year, were there any unexpected problems or adverse events involving risks to participants?

No Yes, please explain [Click here to enter text.](#)

During the past year, were there any changes to your study (including with recruitment, informed consent, study design and/or research procedures, research personnel, study location, etc.)?

No Yes, please explain [Click here to enter text.](#)

3. Research activities planned for the next year

3.1. Do you plan to recruit new participants over the next year?

No Yes

3.2. Do you plan to collect new or additional data from current research participants?

No Yes

Signature

This page is to be signed by the principal investigator. If the principal investigator is an undergraduate or graduate student, the faculty chair or supervisor must also sign in the lower box.

Submission Information

Send original copy of the continuation request form and all supporting materials to:

Office of Research, Grants and Sponsored Programs
Lincoln Memorial University IRB, Grant Lee
6965 Cumberland Gap Parkway
Harrogate, TN 37752

An electronic copy of the completed application and all supporting documents is required, and should be submitted to irb@lmunet.edu. Signatures are not required on the electronic copy; however, proposals will not be processed until the completed paper copy with signatures, has been received by the ORGSP.

For questions, comments, or assistance in completing the form, contact the ORGSP at 423-869-6485.

Principal Investigator

I certify that the information I provide in this application is correct and complete. I also pledge that I will not change any of the procedures, forms, or protocols used in this study without first seeking review and approval from the Institutional Review Board (IRB) for Human Participants.

Name/Signature of Principal Investigator

Date

Name/Signature of Chair or Supervisor

Date

Approved as: Exempt / Category ____ Expedited / Category__ Full

Approved by IRB Chair

Date