The Evergreen State College
HUMAN SUBJECTS REVIEW APPLICATION

The Use of Human Subjects policy at Evergreen took effect in January 1979 to protect the rights of humans who are participants in research activities. If you are conducting a research project that collects data or personal and identifying information about living human beings, you must carefully consider the ethical implications of your work and may be required to complete this application in collaboration with your faculty sponsor.

All students, staff, and faculty conducting human subjects research at the college must ensure that participation is **voluntary,** that **risks are minimized and justified by the benefits of the proposed study,** and that the **research is conducted with justice and equity**. All potential physical, psychological, emotional, economic, and social risks should be fully considered by the researcher and explained to the participants in the study. Similarly, the researcher must explain to participants the benefits, the course of study, and purpose of the intellectual inquiry. This explanation must be clear. In almost every instance, it should be provided in writing and include a written consent agreement that the participants sign or affirm electronically.

The human subjects review (HSR) process provides independent oversight of research about living persons to ensure the protection of human participants. Researchers have primary responsibility for employing sound ethical principles to protect the human participants in their projects. Similarly, faculty who supervise student researchers have primary responsibility for ensuring that those researchers understand and employ sound ethical principles. For guidance on Evergreen's HSR procedures and general information about how to design and conduct human subjects research, please visit http://www.evergreen.edu/humansubjectsreview.

A COMPLETE APPLICATION INCLUDES THE FOLLOWING:

- **A completed HSR application cover sheet signed by both the applicant/project director and faculty sponsor, immediate supervisor, director, or dean**
- **Answers to the six questions below**
- **Copies of materials (emails, posters, advertisements, etc.) you will use to recruit subjects for your project**
- **An informational letter to subjects**
- **An informed consent agreement for subjects**
- **Additional materials as required by specific projects (copies of interview scripts, surveys; cooperative agreements with outside organizations such as schools, tribal governments)**

Procedure for Application:

1. The application is attached to this page. Use the first form (page 2) as the cover sheet for your application, and then answer questions 1 through 6 (page 3) on additional sheets of paper. This is a public document. Type or print your application and use complete sentences. Prior to submission, check your documents carefully for accuracy, clarity, and consistency. Documents with poor writing or significant errors will be returned without review.
2. **If you are a student**, you must consult closely with your faculty sponsor on this application. Your sponsor will ensure that you have a well-designed study; you have prepared appropriate questions if you are conducting a survey or questionnaire; and you have completely and accurately completed all parts of the application form including **the six questions, the letter to potential subjects, and the consent form**. Your sponsor must sign the application; you are to sign as the Project Director.
3. Submit your completed application to the HSR review coordinator, Library 3809. **Questions?** Call (360) 867-6670
4. **If you are doing an Individual Study Contract (ILC)**, it is important that you fill out this application prior to registration, unless you specifically list the HSR application as one of your learning activities. As long as your HSR application has been submitted to the HSR coordinator prior to the deadline, your ILC can be reviewed and approved by the deans, and subsequently registered. **You will not be allowed to register your contract without submitting this completed human subjects review application.**
5. **If you are a faculty member whose class is conducting research**, please complete an application for the entire class if the research is generalizable and if the projects of individual students are sufficiently uniform to be addressed in a blanket application. Please consult with the HSR coordinator before making an assignment that requires students to submit and obtain approval of a HSR application.
6. For most studies, a member of Evergreen's Institutional Review Board (IRB) will review applications once each week. The HSR coordinator will then send an email notifying the project director of the results of that expedited review. **Please allow at least ten working days for this notification**. Some projects require revisions after the first review. If your project requires review by the full IRB, in accordance with federal requirements, we will notify you. Be advised that such reviews can take a month or more.

evergreen **HUMAN SUBJECTS REVIEW APPLICATION PACKET**	Return this application to: **Grants and Foundation Relations** **Library 3209; MS: L3821** **The Evergreen State College** **Olympia WA 98505** Phone: 360-867-6670

Cover Sheet

Research project title: _____

Name of Applicant(s)/Project Director(s): _____

Evergreen ID #: A_____ ____Undergraduate Student ____Graduate Student ____Faculty/Staff

Mailing Address or Mailstop: _____

Phone Number: _____ Email: _____

My use of Human Subjects is for a(n):

___Academic Course or Program ___Individual Learning Contract ___Internship Learning Contract

Date application submitted: _____

Anticipated project start date: _____ Anticipated project end date: _____

Faculty sponsor, immediate supervisor, director or dean: _____

Funding agencies/research sponsor (if applicable): _____

INDICATE IF THE PROJECT INVOLVES ANY OF THE FOLLOWING:

_____ Vulnerable populations (circle: minors, prisoners, individuals with intellectual disabilities). Work with vulnerable population usually requires additional safeguards as well as the consent of legal guardians (parents, institutions, etc.)

_____ Pregnant women. Only non-invasive and minimal risk procedures allowed.

_____ A collaborating organization (such as a tribal government, school, residential institution, etc.). Collaborative research agreements are frequently required when research happens in schools, institutions, on tribal lands, or among tribal people. Many of these organizations have their own requirements for research review and approval.

Certification. We understand that the policies and procedures of the Evergreen State College apply to all research activities involving human subjects which are being performed by persons associated with the College and, therefore, that these activities cannot be initiated without prior review and approval, as required, by the Institutional Review Board.

X_____

Signature of Applicant(s)/Project Director(s) ***Date***

I certify to the policies and procedures listed above and I have reviewed this application for content, consistency, clarity, and accuracy. To the best of my knowledge, the application meets Evergreen's Human Subjects Review requirements.

X_____

Signature of Faculty Sponsor or Immediate Supervisor ***Date***

Six Questions

1. How would you summarize, in the form of an **abstract**, the **nature** and **purpose** of your research project?

2. What are the **procedures** to which humans will be subjected, i.e., questionnaires, interviews, audio or video recordings, etc.? When, where, and how will these procedures be carried out? **In the case of questionnaires or interviews, please attach a copy of the questions you will be asking.**

3. How will the **recruitment of human subjects** for your proposed project be carried out? Include your recruitment criteria and procedures. Attach copies of any advertisements, flyers, announcements, or messages you will use to recruit participants.

4. What are the possible **risks to the human subjects**? Specify possible kinds and degrees of risks, e.g., minimal, emotional risk in the form of distress or embarrassment. Outline the precautions that will be taken to minimize these risks, including methods of ensuring confidentiality or obtaining a release to use collected material and information. For more information, visit http://www.evergreen.edu/humansubjectsreview/risk.htm.

   NOTE: The concept of risk goes beyond obvious physical risk. It could include risk to the subject's dignity and self-respect, as well as emotional, psychological, legal, economic, and behavioral risk. Risk could, for example, include the potential for jeopardizing one's employment or standing in an academic program, organization or workplace, community, or other group.

5. What are the specific, anticipated **benefits** to be gained by completing the project? These may be at an individual, institutional, or societal level. How do these benefits justify the risks identified in question 4?

6. **How will the information derived from this activity be used?** To whom will the information be distributed, and if made, how will the promise of **confidentiality** be kept or carried out in the final product?

Informed Consent: Letters to Subjects and Consent Agreements

Human subjects of research must be fully informed about the project they are asked to participate in, and they must give their voluntary consent. Most often this is achieved with a letter from the researcher to the subject and a signed informed consent agreement from the subject. Letters and informed consent agreements should be written in plain language and must state:

- The purpose and procedures of the research you are conducting. (What is the purpose of your research? What is the subject area that you are investigating? What specifically will your subjects experience when they participate in this research project?)
- Risks and discomforts that might result from this research.
- Your plans to minimize or eliminate risks or discomforts.
- Potential benefits of the research.
- Provisions for confidentiality.
- An explanation that participation is voluntary and the participant has the right to discontinue participation at any time.
- Statement about regarding any future use of information.
- Contacts for additional information. (Contact information for the IRB Administrator, Karen Gaul, should be included along with that of the researcher.)

A template letter and consent agreement are included on the following pages for projects involving interactions where it is possible to get a signature. If you are conducting research using online surveys, it is often impractical to collect signed consent forms. We also provide two templates that you may use to achieve consent in such cases, one for confidential surveys (where the identity of the survey take may be known or inferred from the responses, and one for anonymous surveys (where the identity of the survey taker cannot be known or inferred from the responses). Use such documents as the first page of online surveys. All of ***these sample documents are appropriate models only for projects that pose minimal risks to human subjects. More information may be required for projects with more risk.***

Please be advised that, after initial review of your application and depending on the procedures and risks entailed in your specific project, you may be required to provide additional information to research participants. If you have questions, contact us at irb@evergreen.edu or 360-867-6670.

Letter Template to Subject for Interviews

Dear **[Participant]:**

I am a student at The Evergreen State College. As part of my coursework in the class, **[Class Title]**, I will be conducting a research project titled "**[Project Title]**". The purpose of my project is to **[provide a clear and accurate statement of the purpose and objectives, using lay terms; do not repeat the study title].** I will be conducting **[research activity, e.g. survey, interview, observation, etc.; include the time commitment of the participant and method of documentation.]**.

Any risks to you are minimal, and would likely include **[description of potential risks or discomforts]**. **[Plans to minimize or eliminate risks or discomforts.]** There will be no compensation of any kind available for your participation, which is completely voluntary. You may withdraw your participation at any point or skip any question you do not wish to answer without penalty. You may not directly benefit from this research; however, we hope that your participation in the study may **[describe societal benefit]**.

I will **[description how confidentiality will be secured, maintained and how data will be disposed of]**. I may share part or all of this **[research activity]** with **[provide a list of all who will have access to this data and their roles in your project]**.

As mentioned above, I will use your responses as resource material for my research project on **[project topic]**. At your request, I will provide you with a copy of the **[research product, i.e., research paper, documentary, etc.]**. **[Describe all ways in which the responses will be used and/or shared; this might include a presentation to the class, a public forum, presenting at a conference, etc.].**

Your **[sample]**, collected as part of the research, **[statement of future use, shared:** could be used for future research studies or distributed to another investigator for future research studies, with all identifiable information removed, without additional informed consent from the subject or the legally authorized representative; **or statement of future use, not shared:** will not be used or distributed for future research studies, even if identifiers are removed.**]**

If you have any questions about this project or your participation in it, you can call me at **[phone]**. My email address is **[email]**. If you have questions concerning your rights as a research subject or experience problems as a result of your participation in this project, contact Karen Gaul, IRB administrator at The Evergreen State College, Library 2008, Olympia, WA 98505; Phone 360.867.6009.

Thank you for your participation and assistance!

Sincerely,

[Researcher]

Sample Informed Consent Agreement for Interviews

I, _____, hereby agree to serve as a subject in the research project titled "**[Project Title]**". It has been explained to me that its purpose is **[purpose and objectives]**. The research activity I will participate in is **[research activity]**.

I have been informed that the information I provide will only be used for **[purpose and objectives of research project]**, and my identity will be kept confidential and no identifying information about me will be included. **[Researcher]** has agreed to provide, at my request, a copy of the **[research product]**. **[Researcher]** has also informed me that **[ways in which the responses will be used and/or shared].**

I understand that the risks to me are minimal, and would likely be **[potential risks or discomforts]**. I agree to **[participate in the research activity]** and to have that **[activity] [method of documentation]** for this project. I have been told the **[documentation]** will only be shared with **[Researcher]** and **[Other Recipients of Information]** and will be destroyed when the project is finished.

I understand that my **[sample]**, collected as part of the research, **[statement of future use, shared:** could be used for future research studies or distributed to another investigator for future research studies, with all identifiable information removed, without additional informed consent from me or a legally authorized representative; **or statement of future use, not shared:** will not be used or distributed for future research studies, even if identifiers are removed.**]**

There will be no compensation of any kind available for my participation. I have been told that I can skip any question or stop the interview and withdraw my full participation from the study at any time without penalty. If I have any questions about this project or my participation in it, I can call **[Researcher Name]** at **[phone]** or **[email]**. Likewise, if I have questions concerning my rights as a research subject or I experience problems as a result of my participation in this project, I will contact Karen Gaul, IRB administrator at The Evergreen State College, Library 2008, Olympia, WA 98505; Phone 360.867.6009.

I understand that my participation in this project is completely voluntary, and that my choice of whether to participate in this project will not jeopardize my relationship with The Evergreen State College. I am free to withdraw at any point before or during the interview. I have read and agree to the foregoing.

Signature_____ Date_____

Template for Confidential Online Survey Consent Form

for surveys that present no more than minimal risk where the participant may provide identifiable information or are known to the researchers

You are being invited to participate in a research study titled ***["Project Title"]***. This study is being done by ***[Name of Researcher(s)]*** from The Evergreen State College.

The purpose of this research study is ***[provide participants with a clear and accurate statement of the purpose and objectives of the research, use lay terms; do not repeat the study title].*** If you agree to take part in this study, you will be asked to complete an online survey/questionnaire. This survey/questionnaire will ask about ***[topic of questions]*** and it will take you approximately ***[XX]*** minutes to complete.

You may not directly benefit from this research; however, we hope that your participation in the study may ***[describe societal benefits]***.

Risks to you are minimal and are likely to be no more than mild discomfort with sharing your opinion. To the best of our ability your answers in this study will remain confidential. With any online related activity, however, the risk of a breach of confidentiality is always possible. We will minimize any risks by ***[describe how confidentiality will be secured, maintained, and how data will be disposed of].*** Your participation in this study is completely voluntary and you can withdraw at any time. You are free to skip any question that you choose.

Your survey responses, collected as part of the research, **[*statement of future use, shared*: could be used for future research studies or distributed to another investigator for future research studies, with all identifiable information removed, without additional informed consent from the subject or the legally authorized representative; *or statement of future use, not shared*: will not be used or distributed for future research studies, even if identifiers are removed.]**

If you have questions about this project or if you have a research-related problem, you may contact the researcher(s), ***[name(s), phone number(s), email]***. If you have any questions concerning your rights as a research subject, or you experience problems as a result of participating in this research project, you may contact Karen Gaul, IRB Administrator at The Evergreen State College at 360.867.6009 or irb@evergreen.edu.

By clicking "I agree" below you are indicating that you are at least 18 years old, have read and understood this consent form and agree to participate in this research study. Please print a copy of this page for your records.

I Agree	I Do Not Agree

Template for Anonymous Online Survey Consent Form

for surveys that present no more than minimal risk where the participants provide no identifiable information and are unknown to the researchers

You are being invited to participate in a research study titled ***["Project Title"]***. This study is being done by ***[Name of Researcher(s)]*** from The Evergreen State College.

The purpose of this research study is ***[provide participants with a clear and accurate statement of the purpose and objectives of the research, use lay terms, do not repeat the study title].*** If you agree to take part in this study, you will be asked to complete an online survey/questionnaire. This survey/questionnaire will ask about ***[insert topic of questions]*** and it will take you approximately ***[XX]*** minutes to complete.

You may not directly benefit from this research; however, we hope that your participation in the study may ***[describe societal benefits]***.

Risks to you are minimal and are likely to be no more than mild discomfort with sharing your opinion. The survey will not collect information that could be linked to you personally. To the best of our ability your answers in this study will remain anonymous. With any online related activity, however, the risk of a breach of confidentiality is always possible. We will minimize any risks by ***[describe how anonymity will be secured, maintained, and how data will be disposed of].*** Your participation in this study is completely voluntary and you can withdraw at any time. You are free to skip any question that you choose.

Your survey responses, collected as part of the research, **[*statement of future use, shared*: could be used for future research studies or distributed to another investigator for future research studies, with all identifiable information removed, without additional informed consent from the subject or the legally authorized representative; *or statement of future use, not shared*: will not be used or distributed for future research studies, even if identifiers are removed.]**

If you have questions about this project or if you have a research-related problem, you may contact the researcher(s), ***[insert name(s) and phone number(s)]***. If you have any questions concerning your rights as a research subject, or you experience problems as a result of participating in this research project, you may contact Karen Gaul, IRB Administrator at The Evergreen State College at 360.867.6009 or irb@evergreen.edu.

By clicking "I agree" below you are indicating that you are at least 18 years old, have read and understood this consent form and agree to participate in this research study. Please print a copy of this page for your records.

I Agree	I Do Not Agree