

**West Virginia Wesleyan College  
Institutional Research Review Board  
Application for Study**

<b>1. Title of Project:</b>	<b>Project #:</b>	For IRRB Use Only
<b>2. Investigator(s) Name(s):</b>		
Principal Investigator's Name:	PI's Box #:	PI's E-Mail:
	PI's Phone #:	PI's School/Department:
Co-Investigator's Name:	CO's Box #:	CO's E-Mail:
	CO's Phone #:	CO's School/Department:
Co-Investigator's Name:	CO's Box #:	CO's E-Mail:
	CO's Phone #:	CO's School/Department:
Co-Investigator's Name:	CO's Box #:	CO's E-Mail:
	CO's Phone #:	CO's School/Department:
<b>3. Proposed start date:</b>		
<b>Proposed end date:</b>		
<b>4. Type of review requested:</b>		
Exempt Expedited Full Board Request for renewal of previously-approved project		
<b>5. This research involves (<i>check all that apply</i>):</b>		
Collection or study of existing, data, documents, records or specimens, recorded without identifiers Normal education practices conducted in the established or commonly accepted educational settings Educational tests (cognitive diagnostic, aptitude or achievement) Observation of public behavior Surveys, interviews or hand-out for subjects over 18 Mail/Email Telephone Face-to-face Only surveys or interviews of elected, appointed or other public officials Audiotaping/videotaping (Specify: Food tasting and evaluation Research and demonstration projects Special populations (pregnant females, prisoners, wards of the state, adults with impaired decision-making capacity)		

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**6. Reason for conducting the research** *(describe in provided space AND check all that apply):*

Description:

- Professional scholarly activity
- Undergraduate class assignment
- Graduate class assignment
- Academic department requirement
- Other (Please specify: \_\_\_\_\_)

**7. A. Explanation of procedures involved** *(please continue on additional page if needed):*

**B. Explanation of identification and selection of subjects** *(please continue on additional page if needed):*

**8. Explanation of known risks to human subjects** *(please continue on additional page if needed):*

**9. A. Explanation of how records will be kept and disposed of** *(please continue on additional page if needed):*

**B. Explanation of how and where results will be used and reported** *(please continue on additional page if needed):*

**10. Please indicate any and all documents you are including in your submission** *(attach electronic copies to email submission and hard copies to your submission packet):*

- Informed consent
- Cover letter
- Written (including web-based)/spoken directions
- Questionnaire/Interview protocol/Coding sheet
- Permission from external institution on their letterhead

**11. Description of source of funding for study** *(please continue on additional page if needed):*

**12. Signatures of applicants and related parties:**

\_\_\_\_\_  
Principal Investigator/Faculty Advisor

\_\_\_\_\_  
Date

\_\_\_\_\_  
Co-Investigator

\_\_\_\_\_  
Date

\_\_\_\_\_  
Co-Investigator

\_\_\_\_\_  
Date

\_\_\_\_\_  
Co-Investigator

\_\_\_\_\_  
Date

**For Use By IRRB Committee Only**

Date Received:

Project #:

IRRB Committee Assignment:

Date Approved: