

## Guidelines

1. Before beginning the application, review pertinent materials concerning harm, risk, and informed consent available under [Overview](#). Templates for consent form, assent form and participation Information sheet will be available to you under [Resources](#). If your research involves minors or vulnerable population, check the relevant section under [Categories of Review](#) for additional regulations.
  2. Review the criteria listed under [Categories of Review](#) to determine your eligibility for the Exempt, Expedited or Full Review.
  3. Complete the appropriate form and submit it. Even projects that the applicant believes to be covered under the Exempt category need to apply for IRB review.
  4. Your submission to the IRB must include the application form and supporting documents (if any). Please note that the IRB may request applicants to provide additional information. This will be determined by the IRB on a case-by-case basis.
  5. Please note that for Exempt reviews you must allow 2 weeks for a response from the IRB. For Expedited reviews, 3 weeks and projects requiring a Full Review will receive a response within 4 weeks. For some applications, the committee may require more time to complete the review and approval process.
- I have carefully read the guidelines mentioned above.

Yes ▾

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## Personal Details

Please fill in all mandatory fields. If a mandatory field is not relevant to you, please write N/A in the textbox

First Name \*

Middle Name

Last Name

Email ID \*

HSR training completed? \*

Yes No

What is the title of your study ? \*

## **Guidelines**

Name of your thesis advisor\*

Department\*

State the expected duration of this study. Indicate the approximate start and end date \*

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### **Protocol Summary**

1. Provide a brief summary of the study including the objectives, research questions, hypotheses and broad information areas. \*

2. Describe briefly how this study will contribute to existing knowledge in the field. \*

3. Will you use only secondary data? If yes, state the data source here? Please write NA. for subsequent questions that do not apply to your study.\*

5. Describe briefly the profile of the study population. \*

6. Describe the data you want to gather from human participants.

7. Describe how data will be collected from human participants and provide an explanation for the methodologies selected with specific reference to the proposed research. \*

8. State the location(s) in which this study will be conducted. \*

9. Please check “Categories of IRB Review” and respond if the item on List 1 applies to this study. \*  
YES  
NO

10. Please indicate which item(s) from List 2 of “Categories of IRB Review” apply to this study and describe how. \*

11. Please state the expected duration of this study. Indicate the approximate start and end date. Please note that research projects not completed within two years or the stated duration, whichever is shorter, will require an application for extension. \*

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### **Participants & Informed Consent**

1. Describe how study participants will be recruited for this study. \*

## **Guidelines**

2. Indicate if participants will be given any money for their participation in this study? If yes, please explain the rationale for including monetary compensation. \*

Yes

No

3. Is your research expected to directly or indirectly benefit the participants? If yes, describe any benefits that individuals may expect from participation. \*

4. Describe the process for obtaining informed consent of research participants. Instruction: Include the Consent Form(s) with this application. \*

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## **Risk(s)**

1. Is this research process free of foreseeable risk to the study subjects? \*

2. Does the study pose more than minimal risk to the study participants?

3. Describe your strategy for minimizing potential risks.

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## **Data Safety**

1. Does your study involve recording the participants in any manner – audio or video? Y/N \*

2. Describe how you will protect the privacy and confidentiality of the study subjects. \*

3. Describe the nature and frequency of security check-ups (anti-virus and password updates) performed for your device. \*

4. Who will have access to the server on which you are storing the study data? \*

5. How do you plan to ensure a safe and secure backup of your data? \*

6. Please describe your plans for post-research data storage and/or disposal. \*

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## **Dissemination**

1. If you intend to share the research findings with the study subjects, please explain your communication strategy for doing so. \*

2. Describe how you intend to disseminate the study results with the larger academic, research, development and general community. Mark all that apply. \*

Peer Reviewed paper(s)

Conference Presentation(s)

Newspaper article(s)

Meetings with relevant stakeholder(s)

## Guidelines

Social Media

Online platforms/repository

Other (please specify)

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## Checklist\*

### Along with this application, I am submitting: \*

1. Completion certificate for human subjects research training for myself
2. Completion certificate for research training for co-investigators and staff, if relevant
3. Participation information sheet
4. Consent form
5. Assent form

If you do not have informed consent procedures in place, please explain why you are requesting a waiver.  
(Max 250 words)

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## Declaration \*

I understand the Ashoka University's policies concerning research involving human subjects and I:

- Agree to comply with all of Ashoka University IRB's policies, decisions, conditions, and requirements;
- Agree to accept responsibility for the scientific and ethical conduct of this research study;
- Declare that I have the requisite qualifications and experience to perform the research described in this document;
- Assure that all personnel who will work on this project have been completed the appropriate training for conducting research with human subjects and are fully conversant with the relevant procedures on ethical considerations;
- Undertake to keep the Ashoka University IRB fully informed on any changes to the proposed research or its details given in this application form subsequent to its submission (including change of contact details and changes in study personnel);
- Agree to submit a Research Closure form to the Ashoka University IRB upon completion of the research procedures outlined in this proposal.

Principal Investigator's Name\*

Principal Investigator's email id \*

## Guidelines