

## Guidelines

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.

1. Review the criteria listed under [Categories of Review](#) to determine your eligibility for the Exempt, Expedited or Full Review.
  2. 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.
  3. 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.
  4. 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 ? \*

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 summary of the study, including the objectives, research questions, hypotheses and broad information areas. \*
2. Describe briefly how this study will add 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. \*
4. Describe briefly the profile of the study population. \*
5. Describe the data you want to gather from human participants. \*
6. Describe how data will be collected from human participants and provide an explanation for the methodologies selected with specific reference to the proposed research. \*
7. State the location(s) in which this study will be conducted. \*
8. 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 an extension. \*

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### **Participant & Informed Consent**

1. Describe how study participants will be recruited for this study. \*
  2. Is your research expected to directly or indirectly benefit the participants? If yes, describe any benefits that individuals may expect from participation. \*
  3. Describe the process for obtaining informed consent of research participants. Instruction: Include the Consent Form(s) with this application. \*
  4. In case written consent is not being obtained, please explain why not. Describe other consent procedures which will be followed along with the rationale for this approach. \*
  5. Please indicate if the study subjects will include minors (those less than 18 years old). \*  
Yes  
No
  6. If the study subjects are more than 8 years of age, will you obtain written assent from the child? \*  
Yes  
No
  7. If the answer to the above question is no, please explain why. If the answer is yes, please explain the process. \*
  8. Please state if the research procedures include deception of any nature i.e. not stating or only partially stating the true purpose of the study to the study participants.  
Yes  
No
  9. Please describe the methodological rationale for the necessity of deception in this study. \*
  10. Please state whether study participants will be told the true purpose of the study on completion. If not, why not? \*  
Yes  
No
  11. Please indicate if fresh/new consent will be obtained from participants after they have been informed about the true nature of the study on its completion. \*
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## **Risk(s)**

1. Describe the potential risks (physical or psychological) that study participants may face as a result of participation in this study. \*
2. Describe your strategy for minimizing the potential risks described above. \*
3. Describe your plan for addressing any unanticipated adverse outcomes, such as complaints by study subjects or domestic violence reported by study subjects as a result of participating in your study. \*

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## **Data Safety**

1. Describe how you will protect the privacy and confidentiality of the study subjects. \*
2. Does your study involve recording the participants in any manner – audio or video? Y/N \*
3. Who will have access to the server on which you are storing the study data? \*
4. How do you plan to ensure a safe and secure backup of your data? \*
5. Describe your plans for post-research data storage and/or disposal. \*
6. Will you collect any personal information during the course of this research project? \*  
Yes  
No
7. Describe the nature of this personal information. Check all that apply . \*  
Name  
Date of birth  
Mailing or email address  
Home GPS coordinates  
Phone numbers  
Aadhar Number  
Medical records or health information  
License, Vehicle ID  
Biometric identifiers  
Photos/images/audio recording

Signatures,handwriting samples  
Other (specify)

8.Describe how the personal identification information will be kept separate from the substantive data collected from study subjects. \*

9. Please describe the nature and frequency of security check-ups (e.g. anti-virus and password updates) performed for your device. \*

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### **Checklist**

Along with this application, I am submitting: \*

Completion certificate for human subjects research training for myself  
Completion certificate for research training for co-investigators and staff, if relevant  
Participation information sheet  
Consent form  
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. \*

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