**Exempt Review Application**

**Title of Research Project**: *Example*: Exploring Behavior Patterns Before and During COVID-19 Lockdowns\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Note external to this form: SSU faculty members should be the principal investigator, and should fill out this form)*

**Name of Principal Investigator** **Email address**

*Example:* Professor X\*\_\_\_\_\_ *Example:* ProfessorX@shawnee.edu\_

**Phone Number** *Example:* (555) – 555 -5555\_\_\_\_\_\_

**Department(s)/Division/Agency** \_\_\_\_*Example*: Social Sciences Department\_\_\_\_\_\_\_\_\_

**Name(s) of Co-Investigators:** **Email address:** **Faculty Student Other**

*Example:* Student X\*\_ *Example:* StudentX@shawnee.edu\_ \_\_\_\_ \_\_\_\_\_ \_\_\_\_\_

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\*Please place an asterisk by the investigator name(s) whose NIH certificate(s) is/are already on file with the IRB, if the certificate is less than 3 years old.

**Please place a check mark next to the category that best describes your research. You may check more than one category.**

\_\_\_\_\_ Research conducted in established or commonly accepted educational settings, involving normal educational practices, such as (a) research on regular and special education instructional strategies, or (b) research on the effectiveness of or the comparison among instructional techniques, curricula, or classroom management methods.

\_\_\_\_\_ Research involving the use of educational tests (e.g., cognitive, diagnostic, aptitude, achievement), survey procedures, interview procedures or observation of public behavior, unless: (a) data obtained is recorded in such a manner that human subjects can be identified, directly or through identifiers linked to the subjects; and (b) any disclosure of the human subjects' responses outside the research could reasonably place the participants at risk of criminal or civil liability or be damaging to the participants' financial standing, employability, or reputation. No videotaping or photography is allowed for data collection. You may not collect data from appointed public officials or candidate for public office.

\_\_\_\_\_ Research involving the collection or study of existing information, documents, records, pathological specimens, or diagnostic specimens, if these sources are publicly available or if the information is recorded by the investigator in such a manner that subjects cannot be identified, directly or through identifiers linked to the subjects.

\_\_\_\_\_ Research and demonstration projects that are conducted by or subject to the approval of supporting agencies, and which are designed to study, evaluate, or otherwise examine: (a) public benefit or service programs; (b) procedures for obtaining benefits or services under those programs; (c) possible changes in or alternatives to those programs or procedures; or (d) possible changes in methods or levels of payment for benefits or services under those programs.

\_\_\_\_\_ Taste and food quality evaluation and consumer acceptance studies, (a) if wholesome foods without additives are consumed or (b) if a food is consumed that contains a food ingredient at or below the level, and for a use, found to be safe, or agricultural chemical or environmental contaminant at or below the level found to be safe, by the Food and Drug Administration and approved by the Environmental Protection Agency or the Food Safety and Inspection Service of the U.S. Department of Agriculture.

**Does your research include at least one of the above criteria?** \_\_\_\_\_ **Yes**  \_\_\_\_\_**No**

(*Note external to this form*: If at least one of these categories does NOT describe your research, then you should complete the “Expedited and Full Review Application” instead of this one.)

1. **Describe the key demographics (age, SES, ethnicity, geographic locations, gender, etc.) of the sample that you wish to obtain**.

*Example*:

Data collection will occur online.

All participants will be required to be 18 years of age or older. All vulnerable populations, such as minors, pregnant women, and prisoners, etc. will be explicitly excluded from participation (as outlined in the consent form).

The study seeks to recruit a diverse sample of adults We do NOT aim to target, nor exclude, specific groups based on:

* Socioeconomic status (SES)
* Ethnicity
* Gender

In terms of geographic location, participants will be drawn from across the United States to ensure demographic diversity.

(*Side Note*: For this fill-in form example, assume I chose category **2.** That is, “Research involving the use of educational tests (e.g., cognitive, diagnostic, aptitude, achievement), survey procedures…”)

 **1a. What is the greatest number of participants that will be recruited?**

 *Example*: 300

 **1b. How will participants be recruited**

*Example*:

Participants will be recruited online using Amazon’s Mechanical Turk (“MTurk”) platform.

This platform allows us to quickly and efficiently recruit.

We are not directly interacting with participants. Indeed, this platform facilitates the collection of anonymous samples. To protect privacy, we will not request any identifying information. Thus, our recruitment techniques protect participant privacy and confidentiality.

Recruitment materials, including the study description, are available in the study materials.

**2. Will participants be remunerated for their participation?** \_\_\_\_\_ **Yes** \_\_\_\_\_**No**

**2a**. If so, how will participants be remunerated? Please indicate the type of remuneration and the amount. For instance, the participants will be given a $10 Amazon Gift Card for participation or the participants will receive 3% of their final grade in extra credit in their Introduction course.

*Example:* *(If I had placed a checkmark* ✔next to “Yes” for 2)

AMOUNT

Each participant will be paid $5 for completing the short survey.

This remuneration is consistent with standard rates for similar tasks on MTurk.

The amount of payment is NOT coercively high, ensuring that participants are not unduly influenced to take part. No additional incentives or bonuses will be provided.

DELIVERY

This compensation will be provided through a platform that allows for secure, and anonymous, payment. (Briefly explain this platform.)

Thus, all payments will be processed electronically through this system, thereby protecting research participant anonymity, privacy and confidentiality.

**2b. If participants do not complete the study, will partial or full remuneration be given? Please describe how that will be determined**.

*Example*:

1. Participants who complete half (or more) of the survey will receive full payment of $5.
2. Those who complete less than half will receive partial remuneration of $2.50.

Rationale: The payment amount is modest. It is not coercively high, ensuring voluntary participation.

1. **What direct benefits (other than remuneration) exist for the participants who participate?**

*Example*:

Besides, renumeration, participants may gain other benefits.

1. Participants may benefit by gaining insights into psychology and the research process.
2. Additionally, participants could experience a sense of satisfaction from contributing to scientific knowledge and supporting psychological research.

However, no direct personal benefits beyond remuneration are guaranteed.

**4. What direct risks could the participants potentially face? Check all that apply.**

\_\_\_\_ Risk of breach of confidentiality or privacy

 \_\_\_\_ Risk of coercion by researcher(s)

\_\_\_\_\_ Risk of psychological harm

 \_\_\_\_\_ Risk of physical harm

 \_\_\_\_\_ Other potential risk:

*Example*:

(Insert clear and careful explanation of the “other potential risk”)

 **Outline for "*Other* Potential Risk"**

1. **Identify Unique Risks**: Think about any risks specific to your study not listed in standard categories.
	* *Examples*: time commitment, emotional discomfort, data misuse.
2. **Describe the Risk Clearly**: Use straightforward language. Be specific about what the risk involves.
3. **Explain the Risk’s Relevance**: How does this risk relate to your study? Why might participants experience it?
4. **Assess the Severity**: Indicate if the risk is minimal, moderate, or significant.

**If you checked any direct risks in Item 4, then you should complete the “Expedited and Full Review Application.”**

1. **Will the participants be informed of the risks and benefits of the study?**

 \_\_\_\_\_ **Yes** \_\_\_\_\_**No**

5a. **If so, how will the participants be informed?**

Example: (If I had placed a checkmark ✔next to “*Yes*” for 5)

A consent screen will be presented at the beginning of the survey. This screen will clearly inform participants of potential risks and benefits before they agree to participate.

Participants must provide informed consent by acknowledging that they are aware of:

* The risks and benefits
* That they can email questions or raise concerns anytime.
	+ That they can contact the investigator with questions about the study, and the associate provost with questions about research participant rights
* That participation is voluntary.
* That they may *leave* the study at any time without penalty or loss of benefits they are otherwise entitled to.

**5b. Please check each box if the following criteria match your research.**

\_\_\_\_\_ The research involves no greater than minimal risk.

\_\_\_\_\_ It is not practicable to conduct the research without a waiver of informed consent or alteration to informed consent.

\_\_\_\_\_ Waiving or altering the informed consent will not adversely affect the subjects’ rights and welfare.

\_\_\_\_\_ The consent document would be the only record linking the subject and the research, and the principal risk would come from a breach of confidentiality.

**5c. Do you wish to waive the signed informed consent?** \_\_\_\_\_ **Yes** \_\_\_\_\_**No**

In submitting this form and the corresponding documents, I acknowledge that I have completed Human Research Participants training and that I understand and will uphold the rights of human participants. I also verify that all information contained in this form and any other corresponding documentation is correct based on my knowledge. I understand that I may not have contact with any research participants until the Shawnee State University IRB has given me their approval. I also understand that I must file an ***Amendment/Modification Form*** if my project extends beyond a year from my approval date and I must file a ***Final Study Form*** with all consent forms once the study is complete.

Signature of Principal Investigator 1 Signature of Principal Investigator 2

Signature of Principal Investigator 3 Signature of Principal Investigator 4

Signature of Principal Investigator 5 Signature of Principal Investigator 6

Signature of Principal Investigator 7 Signature of Principal Investigator 8

Date of Submission: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_