 **Salish Kootenai College**

**Institutional Review Board (IRB)**

**Application for Continuing Review**

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| **IRB APPLICATION for CONTINUING REVIEW**The Institutional Review Board (IRB) is required by Title 21, Code of Federal Regulations (Part 56.109) and Title 45, Code of Federal Regulations (Part 46.109) to conduct continuing review of ongoing projects not less than once per year.  |

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| SKC IRB # |  |
| Title of IRB Protocol |  |
| Principal Investigator Name |  |
| Contact Phone Number |  |
| Mailing Address |  |
| Email Address |  |

1. **Project Personnel List:** Please list the names of all people working on this project. This would include the principal and secondary investigators, research assistants, graduate students and other people who have contact with human participants or have access to any identifiable data. Please include the person’s role in the project (investigator, assistant, etc.). All people listed will need to complete human subjects and cultural property protection training as specified in the Salish Kootenai College IRB policies.

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| Name of Individual: | Role in the Project: |
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1. **Status of Study**

Mark the status of the study in one of the categories below.

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|  | Inactive with no subjects recruited for study to date, study will become active.  |
|  | Active with ongoing recruitment of subjects. |
|  | Active with subject recruitment completed, data analysis ongoing.  |

1. **Description of Current Study Status**

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| When did the study actually begin? |  |
| What is the estimated completion date of the study? |  |
| How many participants have completed the study? |  |
| Are there any active participants in the study? | Yes \_\_\_ No \_\_\_\_\_\_ |
| Will new participants be enrolled in the study? | Yes \_\_\_ No \_\_\_\_\_\_ |
| Did any subject voluntarily withdraw from the study? If so, explain any known reasons for subject withdrawal. | Yes \_\_\_ No \_\_\_\_\_\_Explanation: |
| Did any research participant or other individual suffer an unanticipated problem or adverse event since the last IRB review? | Yes \_\_\_ No \_\_\_\_\_\_Explanation: |

1. **Research Progress**

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| Briefly summarize the progress of the research to date. |

Has any new information been obtained that may alter the risks/benefits to participation in the research?

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

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| If yes, please explain. |

Are you submitting any changes to your approved protocol, consent form, recruitment materials, etc., along with the Continuing Review Form?

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

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| If yes, briefly explain the changes and rationale. Submit a copy of the revised documents with this form. |

By signing this IRB protocol, the researcher(s) agrees to the following:

* The research project will not be implemented until the researcher receives final approval from the Salish Kootenai College Institutional Review Board. .
* The researcher inform the IRB in writing of any adverse or unanticipated problems. Timelines for required notification are provided on the IRB website.
* Any changes to the approved research protocol must be submitted in writing to the Salish Kootenai College Institutional Review Board prior to implementing the changes.
* All researchers who will collect data or see disaggregated data must complete training in human subjects protection training. Certificates of such training should be submitted with the IRB application.
* Failure to comply with Salish Kootenai College Institutional Review Board policy, including failure to promptly respond to communication from the IRB, constitutes non-compliance. The Salish Kootenai College Institutional Review Board has the authority to
* IRB approval for non-exempt research applications is provided for one year only. After one year, approval for the research ceases and the research must stop unless the researcher submits a request for continuing review is approved. When the research is completed, the researcher must submit a final report to the IRB using the form available on the SKC IRB website.

**Required Signatures:**

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| Principal Investigator: |  | Date: |  |
| Secondary Investigator or Project Advisor: |  | Date: |  |