

INSTITUTIONAL REVIEW BOARD

50 Frida Kahlo Way ■ CLOUD 310F ■ SAN FRANCISCO, CA 94112 ■ 415-239-3370

Petition to City College of San Francisco Institutional Review Board

Name of Principal Investigator: Tel. No: e-mail address:
Name of Co-Principal Investigator: Tel. No: e-mail address:
Administering division or department of project:
Project Start Date (approval ends after one year):
Project Title:
Funding Agency & Proposal ID Number (if any):
Please specify if this project meets any of the three conditions outlined below that will make it exempt from full board review:

- a. Minor changes in previously authorized research during the period for which approval is
- authorized.
 b. Research involving survey or interview procedures where all of the following conditions (Common Rule Section 101 subsection b) occur:
- Responses are recorded in such a manner that human subjects cannot be identified, directly or through identifiers linked to the subjects.
- The subject's responses, if they become known outside of the research, would not place the subject at risk of civil or criminal liability or be damaging to the subject's financial standing or employability.
- The research does not deal with sensitive aspects of the subject's own behavior, such as illegal conduct, drug use, sexual behavior, or use of alcohol, and is not likely to cause the subject undue stress, fatigue, or any other psychological reactions.
- The research proposal makes adequate provision for obtaining the informed and voluntary participation of subjects.
 - c. Extension of previous approval

BOARD OF TRUSTEES

Provide a brief statement of how human subjects are involved in the project including an assessment of risks and benefits:

Please CHECK off how the research is to be used (CHECK ALL THAT APPLY): Grant Evaluation
□ Classroom Evaluation/Improvement
☐ Internal Publication (e.g., CCSF Research brief, City Currents article)
□ External Publication (e.g., scholarly articles)
□ Dissertation Thesis
□ Other (Please describe):
Please attach the following and CHECK off what you have submitted:
□ Research Proposal or abstract
□ Measurement instruments (e.g., survey questions)
□ Previous IRB approval materials (including measurement instruments)
□ Copy of the grant proposal if grant funded.
□ Copy of host college or university IRB application
Statement describing real or potential conflict of interest:
By signing below, you are verifying that all information provided is true and accurate, and that there is no conflict of interest.
Principal Investigator signature: Print Name: Date: Contact Information: