

UTSPH STUDENT PROPOSAL Institutional Approvals Document

Does your project involve human subjects or data derived from humans?

YES (includes [Exempt](#) research & publicly available data) research)

NO (not human subjects research)

More information about what constitutes human subjects research is available within the [UTSPH Research Compliance Guide](#) and the CPHS web at: <http://www.uthouston.edu/cphs/>

If YES, please complete the following section:

UT CPHS approval/exemption for my project will be, or has been, obtained through (choose one):

Student application to UT CPHS in iRIS:

PI (student): _____
 HSC #: HSC-____ - ____ - _____ (leave blank if not yet received)
 Project title: _____
 iRIS submission date: ____/____/____
 Approval/Exemption date*: ____/____/____ (leave blank if not yet approved)

Student is on, or will be added to, UTHealth faculty member's CPHS-approved protocol:

PI (faculty): _____
 HSC#: HSC-____ - ____ - _____
 Project title: _____
 Amendment submission date: ____/____/____
 Approval date*: ____/____/____ (leave blank if not yet approved)

*** A copy of the appropriate CPHS approval/exemption letter must be provided to the Office of Academic Affairs and Student Services. Only after institutional approval is obtained will the Assistant Dean approve the project.**

If NO, please complete the following section:

My research involves only:

- _____ Published literature/Systematic review of the literature
- _____ Simulated data
- _____ Other (please describe): _____

*Please describe your data source below. Attach supporting documentation as needed (for example: a copy of email correspondence from CPHS, etc.):

Does your project involve animals, animal-derived materials, or hazardous materials?

(circle one)

YES

NO

If YES, please complete the following section:

AWC, IBC and/or other institutional safety approval(s) for this project will be/has been obtained through:

Submission of this project to AWC, IBC, etc.:

Project Title: _____

UT Study # (AWC, IBC, etc.) AWC-____ - _____

Principal Investigator: _____

Submission Date: ____/____/____

Approval/Exempt Date*: ____/____/____

Amendment of an existing AWC, IBC, etc. protocol:

Project Title: _____

UT Study # (AWC, IBC, etc.): AWC-____ - _____

Principal Investigator: _____

Amendment Submission Date: ____/____/____

Amendment Approval Date*: ____/____/____

*** A copy of the appropriate AWC approval/exemption letter must be provided to the Office of Student Services. Only after institutional approval is obtained will the Assistant Dean approve the project.**

Signatures

By signing below, you acknowledge that you have discussed the pertinent information above regarding student research approvals.

Student (sign) Date

CE/Thesis/Dissertation Supervisor (sign) Date

Academic Advisor/Chair (sign) Date