NAME_____

Human Subjects Protection Review Committee

Project Description -- Quantitative

I. Purpose*: Include a purpose statement here*

a. number and description of participants.

Include number and description of participants. If participants are at an agency other than the University of Holy Cross, include a letter (on letterhead) authorizing you to distribute questionnaires at that site, signed by a person in authority at that site.

b. Materials: (describe and attach copy)

Include description of questionnaires, interventions, etc. Attach a copy of all questionnaires.

c. Procedure:

Include how you are going to get people to complete questionnaires, participate in interventions, etc. Include what you are going to tell them about the study.

III. Protections

a. Privacy:

Will people answer anonymously? If no, how will you make sure that you respect their privacy?

b. Informed Consent:

What will you tell participants <u>beforehand</u> about the research?

c. Risks/Unforeseen Consequences/Protections

Include any risks and how you will handle the situation if this happens. For example, if you upset someone, will you refer them to the counseling center, the counselor on site, or somewhere else?

d. Benefits

Include benefits to respondents for participating in this study. Extra credit is optional, and not sufficient. For example, might they think more about some important topic if they answer the questions?

_____ _____

Researcher Signature Date

Lillian M. Range, Ph.D.
Chair, UHCNO Human Subjects Protection Review Committee
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DUE: Monday at 6:00 p.m. before the Wednesday noon meeting