

**Institutional Review Board Survey Notification Form**

There are projects that include human subjects that may not be traditionally classified as research as defined by the federal regulations that govern all IRBs. Examples of these types of projects may include surveys or focus group questions concerning social processes, institutions, quality assurance, quality improvement, program validation, or accreditation activities.

Project leaders seeking to administer a survey or other project for non-research review will submit to the IRB administrator this completed Survey Notification form, along with the questionnaire or survey instrument. The documents may be submitted electronically to irb@cscc.edu.

For surveys administered on a regular basis, like program validations, accreditation surveys, and internal quality of service surveys; and the surveys do not change over time, the project leader submits this form to serve as the initial notification and indicates the timing of the survey (e.g. semesterly, annually). Future notification is required only if substantive changes are made to the survey questions, methodology, or scope of the project.

**Date:** Click or tap to enter a date. **Log # (IRB use):** Click or tap here to enter text.

**Title of Project:** Click or tap here to enter text.

**Project Leader:** Click or tap here to enter text.

**Department:** Click or tap here to enter text.

**Select one and provide the corresponding timeframe:**[ ]  One-Time Survey – Survey Start Date: Click or tap to enter a date. End Date: Click or tap to enter a date.
[ ]  Repeating Survey – Survey Timing: Choose an item. If other, please explain: Click or tap here to enter text.

**Provide a summary, including the reason for the survey, the survey population, and who will have access to the individual survey responses/raw data (provide names, positions and/or departments):***The text box will expand as needed*
Click or tap here to enter text.

**Please include the entire survey instrument, including introduction,
with this form (no URL links, please)**

**FOR IRB USE ONLY
IRB Chair or Designee**

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: Click or tap to enter a date.