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| **For Requesting a Written Determination that Activities are Not Human Subjects Research** |
| **All forms must be typewritten and submitted via email to irb@illinois.edu.** |

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| **When to Use this Form:** A researcher can complete and submit this form if they believe the activities they are engaging are not Human Subjects Research, as defined by federal regulations. Submitting this form to OPRS via email to irb@illinois.edu is a request for a written determination that the activities are Not Human Subjects Research (NHSR). Additional information may be requested as needed. If it is determined that the study is Human Subjects Research, an application will need to be submitted to OPRS for review. |
| OPRS uses decision trees to determine whether an activity is Human Subjects Research. These trees can be found [here](https://oprs.research.illinois.edu/review-processes-checklists/decision-trees) and may be helpful in thinking about your research.  |
| If anything changes after a determination is made, please contact OPRS for another determination.  |

**Section 1. PRINCIPAL INVESTIGATOR**

|  |  |  |
| --- | --- | --- |
| Last Name:       | First Name:       | Degree(s):       |
| Dept. or Unit:       | Office Address:       |
| Street Address:       | City:       | State:       | Zip Code:       |
| Phone:       | E-mail:       |
| Urbana-Champaign Campus Status: Non-visiting member of (Mark One) [ ]  Faculty [ ]  Academic Professional/Staff (*Student Investigators cannot serve as PI*) |

**Section 2. CO-INVESTIGATORS**

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| **List additional co-investigators that should be CCed on correspondence from OPRS.** |
| Name:      Member of Urbana-Champaign Campus as: [ ]  Faculty [ ]  Academic Professional/Staff [ ]  StudentEmail Address:       |
| Name:      Member of Urbana-Champaign Campus as: [ ]  Faculty [ ]  Academic Professional/Staff [ ]  StudentEmail Address:       |
| Name:      Member of Urbana-Champaign Campus as: [ ]  Faculty [ ]  Academic Professional/Staff [ ]  StudentEmail Address:       |
| Insert additional rows as necessary. |

**Section 3. PROTOCOL TITLE**

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**Section 4. FUNDING**

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| **4A. Is this research funded or pending funding?** [ ]  Yes [ ]  No |
| **4B. If yes, who is the (potential) funder?**       |

**Section 5. STUDY ACTIVITIES**

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| **Provide a response to each of the following questions. Indicate “N/A” if a question is not applicable.** |
| **5A. Describe the purpose, specific aims, and/or objectives of this project:**      |
| **5B. Does this project involve collecting primary data?** [ ]  Yes [ ]  No***(Primary data is original data that will be collected specifically for this project.)*****If “yes,” complete Sections 5C-5E, then move to Section 6.****If “no,” move to Section 5F.** |
| **5C. Describe what data will be collected, how, and by whom:**      |
| **5D. Are you using any surveys, questionnaires, or interview guides?** [ ]  Yes [ ]  No**If “yes,” attach all such research materials with this submission.** [ ]  Attached |
| **5E. Will the collected information be able to be directly or indirectly associated/linked with individual identities?** [ ]  Yes [ ]  No |
| **5F. Does this project involve using secondary data?** [ ]  Yes [ ]  No***(Secondary data is data collected for a use other than the current project.)*****If “yes,” complete Sections 5G-5J, then move to Section 6. If “no,” move to Section 6.**  |
| **5G. Describe the secondary data/samples researchers will have access to, including names of datasets, URLs, etc.:**      |
| **5H. How were data/samples originally gathered?**      |
| **5I. Does an identity key exist for this data?** [ ]  Yes [ ]  No**If yes, will researchers be granted access to the identity key?** [ ]  Yes [ ]  No |
| **5J. Are the researchers and the organization providing the data/specimens entering into an agreement?** [ ]  Yes [ ]  No**If “yes,” attach all such agreements with this submission.** [ ]  Attached |

**Section 6. DISSEMINATION**

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| **6A. Describe how the information produced by this project will be disseminated:**      |
| **6B. Will individual identifiers be published, presented, or disseminated in other ways?** [ ]  Yes [ ]  No**If yes, explain:**       |

**Section 7. FORM COMPLETION**

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| **Form completed by:**       |
| **Date completed:**       |