



## Unaffiliated Investigator Application Form

### Instructions:

Please fill out this application form using clear language and lay terms. Please answer each section as completely and as concisely as possible. This form must be filled out only by principle investigator(s) who are not affiliated with CSUSM but would like to study CSUSM population. Please upload this application form along with additional documents that are supplemental (as applicable) to your submission in IRBNet. For more information, please visit the IRB website. For questions, please contact IRB office at (760) 750-4029 or irb@csusm.edu.

Project  
Title

Proposed Start Date

### Faculty/Staff Investigator:

Name  Home Institution:

Phone Number  E-mail

Date CITI Completed

### Student Investigator: *(if the student is the principal investigator)*

Name  Home Institution:

Phone Number  E-mail

Date CITI Completed

Faculty Advisor Name  Home Institution:

Phone Number  E-mail  Date CITI Completed

**REMINDER:** Once the student investigator has completed this application form, he or she must e-mail it to their faculty advisor for review and feedback. Once the faculty advisor gives permission to the student to move forward, then the student will upload this application form along with additional documents to IRBNet. Once the student uploads all the documents, then s/he will share the IRBNet package with the faculty advisor. The faculty advisor must have an IRBNet account to approve the package as the "advisor" by logging into IRBNet. The faculty advisor will receive a notification via e-mail that the package has been shared with them and that they need to sign the package in IRBNet. For more information on how to share a package in IRBNet, please visit the IRB website.

**Checklist:** Check the additional documents that are uploaded in IRBNet. Check **ALL** that apply:

- IRB approval letter from home institution with a copy of the final approved protocol.
- Approved recruitment materials, surveys, questionnaires, etc.
- Consent and/or child assent form(s) and/or information sheet(s) approved by home institution.
- CITI Training Certificate for the principal investigator and the faculty advisor, if applicable.

## Summary of Research Protocol

1. What CSUSM population will you be sampling?

2. How many CSUSM participants are you hoping to include?

3. What activities will you be asking the CSUSM population to participate in?

4. Will you need assistance or support from CSUSM in any way?

**5. For Student Principal Investigators Only:** Please check the the box below to verify that you will share your package and obtain your faculty advisor's signature in IRBNet:

I verify that I will share my package with my faculty advisor in IRBNet after I upload this application and other materials, but *before* submitting the package for review.