



H A M P S H I R E C O L L E G E

Institutional Review Board (IRB) Manual

**Dean of Faculty
Mail Code DO
(413) 559-5676
irb@hampshire.edu**

IRB Manual

Application Deadlines

Proposal Due Date	IRB Meeting Date
September 20, 2016	September 27, 2016
October 18, 2016	October 25, 2016
November 15, 2016	November 22, 2016
December 6, 2016	December 13, 2016
February 14, 2017	February 21, 2017
March 21, 2017	March 28, 2017
April 11, 2017	April 18, 2017

IRB Manual

Application Process

- 1) Meet with your faculty advisor/research advisor to review your proposal idea.
- 2) Fill out cover page, proposal, and consent forms, and site authorizations.
- 3) Have faculty advisor/research advisor sign cover page of your proposal.
- 4) Email proposal to the IRB secretary or submit hard copy to 115 Cole Science. Hard copies should be printed SINGLE SIDED.

The IRB secretary is happy to review your proposal prior to deadline.

Important Information

Research can only begin AFTER IRB approval.

If conducting research at another institution that has given you its own IRB approval, please submit a copy of proposal and approval to the Hampshire IRB to review.

IRB SECRETARY:

Maureen Mooney
c/o Dean of Faculty Office
Hampshire College
893 West St.
Amherst, MA 01002
irb@hampshire.edu

RECOMMENDED

The IRB recommends that any person conducting research complete CITI training.
Website: <https://www.citiprogram.org>

IRB Manual

Types of Review

There are three types of review: Full * Expedited * Exempt

The determination of level of review applicable to a particular study is a recommendation by the faculty, but the final determination will be made by the IRB.

Full Board

- these include studies involving more than minimal risk, vulnerable populations, invasive techniques, work abroad
- these require the full board to review the proposal and are reviewed once a month (see Application Deadlines)

Expedited

- these include studies involving only minimal risk: surveys and interviews on non-sensitive subjects
- these require review by a sub-set of the IRB and therefore should be submitted at any time as they may be reviewed between meetings of the IRB (at the latest, they will reviewed at the next available IRB meeting)

Exempt from Continuing Review

- these include observations in public settings; some research on educational practices; observing/reflecting/assisting in the classroom as a part of regular educational practice; anonymous online surveys; film/photo/theatrical documentaries; some class projects
- these do not require full IRB review but DO require the submission of an IRB application form and may be submitted at any time
- The level is determined by the nature of the protocol, level of potential risk to human subjects, and the subject population.

RESEARCH PROPOSAL COVER SHEET
for
Ethical Review by the Institutional Research Board (IRB)

Title of research project: _____

Principal investigator: _____
(If you are a student, list yourself as Principal Investigator)

Email: _____

Extension: _____

Mailing address or PO Box #: _____

I think this research proposal is eligible for the following IRB review status:

Exempt Full Expedited

Anticipated date to begin research: _____

Anticipated date completion: _____

* Principal Investigator signature: _____ Date: _____

Faculty Supervisor(s) (if applicable): _____

Email: _____

Extension: _____

I have reviewed the enclosed research proposal and approve it for submission to the IRB.

* Faculty Supervisor signature: _____ Date: _____

FOR IRB USE ONLY:

Date proposal received: _____

Date reviewed: _____

Review Type: Exempt Full Expedited

IRB Decision: Approved Approved, pending corrections (*see attached*)
 Not approved

Comments:

RESEARCH PROPOSAL FORM
for
Ethical Review by the Institutional Research Board (IRB)

Submit the following information with the IRB cover sheet. Number each response with the respective header and include all requested information. Attach additional pages if necessary.

IRB RESEARCH PROPOSAL

Title of research project:

Principal investigator(s): *(If you are a student, list yourself as Principal Investigator)*

Faculty Supervisor (if applicable):

Date submitted:

1. **Description:** Briefly describe the purpose of the study.
2. **Participants:** Describe the number and type of participants and how they will be recruited. If you are using participants under age 18 you must obtain written parent permission (often as part of an informed consent form; see #5 below). Attach a copy of the parental consent letter if one is being used.
3. **Procedures:** Describe the procedure in detail (attach examples of questions, surveys, etc. if applicable).
4. **Risk assessment:** Are there any risks to the participants? Benefits? Describe what will be done to avoid, eliminate, or minimize the possibility that participants will experience discomfort, anxiety, concern about failure, etc., and what will be done if such discomfort does occur.
5. **Informed consent:** How will you obtain informed consent from participants (or in the case of minors, from parent/legal guardian)? Attach copies of all forms or letters. (Note: If children between the ages of 6 and 18 are participating, you must also include an informed assent form.)
6. **Debriefing of participants:** How will you explain the study to participants after they have completed it (if applicable)?
7. **Privacy ensured:** How will participants' privacy be ensured? (describe how data, responses, etc., will be stored, handled, secured, destroyed, etc.)



H A M P S H I R E C O L L E G E

RESEARCH PROPOSAL FORM: INFO

for

Ethical Review by the Institutional Research Board (IRB)

Submit the following information with the IRB cover sheet.

Number each response with the respective header and include all requested information.

Attach additional pages if necessary.

IRB RESEARCH PROPOSAL

Title of research project:Principal investigator(s):

(If you are a student, list yourself as Principal Investigator)

Faculty Supervisor (if applicable):**Date submitted:**

Description: Briefly describe the purpose of the study.

State the purpose of your study

State what you will be doing

State how you will be doing it, how long it will take

State the end result of your research (DIV III paper, workshop, paper,etc...)

Participants: Describe the number and type of participants and how they will be recruited.

State who you are recruiting

State how many participants

State the ages of your participants

State HOW you will be recruiting your participants

If using email/posters to recruit, you must include a copy of your email/poster with your proposal.

Procedures: Describe the procedure in detail

Describe step by step what you will be doing

If interviewing, stay how and with what (in-person? Via Skype? Audio recording? Video Recording, Note Taking)

Attach examples of questions, surveys, etc. if applicable

Include that you will be getting consent from each participant

Risk assessment: Are there any risks to the participants? Benefits? Describe what will be done to avoid, eliminate, or minimize the possibility that participants will experience discomfort, anxiety, concern about failure, etc., and what will be done if such discomfort does occur.

Informed consent: How will you obtain informed consent from participants (or in the case of minors, from parent/legal guardian)? Attach copies of all forms or letters. (Note: If children between the ages of 6 and 18 are participating, you must also include an informed assent form.) Also, if your participants have a native language other than English, forms should also be submitted in their native language.

Debriefing of participants: How will you explain the study to participants after they have completed it (if applicable)?

Privacy ensured: How will participants' privacy be ensured? (describe how data, responses, etc., will be stored, handled, secured, destroyed, etc.) EX/ All data will be stored on a password-protected computer and notes will be stored in a locked filing cabinet.

SAMPLE

Institutional Review Board Site Authorization Letter

DATE

NAME
ADDRESS
CITY, STATE ZIP

Dear Ms./Mr./Dr. NAME:

I have reviewed your request regarding your study and am pleased to support your research project entitled "TITLE." Your request to use the facilities at ORGANIZATION/INSTITUTION NAME as a research or recruitment site is granted. The research will include DESCRIPTION (e.g., classroom observations, interviews with participants who have granted permission to be included in this study). This authorization covers the time period of START DATE to END DATE. This site authorization is contingent on receiving IRB approval from the committees at Hampshire College (and EXTERNAL INSTITUTION, if necessary). We look forward to working with you.

Sincerely,

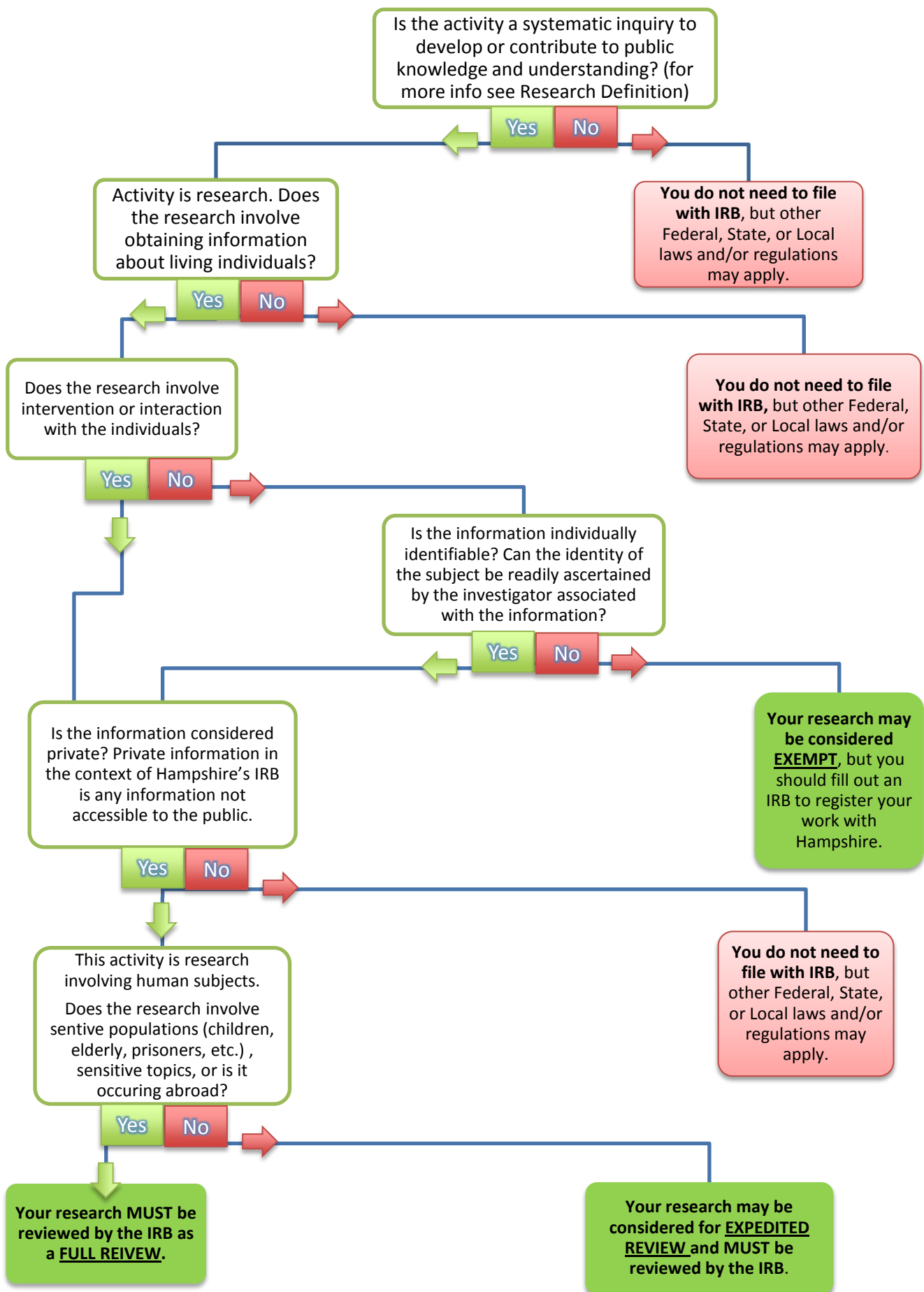
Name
TITLE

 **H A M P S H I R E C O L L E G E**

IRB Manual

CONSENT FORMS

**Dean of Faculty
Mail Code DO
(413) 559-5676
irb@hampshire.edu**



INFORMED CONSENT FORM TEMPLATE

We invite you to take part in a research study being conducted by [Principal Investigator's name] who is a [professor / student] at Hampshire College, Amherst, MA, as part of his/her research project [name of research project]. The study, as well as your rights as a participant, are described below.

Description: This study will (INSERT YOUR DESCRIPTION—State the purpose of your study; State what you will be doing. State how you will be doing it, how long it will take.)

Confidentiality: The records of this study will be kept private. The information you provide will be kept confidential. Your answers will not be associated with your name unless otherwise indicated below. Rather, each participant will be given an identification number on the interviewer's sheet. In any report we may publish, your information will not include any identifiable data. The audio/videotape of your participation will be destroyed after it has been transcribed. All identifying records will be destroyed after five years.

I Do/ Do Not Agree to have my real name used in this research and any publications that result from the research.

I Do/ Do Not Agree to have my interview audio recorded by the researcher.

I Do/ Do Not Agree to have my interview video recorded by the researcher.

I Understand that research consented to may be published and available to the public indefinitely.

Risks & Benefits: There are minimal to no risks to your safety posed by this study. If you ever feel uncomfortable during the study, you may stop at any time. Should local support be needed, the researcher will provide you with contact information for local support groups who can assist you.

Freedom to Withdraw or Refuse Participation: You have the right to stop at any time, to refuse to answer any of the interviewer's questions at any time, and to withdraw from the project at any time without prejudice from the investigator.

Grievance Procedure: If you have any concerns or are dissatisfied with any aspect of this study, you may report your grievances anonymously if desired to the Human Subjects Institutional Review Board, c/o Dean of Faculty Office, Hampshire College, Amherst, MA 01002, 413-559-5676, IRB@hampshire.edu.

Questions? Please feel free to ask the investigator any questions before signing the consent form or at any time during or after the study.

Principal Investigator: [Student/Faculty Name], [Division X student], Hampshire College; Faculty Supervisor: [Faculty Name], [School of YYYY], [Office Number], [Building], Hampshire College, [(413) 559-xxxx].

Informed Consent Statement

I, _____, agree to participate in the research project entitled, “[Project Title].” The study has been explained to me and my questions answered to my satisfaction. I understand my right to withdraw from participating or refuse to participate will be respected and that my responses and identity will be kept confidential unless indicated otherwise above. I give this consent voluntarily.

Participant Signature:

Signature

Date

Investigator Signature:

Signature

Date

INFORMED PARENTAL CONSENT FORM-TEMPLATE

We invite your child to take part in a research study being conducted by [Principal Investigator's name] who is a [professor / student] at Hampshire College, Amherst, MA, as part of his/her research project, [name of research project]. The study, as well as your rights as a participant, are described below.

Description: This study will (INSERT YOUR DESCRIPTION—State the purpose of your study; State what you will be doing. State how you will be doing it, how long it will take. Include how children will be asked to participate—will they be videotaped, audio recorded, observed, etc...)

Confidentiality: The records of this study will be kept private. All data will be kept confidential. Your child's name will not be used in this study, unless otherwise indicated below. Rather, your child will be given an identification number on the interviewer's sheet. In any report we may publish, your child's information will not include any identifiable data. The audio/videotape of your child's participation will be destroyed after it has been transcribed. All identifying records will be destroyed after five years.

Audio/Photo/Video Recording Consent Options:

___ I Do ___ I Do Not agree to the researcher's use of *audio recordings* of my child's voice to be used for the final public exhibition of this study.

___ I Do ___ I Do Not agree to the researcher's use of *photography* of my child may be used in the final public exhibition of this study.

___ I Do ___ I Do Not agree to the researcher's use of *video recordings* of my child to be used in the final public exhibition of this study.

___ I Understand that research consented to may be published and available to the public indefinitely.

Risks & Benefits: There are minimal to no foreseen risks to your child's safety. <INSERT ANY POTENTIAL RISKS>

Freedom to Withdraw or Refuse Participation: I understand that my child has the right to stop participation at any time, refuse to answer any of the interviewer's questions, and/or withdraw from the study at any time for any reason without prejudice from the investigator.

Grievance Procedure: If you have any concerns or are dissatisfied with any aspect of this study, you may report your grievances anonymously to the Human Subjects Institutional Review Board, c/o Dean of Faculty Office, Hampshire College, 893 West Street Amherst, MA 01002, 413-559-5676, IRB@hampshire.edu.

Questions? Please feel free to ask the investigator any questions before signing the consent form or at any time during or after the study.

Principal Investigator: [Student/Faculty Name], [Division X student], Hampshire College;

Faculty Supervisor: [Faculty Name], [School of YYYY], [Office Number], [Building], Hampshire College, [413-559-xxxx].

Informed Consent Statement

I, _____, give permission for my child, _____ to participate in the research project entitled, “[Project Title].” The study has been explained to me and my questions answered to my satisfaction. I understand that my child’s right to withdraw from participating or refuse to participate will be respected and that his/her responses and identity will be kept confidential. I give this consent voluntarily.

Parent/Guardian Signature:

Signature

Date

Investigator Signature:

Signature

Date

Sample Informed Assent Form

My name is <INSERT YOUR NAME> and I am a student at Hampshire College. You are being asked to be in my study (NAME OF PROJECT). In this study we hope to INSERT.

Everything you do in this study will be kept private. I will not use your name when we look at what you did or when we share it with others. (DESCRIBE WHAT YOU WILL BE DOING)

You do **NOT** have to do this study and you **CAN** ask to stop at anytime. You will not get in trouble for saying no and nothing will happen to you.

Please ask any questions you have now. If you have any other questions you can ask them at any time.

Audio/Photo/Video Recording Consent Options:

Can I record your voice while talking? Yes or No (circle one)

Can I take a video of you? Yes or No (circle one)

Can I take pictures of you? Yes or No (circle one)

Print your name here _____

Signature _____ Date _____

STATEMENT OF ASSENT

I understand that I am being asked to (INSERT WHAT MINORS WILL BE DOING) and I may be (Audio recorded/Videotaped/Photographed) while doing it. I agree to do this but I also I know that I can stop at anytime. I also know that everything I do will be kept private.

Print your name here _____

Signature _____ Date _____

For the Researcher:

I _____ have explained this research and what is expected of the participant. The participant has agreed to participate in this study and understands that their responses are confidential and that they may stop participating at any time without any consequences.

Signature of investigator _____ Date _____

ORAL CONSENT FORM - To Be Read to Each Participant

“My name is (INSERT NAME) and I am a student at Hampshire College in Amherst MA. I would like to invite you to take part in my research study, “TITLE”. I will describe the study, as well as your rights as a participant.”

Description: “This study will (INSERT YOUR DESCRIPTION—State the purpose of your study; State what you will be doing. State how you will be doing it, how long it will take.)”

Confidentiality: “The records of this study will be kept private. The information you provide will be kept confidential. Your answers will not be associated with your name unless you clearly indicate you agree to have us use your name. Rather, each participant will be given an identification number on the interviewer’s sheet. In any report we may publish, your information will not include any identifiable data. The audio/videotape of your participation will be destroyed after it has been transcribed. All identifying records will be destroyed after five years.”

DO YOU AGREE TO LET THE RESEARCHERS:

Use your real name used in this research and any publications that result from the research?

CONSENT WAS _____GRANTED/_____DENIED

Agree to have your interview audio recorded by the researcher?

CONSENT WAS _____GRANTED/_____DENIED

Agree to have your interview video recorded by the researcher?

CONSENT WAS _____GRANTED/_____DENIED

Understand that research consented to may be published and available to the public indefinitely.

CONSENT WAS _____GRANTED/_____DENIED

Risks & Benefits: “There are minimal to no risks to your safety posed by this study. If you ever feel uncomfortable during the study, you may stop at any time. Should local support be needed, I will provide you with contact information for local support groups who can assist you.”

Freedom to Withdraw or Refuse Participation: “You have the right to stop at any time, to refuse to answer any of the interviewer’s questions at any time, and to withdraw from the project at any time without prejudice from the investigator.”

Grievance Procedure: “If you have any concerns or are dissatisfied with any aspect of this study, you may report your grievances anonymously if desired to the Human Subjects Institutional Review Board, c/o Dean of Faculty Office, Hampshire College, Amherst, MA 01002, 413-559-5676, IRB@hampshire.edu. I can give you a card with this information, if you prefer.”

Questions? “Please feel free to ask me any questions before signing off on the consent form or at any time during or after the study.”

Informed Consent Statement

“Now that I have explained the study to you, and answered any questions to your satisfaction, I would like to remind you that you have the right to withdraw from participating, or to refuse to participate. This right will be respected, and your responses and identity will be kept confidential, unless you have already indicated otherwise. Do you voluntarily agree to participate in the research project titled, (“PROJECT TITLE”)?

CONSENT WAS _____GRANTED/_____DENIED

I, _____, certify as the research investigator, that I have discussed the study and the participants rights as described above, and have obtained oral consent for their participation.

Investigator Signature:

Signature

Date

Principal Investigator: [Student/Faculty Name], [Division X student], Hampshire College; Faculty Supervisor: [Faculty Name], [School of YYYY], [Office Number], [Building], Hampshire College, [(413) 559-xxxx].



H A M P S H I R E C O L L E G E

IRB Manual

SAMPLE IRBS

RESEARCH PROPOSAL COVER SHEET
for
Ethical Review by the Institutional Research Board (IRB)

Title of research project: Saving Humanity by Sacrificing Yourself: The Effects of Selflessness on "Super Heroes"

Principal investigator: Peter Parker
(If you are a student, list yourself as Principal Investigator)

Email: peterparker@thedailybugle.com

Extension: 413-555-1234

Mailing address or PO Box #: _____

I think this research proposal is eligible for the following IRB review status:

Exempt Full Expedited

Anticipated date to begin research: 9-1-14

Anticipated date completion: 5-15-15

* Principal Investigator signature: _____ Date: _____

Faculty Supervisor(s) (if applicable): Professor Charles Xavier

Email: ProfessorX@xavier.edu

Extension: (413) 555-6789

I have reviewed the enclosed research proposal and approve it for submission to the IRB.

* Faculty Supervisor signature: _____ Date: _____

FOR IRB USE ONLY:

Date proposal received: _____

Date proposal reviewed: _____

Review Type: Exempt Full Expedited

IRB Decision: Approved Approved, pending corrections (*see attached*)

Not approved

Comments:

Peter Parker
Daily Bugle
1234 Bugle Avenue
Metropolis, KS 01002

IRB RESEARCH PROPOSAL

Title of research project: Saving Humanity by Sacrificing Yourself: The Effects of Selflessness on “Super Heroes”

Principal investigator(s): Peter Parker

Faculty Supervisor: Professor Charles Xavier

Date submitted: 6-01-14

1. **Description:** My goal is to understand the lived experiences of super heroes. I will explore how saving lives affects heroes- physically, mentally, and spiritually. I will be interviewing super heroes, asking about their experiences, and taking photos of them saving people (as this is a daily occurrence). The end result of my research will be my Division III project and excerpts may be published in the Daily Bugle.
2. **Participants:** All participants will be known super heroes. I will recruit them in person on locations of rescues. I will also post an announcement in the Daily Bugle (see attached) to recruit participants. All participants will be 18 years of age or over. I hope to have 3-4 participants. All super heroes will only be referred to with their aliases. No identifiable information about their true identity will ever be revealed.
3. **Procedures:** After participants have been recruited in-person or via my announcement, I will schedule one-on-one interviews with them at a location of their choosing. Consent Forms will be given to each participant for review. To protect anonymity of my participants, I will use Oral Consent Forms and will only refer to them with their alias. Interviews will be audio recorded and hand-written notes will be taken, if consent is granted. Interview questions are attached. I will inform all participants that I will not take any identifiable information, such as their names, ages, etc. All data will be completely anonymous. I will take photos—if subjects consent to photos being taken. I will remind all participants that they cannot give me the names of anyone they have saved, as I do not have consent from them. I will ask the heroes to refer to the persons they have rescued in only general context or by using fake names.
4. **Risk assessment:** There is minimal to no risk to participants. I will inform all participants that they can refuse to answer any question and may withdraw from the study at any time for any reason. If at any time any participant feels stress about retelling a particular rescue, I will remind them they can stop. I will also hand them a card with contact information of a local mental health provider who can assist them with utmost confidentiality.
5. **Informed consent:** Participants will be given Oral Consent Forms. No self-identifiable information will be requested, recorded, or saved on audio or on notes. I will remind all participants that all data and materials will be confidential and secured at all times.
6. **Debriefing of participants:** I will explain to all participants that the result of this research is my Division III project that will be presented publicly and excerpts may be published in the Daily Bugle to help the community understand and empathize with the Super Hero lifestyle. As such, this will be a public piece that could live on indefinitely. I will allow all participants to view the final product prior to print. They will be given the ability to redact anything they wish prior to print. They will have my contact information and can reach me at any time. They will have the deadline for the story so they know when they need to be in touch, if they so wish.
7. **Privacy ensured:** All data will be stored on a password-protected computer. Notes will be locked in a lockbox to which only I have the key. Audio files will be deleted after transcription. Upon completion of the story, all paperwork will be shredded, and hard drive will be wiped. No self-identifiable information will be taken at any time. Data will be kept only until the story is written, not to exceed 1 year.

Daily Bugle Announcement:

Are you a Super Hero? Have you ever wanted to talk with anyone about the amazing rescues you do?

My name is Peter Parker, intern photographer for the Daily Bugle and Hampshire college Division III student. Many of you know me, as I am usually the one photographing you during your amazing saves. I would like to write about you and about your experiences. My hope is to give the public a reminder that you are people too, who sometimes need support.

I am writing a Division III paper for my school and excerpts may be used in the Daily Bugle. My project is titled, Saving Humanity by Sacrificing Yourself: The Effects of Selflessness on “Super Heroes”

If you are willing to meet with me, I would be interesting in talking with you for about an hour. This is a completely anonymous study. Your secret identity will never be asked. I am not looking to uncover your true identity. I only want the public to know more about how you feel –what it feels like to save us.

If interested, please contact me at Hampshire College, at the Daily Bugle, or feel free to speak with me at a scene of a rescue.

Thanks so much,

Peter Parker
Daily Bugle
413-555-1234
peterparker@hampshire.edu
peterparker@thedailybugle.com

Saving Humanity by Sacrificing Yourself: The Effects of Selflessness on “Super Heroes”

By Peter Parker, peterparker@hampshire.edu; peterparker@thedailybugle.com

- 1) How long have you been saving lives?
- 2) About how many people do you think you have saved?
- 3) Is there a particular rescue that has held special meaning? If so, why?
- 4) Have people you have saved been thankful?
- 5) Has there ever been a time where a person did not thank you for saving them? As a reminder, please do not use any real names.
- 6) Has there ever been a time when you wanted to stop helping people? If so, why?
- 7) What types of emotions do you feel during a save? After a save? Do they linger days, years later?
- 8) Did you ever feel as though you let anyone down?
- 9) Did you ever feel wrongly judged?
- 10) What is the main reason you think you save lives?
- 11) If you could tell you past self something you have learned during your journey, what do you think that would be?
- 12) Do you appreciate the attention from the media about your selfless rescues?
- 13) Do you appreciate the attention from the people about your rescues?
- 14) How do you think you are able to do what you do? Is it only your super power? Or, is there something else?
- 15) What is it like being a Super Hero?

ORAL CONSENT FORM - To Be Read to Each Participant

“My name is Peter Parker and I am an intern photo-journalist at the Daily Bugle in Metropolis, KS, and a Division III student at Hampshire College in Amherst, MA. I would like to invite you to take part in my research study, “Saving Humanity by Sacrificing Yourself: The Effects of Selflessness on “Super Heroes””. I will describe the study, as well as your rights as a participant.”

Description: “This study will discuss Super Heroes as people who are affected by what happens to them during rescues. What do they feel? Does a particular ‘save’ affect them mentally, physically, and spiritually? How do they do what they do and keep doing it? At the end of this research, I will be producing a Division III project that will be presented to the public, and excerpts may be used in the Daily Bugle. I want to show the public through the story and photos of person rescued, that Super Heroes are people too.

Confidentiality: “The records of this study will be kept private and confidential. No identifiable data will be asked, saved, or recorded in any way. In any report we may publish, your information will not include any identifiable data. The audio of your participation will be destroyed after it has been transcribed. All identifying records will be destroyed after the story is published.”

DO YOU AGREE TO LET THE RESEARCHERS:

Agree to have your interview audio recorded by the researcher?

CONSENT WAS _____GRANTED/_____DENIED

Agree to have photos of you taken by the researcher for publication?

CONSENT WAS _____GRANTED/_____DENIED

Agree to have notes taken by the researcher?

CONSENT WAS _____GRANTED/_____DENIED

Understand that research consented will be published and available to the public indefinitely.

CONSENT WAS _____GRANTED/_____DENIED

Risks & Benefits: “There are minimal to no risks to your safety posed by this study. If you ever feel uncomfortable during the study, you may stop at any time. Should local support be needed, I will provide you with contact information for local person who can assist you and who will uphold your confidentiality. Jean Grey at Professor Xavier’s School for Gifted Youngsters will be available to you.”

Freedom to Withdraw or Refuse Participation: “You have the right to stop at any time, to refuse to answer any of the interviewer’s questions at any time, and to withdraw from the project at any time without prejudice from the investigator.”

Grievance Procedure: “If you have any concerns or are dissatisfied with any aspect of this study, you may report your grievances anonymously if desired to the Human Subjects Institutional Review Board, c/o Dean of Faculty Office, Hampshire College, Amherst, MA 01002, 413-559-5676, irb@hampshire.edu. I can give you a card with this information, if you prefer.”

Questions? “Please feel free to ask me any questions before signing off on the consent form or at any time during or after the study.

Informed Consent Statement

“Now that I have explained the study to you, and answered any questions to your satisfaction, I would like to remind you that you have the right to withdraw from participating, or to refuse to participate. This right will be respected, and your responses and identity will be kept confidential, unless you have already indicated otherwise. Do you voluntarily agree to participate in the research project titled, “Saving Humanity by Sacrificing Yourself: The Effects of Selflessness on “Super Heroes””?”

CONSENT WAS _____GRANTED/_____DENIED

I, Peter Parker, certify as the research investigator, that I have discussed the study and the participants rights as described above, and have obtained oral consent for their participation.

Investigator Signature:

Signature

Date

Principal Investigator: Peter Parker, Photo-journalist, Daily Bugle; **Faculty Supervisor:** Professor Charles Xavier, Xavier School for Gifted Children, Room 1, Main Building, Metropolis, KS 000111 (413) 555-5678, profx@xaviers.edu

RESEARCH PROPOSAL COVER SHEET
for
Ethical Review by the Institutional Research Board (IRB)

Title of research project: Saved by a Super Hero: Tales of the Rescued

Principal investigator: Clark Kent
(If you are a student, list yourself as Principal Investigator)

Email: clarkent@thedailyplanet.org

Extension: (413) 555-1111

Mailing address or PO Box #: Daily Planet 1234 Daily Planet Drive Metropolis KS

I think this research proposal is eligible for the following IRB review status:

Exempt Full Expedited

Anticipated date to begin research: 9/1/14

Anticipated date completion: 5/1/15

* Principal Investigator signature: _____ Date: _____

Faculty Supervisor(s) (if applicable): Bruce Wayne

Email: mrwayne@wayne-enterprises.org

Extension: 413-555-2866

I have reviewed the enclosed research proposal and approve it for submission to the IRB.

* Faculty Supervisor signature: _____ Date: _____

FOR IRB USE ONLY:

Date proposal received: _____

Date proposal reviewed: _____

Review Type: Exempt Full Expedited

IRB Decision: Approved Approved, pending corrections (*see attached*)
 Not approved

Comments:

Clark Kent
Daily Planet
1234 Daily Planet Drive
Metropolis KS

IRB RESEARCH PROPOSAL

Title of research project: Saved by a Super Hero: Tales of the Rescued

Principal investigator(s): Clark Kent

Faculty Supervisor (if applicable): Bruce Wayne

Date submitted: 06-01-14

1. **Description:** For a 4-part Division III paper I am doing during my internship at the Daily Planet, I would like to interview persons who have been rescued, or who have had their lives positively impacted, by Superman. I want to explore if being saved changed their lives in any way—made them have a new hope towards every day life, made them seize new opportunities, made them write, or anything that may have changed after being rescued. I want to show how events that impact our lives can have a life-altering impact and can transform them for the better.
2. **Participants:** I hope to have 10-15 participants, however given the massive number of rescues by Superman, there may be many more. My participants will be recruited by a full-page ad in the Daily Planet. (See Attached) I am seeking anyone who was rescued; therefore, my participants will be both minors and adults. Participants can decide whether they want to be anonymous.
3. **Procedures:** After participants are recruited, I will ask them to sit with me to be interviewed. I will give them consent forms (this includes parent/assent forms) and interview questions ahead of time. Participants will decide if they prefer one-on-one interviews or if they would like group interviews. Interviews will be audio recorded, photographs will be taken, and I will take hand written notes, if consent is granted. Parents will accompany their children during the interviews. Participants will decide if they would like anonymity or if they would like to use their true identities, with the exception that I will only use pseudonyms for the minors. Interviews could be an hour or longer and I will make sure all participants know this. Interviews will take place at the location of the participants' choosing. Also, I will also be getting a site authorization from Luthor Corp, as Superman recently saved a group there and Lex Luthor has said his employees would like to be interviewed in-person at Luthor Corp. I will remind any groups that are interviewed that it is not possible to maintain confidentiality in that setting. I will keep confidential all data collected in individual interviews and I will not share information that emerges from group discussions. However, in groups, I cannot force group participants to keep anything they hear or see confidential. Minors will only be interviewed individually with their parents present.
4. **Risk assessment:** There are minimal risks to participating in this study. I am aware that recalling events where a person needed to be rescued can bring up negative emotions, and will be extra careful during interviews to continually check in with participants to make sure they are OK. I will have cards with information about local mental health facilities should participants need assistance. I will remind all participants that they can stop at any time, can refuse to answer any question, and may withdraw from the study at any time for any reason.
5. **Informed consent:** All participants will be given their respective Consent Forms: Oral Consent Forms, Informed Consent Forms, Parent Consent Forms, Assent Forms. I will ask participants before interviewing if they agree to audio, notes, and photos being taken and used. If they do not, I will make a note on an oral consent form that this anonymous interviewee only agrees to be interviewed. I will inform all participants that all data will be confidential and will be secured at all times.
6. **Debriefing of participants:** I will explain to all participants that the result of this research is a 4-part story for my Division III Project and some content and photos may appear in the Daily Planet and that it will be a public piece that will be available to the public indefinitely. They will be able

to read the entire story before publication and may strike any direct quotations, photos, they wish, before publication.

7. **Privacy ensured:** All data will be kept confidential. All data will be stored on a password-protected computer. Notes will be locked in a cabinet to which only I have the key. All files will be deleted upon completion of story. All notes will be shredded by publication of the story, not to exceed one year. Photos will be stored electronically and deleted once the Division III is completed. Only photos used in the Division III project will be available to the public indefinitely through the Hampshire College library where it will be archived.

8. **Other:** A Site Authorization is attached from Luthor Corp and another from the Daily Planet.

Announcement:

Saved by a Super Hero: Tales of the Rescued

Hello! I am Clark Kent and I want to hear your stories about being saved by Superman! If Superman has rescued you, or if you have witnessed him in action, I want to hear your stories.

I am writing a 4-part story for my Division III about how being saved has changed your lives—maybe for the better? Anything you want to discuss is open.

If you are interested in telling your story, please be in touch with me by 9/1/14.

Contact Info:

Clark Kent

Hampshire College Division III Student

clarkkent@hampshire.edu

Daily Planet

1234 Daily Planet Drive

Metropolis KS

clarkkent@thedailyplanet.org

413-555-1111

Site Authorization:



6/1/15

To: Clark Kent, Daily Planet

From: Lex Luthor, CEO, Luthor Corp

Subject: Interviews at Luthor Corp

I have reviewed your request regarding conducting research in the form of interviews on site at Luthor Corp for your 4-part Division III paper about Superman entitled, Saved by a Super Hero: Tales of the Rescued.

Your request to use our facilities is granted. You may interview any employee who would like to speak with you. This authorization is granted from 9/1/14 to 4/29/15, provided you receive IRB Approval at Hampshire College.

My employees look forward to speaking with you about your research.

Sincerely,

Lex Luthor

Lex Luthor
CEO, Luthor Corp

ORAL CONSENT FORM - To Be Read to Each Participant

“My name is Clark Kent and I am a journalist at Hampshire College and an intern at the Daily Planet. I would like to invite you to take part in my research study, “Saved by a Super Hero: Tales of the Rescued.” I will describe the study, as well as your rights as a participant.”

Description: “This study will ask survivors who have been rescued by Superman to talk about how their lives may have been transformed after that rescue. I am looking for survivors to tell their own stories about how they felt before, and more importantly, after their life was saved. I will be writing a 4-part Division III paper and some photos/excerpts may be published in The Daily Planet. I want to show how events that impact our lives can have a life-altering impact and can transform them for the better.”

Confidentiality: “The records of this study will be kept private. The information you provide will be kept confidential. Your answers will not be associated with your name unless you clearly indicate you agree to have us use your name. Rather, each participant will be given an identification number/pseudonym on the interviewer’s sheet. In any report we may publish, your information will not include any identifiable data, unless you consent to this. The audio/notes of your participation will be destroyed after it has been transcribed. All identifying records will be destroyed after publication. However, the finished product will be available to the public indefinitely.”

DO YOU AGREE TO LET THE RESEARCHERS:

Use your real name used in this research and any publications that result from the research?

CONSENT WAS _____GRANTED/_____DENIED

Agree to have your interview audio recorded by the researcher?

CONSENT WAS _____GRANTED/_____DENIED

Agree to have your photograph used by the researcher?

CONSENT WAS _____GRANTED/_____DENIED

Agree to have notes taken of your interview by the researcher?

CONSENT WAS _____GRANTED/_____DENIED

Understand that research consented to may be published and available to the public indefinitely.

CONSENT WAS _____GRANTED/_____DENIED

Risks & Benefits: “There are minimal to no risks to your safety posed by this study. If you ever feel uncomfortable during the study, you may stop at any time. Should local support be needed, I will provide you with contact information for local support groups who can assist you.”

Freedom to Withdraw or Refuse Participation: “You have the right to stop at any time, to refuse to answer any of the interviewer’s questions at any time, and to withdraw from the project at any time without prejudice from the investigator.”

Grievance Procedure: “If you have any concerns or are dissatisfied with any aspect of this study, you may report your grievances anonymously if desired to the Human Subjects Institutional Review Board, c/o

Dean of Faculty Office, Hampshire College, Amherst, MA 01002, 413-559-5676, irb@hampshire.edu. I can give you a card with this information, if you prefer.”

Questions? “Please feel free to ask me any questions before signing off on the consent form or at any time during or after the study.

Informed Consent Statement

“Now that I have explained the study to you, and answered any questions to your satisfaction, I would like to remind you that you have the right to withdraw from participating, or to refuse to participate. This right will be respected, and your responses and identity will be kept confidential, unless you have already indicated otherwise. Do you voluntarily agree to participate in the research project titled, (“Saved by a Super Hero: Tales of the Rescued”)?

CONSENT WAS _____GRANTED/_____DENIED

I, Clark Kent, certify as the research investigator, that I have discussed the study and the participants rights as described above, and have obtained oral consent for their participation.

Investigator Signature:

Signature

Date

Principal Investigator: Clark Kent, Hampshire College, clarkkent@hampshire.edu; **Faculty Supervisor:** Bruce Wayne, Wayne Enterprises and Hampshire College, (413) 559-2866, bwayneHA@hampshire.edu.

Informed Assent Form

My name is Clark Kent and I am a journalist and student at the Daily Planet and at Hampshire College. You are being asked to be in my study Saved by a Super Hero: Tales of the Rescued. In this study we hope to ask you about the time when Superman saved you.

Everything you do in this study will be kept private. I will not use your name when we look at what you did or when we share it with others. If you agree, we will talk about what happened and how it made you feel. We will also take pictures too—if you agree.

You do **NOT** have to do this study and you **CAN** ask to stop at anytime. You will not get in trouble for saying no and nothing will happen to you.

Please ask any questions you have now. If you have any other questions you can ask them at any time.

Audio/Photo/Video Recording Consent Options:

Can I record your voice while talking? Yes or No (circle one)

Can I take a notes while we talk? Yes or No (circle one)

Can I take pictures of you? Yes or No (circle one)

Print your name here _____

Signature _____ Date _____

STATEMENT OF ASSENT

I understand that I am being asked to talk about when Superman saved me and I may be audio recorded and photographed while doing it. I agree to do this but I also I know that I can stop at anytime. I also know that everything I do will be kept private.

Print your name here _____

Signature _____ Date _____

For the Researcher:

I Clark Kent have explained this research and what is expected of the participant. The participant has agreed to participate in this study and understands that their responses are confidential and that they may stop participating at any time without any consequences.

Signature of investigator _____ Date _____

INFORMED PARENTAL CONSENT FORM

We invite your child to take part in a research study being conducted by Clark Kent who is a journalist and student at the at Hampshire College, Amherst, MA and an intern at the Daily Planet, as part of his research project, Saved by a Super Hero: Tales of the Rescued. The study, as well as your rights as a participant, are described below.

Description: This study will ask you to answer questions about the time when Superman saved you/your child. I am writing a 4-part story for my Division III project for Hampshire College and some excerpts may be published in the Daily Planet. My hope is to show how being saved can be positively life-changing. I want to show what your life was like before and after Superman.

Confidentiality: The records of this study will be kept private. All data will be kept confidential. Your child's name will not be used in this study. All children will be referred to with pseudonyms. Your child will be given an identification number on the interviewer's sheet. In any report we may publish, your child's information will not include any identifiable data. The audio of your child's participation will be destroyed after it has been transcribed. All identifying records will be destroyed after publication of the story.

Audio/Photo/Video Recording Consent Options:

I Do I Do Not agree to the researcher's use of *audio recordings* of my child's voice to be used for the final public exhibition of this study.

I Do I Do Not agree to the researcher's use of *photography* of my child may be used in the final public exhibition of this study.

I Understand that research consented to may be published and available to the public indefinitely.

Risks & Benefits: There are minimal to no foreseen risks to your child's safety. If your child ever feels uncomfortable or remembers being scared, we will stop. Mental health workers will be available if the children need them.

Freedom to Withdraw or Refuse Participation: I understand that my child has the right to stop participation at any time, refuse to answer any of the interviewer's questions, and/or withdraw from the study at any time for any reason without prejudice from the investigator.

Grievance Procedure: If you have any concerns or are dissatisfied with any aspect of this study, you may report your grievances anonymously to the Human Subjects Institutional Review Board, c/o Dean of Faculty Office, Hampshire College, 893 West Street Amherst, MA 01002, 413-559-5676, irb@hampshire.edu.

Questions? Please feel free to ask the investigator any questions before signing the consent form or at any time during or after the study.

Principal Investigator: Clark Kent, Daily Planet and Hampshire College; Faculty Supervisor: Bruce Wayne, Wayne Enterprises and Hampshire College, (413) 559-2866, bwayneHA@hampshire.edu.

Informed Consent Statement

I, _____, give permission for my child, _____ to participate in the research project entitled, "Saved by a Super Hero: Tales of the Rescued." The study has been explained to me and my questions answered to my satisfaction. I understand that my child's right to withdraw from participating or refuse to participate will be respected and that his/her responses and identity will be kept confidential. I give this consent voluntarily.

Parent/Guardian Signature:

Signature

Date

Investigator Signature:

Signature

Date

INFORMED CONSENT FORM

We invite you to take part in a research study being conducted by Clark Kent who is a journalist and student at Hampshire College, Amherst, MA and an intern at the Daily Planet and, as part of his research project, *Saved by a Super Hero: Tales of the Rescued*. The study, as well as your rights as a participant, are described below.

Description: This study will ask you to answer questions about the time when Superman saved you. I am writing a 4-part story for my Division III Project. My hope is to show how being saved can be positively life-changing. I want to show what your life was like before and after Superman.

Confidentiality: The records of this study will be kept private. All data will be kept confidential. Your name will not be used in this study unless you consent to this. If you choose anonymity, you will be given an identification number on the interviewer's sheet. In any report we may publish, your information will not include any identifiable data. The audio of your participation will be destroyed after it has been transcribed. All identifying records will be destroyed after publication of the story.

I Do/ Do Not Agree to have my real name used in this research and any publications that result from the research.

I Do/ Do Not Agree to have my interview audio recorded by the researcher.

I Do/ Do Not Agree to have my photograph taken by the researcher.

I Understand that research consented to may be published and available to the public indefinitely.

Risks & Benefits: There are minimal to no risks to your safety posed by this study. If you ever feel uncomfortable during the study, you may stop at any time. Should local support be needed, the researcher will provide you with contact information for local support groups who can assist you.

Freedom to Withdraw or Refuse Participation: You have the right to stop at any time, to refuse to answer any of the interviewer's questions at any time, and to withdraw from the project at any time without prejudice from the investigator.

Grievance Procedure: If you have any concerns or are dissatisfied with any aspect of this study, you may report your grievances anonymously if desired to the Human Subjects Institutional Review Board, c/o Dean of Faculty Office, Hampshire College, Amherst, MA 01002, 413-559-5676.

Questions? Please feel free to ask the investigator any questions before signing the consent form or at any time during or after the study.

Principal Investigator: Clark Kent, Daily Planet and Hampshire College; Faculty Supervisor: Bruce Wayne, Wayne Enterprises and Hampshire College, (413) 559-2866, bwayneHA@hampshire.edu.

Informed Consent Statement

I, _____, agree to participate in the research project entitled, "Saved by a Super Hero: Tales of the Rescued." The study has been explained to me and my questions answered to my satisfaction. I understand my right to withdraw from participating or refuse to participate will be respected and that my responses and identity will be kept confidential unless indicated otherwise above. I give this consent voluntarily.

Participant Signature:

Signature

Date

Investigator Signature:

Signature

Date

Interview Questions Adults:

- 1) Do you remember what you were doing right before Superman saved you? Please explain.
- 2) How would you describe your life before Superman?
 - a. Did you have a good job?
 - b. Do you remember being happy?
 - c. Would you describe your life as being a happy one?
 - d. Did you have a list of things that you wanted to do, but never got around to doing?
- 3) Tell me about when Superman saved you?
- 4) Was Superman nice?
- 5) Did you think Superman was going to save you? Were you ever unsure that he would rescue you?
- 6) What happened afterward?
- 7) How did you feel?
- 8) Did you make any changes to your life? If so, what changes?
- 9) Do you still have the same job as you did after being rescued?
- 10) How is your life different now?
- 11) Would you describe your life as being transformed by being saved by Superman?
- 12) If you could say one thing to Superman, what would that be?

Additional Questions for Luthor Corp Employees:

- 13) Did you ever think you would have been held hostage at Luthor Corp?
- 14) How did you feel when you saw Superman coming to save you?
- 15) After you were brought to safety, what was your first thought?
- 16) Did being saved by Superman make you feel better about going back to work?
- 17) Do you think it would have been harder to go back to work if Superman had not saved you?
- 18) Do you think Batman would have done as good a job as Superman?

Questions for Minors:

- 1) Do you know who Superman is?
- 2) Do you know Superman is the one who saved you?
- 3) Tell me about how you felt before you got saved.
- 4) Tell me about how you felt after Superman saved you.
- 5) Were there things you were afraid of before that now you are not afraid of? What?
- 6) Do you think Superman made your life better?
- 7) If you could tell Superman something, what would you tell him?