

Le Moyne College Institutional Review Board

**APPLICATION FOR CONTINUING IRB APPROVAL**

All approved **Form C** research projects must receive continuing approval from the IRB if the research will continue or resume after the initial one-year approval period. If your project has been completed, you should submit a *Project Closure Form* instead of this form.

Please fill out all sections of this form completely. In order to avoid any disruption in your research activities, this form must be submitted to the IRB co-chairs (at [irb@lemoyne.edu](mailto:irb@lemoyne.edu)) no later than **one month** prior to the expiration date of your project.

**Note:** If you use a paper (rather than electronic) consent form, please submit a copy of the consent form with this request so that the IRB may update the stamped approval date.

**Section I: Project Information**

Date Submitted:

Name of Investigator(s):

IRB Application Number:

Project Title (*as it appears on approved application*):

Approval Date of Application (*or latest extension*):

**Section II: Information on Continuing Research Activities**

1. Please check the statement below that describes the research you plan to conduct during the upcoming renewal period. If you plan to make changes to your project's methods and procedures or consent process during the next year, or if there has been a change in the assessment of your project's risk, please also submit the *Request to Change an Approved Study Form*.

\_\_\_\_\_ Data from human subjects will be collected during the upcoming renewal period.

\_\_\_\_\_ The research covered by this renewal will be limited to the analysis of data collected under the previously approved research application.

2. Please provide the following information:

- The total number of subjects who have participated prior to this renewal:
- The number of subjects that you intend to recruit or collect data from in the upcoming renewal period:
- Has the assessment of potential risks to subjects, as described in the previously approved application, changed?       YES       NO  
(If there has been a change in potential risks or in your assessment of risk, please submit the *Request to Change an Approved Study Form*.)
- Have there been any unanticipated problems or adverse events involving confidentiality, safety or risk to subjects during the last year?       YES       NO  
(If yes, please provide details below, including whether or not the IRB was notified.)
- Have there been any complaints from subjects?       YES       NO  
(If yes, please provide details below.)

Explanation of YES responses (Use another page if necessary):

\_\_\_\_\_  
Signature of Principal Investigator

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Faculty Sponsor

\_\_\_\_\_  
Date

Updated June 2023