

**Institutional Research Review Board**

2500 North River Road | Manchester, NH 03106-1045 | Phone: 603.668.2211

**Assurance of Principal Investigator**

Principal Investigator: \_\_\_\_\_

Department: \_\_\_\_\_

Title of Proposal/Project: \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Principal Investigator**

I **Certify** as follows concerning the above named research proposal in which I am the principal investigator:

1. The rights and welfare of the subjects will be adequately protected.
2. Risks or discomfort (if any) to subject(s) have been clearly indicated and it has been shown how they are outweighed by potential benefits to the subject or by the importance of the knowledge to be gained.
3. The informed consent of subjects will be obtained by appropriate methods which meet the requirements of the university's general assurance procedures.
4. Any proposed changes in research activity will be reported to the Institutional Research Review Board. Those changes may not be initiated without Institutional Research Review Board review and approval except where necessary to eliminate apparent immediate hazard to the subjects.
5. Any unanticipated problems involving risks to human subjects or others will promptly be reported to the Institutional Research Review Board.
6. If the study is approved, a report on the progress of the research will be submitted to the Institutional Research Review Board after one year, and each year until completion of the project. The Status Report Form will be used for this purpose.

**Acknowledged:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Dean/Vice President**