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| **STUDY INFORMATION** |

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| 1. **Principal Investigator Name:** |  |
| 1. **Principal Investigator Affiliation:** |  |
| 1. **Title of Project:** |  |
| 1. **IRB/HRPO #:** |  |

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| 1. **Describe how this project is funded:** |
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| 1. **List ALL research activities occurring *at SLU or by SLU researchers*:** |
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| 1. **List ALL research activities occurring *at WU or by WU researchers*:** |
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| **RESEARCH TEAM** |

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| 1. **Name** | **Affiliation** | **List Specific Activity** |
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| 1. Do the activities outlined in this collaborative research fall under the auspices of the SLU IRB/WU HRPO Umbrella Agreement? |
| YES – see 9a. |
| 9a. If YES, please indicate which institution is the IRB of Record: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| NO – requires dual HRPO/IRB review |

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| **IRB APPROVAL** |

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| 1. **SAINT LOUIS UNIVERSITY IRB APPROVAL**   Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Maureen Bresnahan, CIP, CCRA**  **Director**  **Human Subject Protection Program**  **Saint Louis University** | **WASHINGTON UNIVERSITY HRPO APPROVAL**  Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Jeanne Velders, JD, CIP**  **Executive Director**  **Human Research Protection Office**  **Washington University St. Louis** |