1. **A**. **To Be Completed By Supervising Faculty**

SUPERVISING FACULTY NAME:       PHONE:

DEPARTMENT AND CAMPUS ADDRESS:

CLASS:

NAME(S) OF STUDENT(S) TITLE(s) OF PROJECT(s) Uses Deception

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NOTE – Student class project forms, surveys/questionnaires, and CITI certificates must be submitted with this form to an IRB member in your department (IRB Delegate) or to [irb@louisiana.edu (](mailto:irb@louisiana.edu)if your department does not have an IRB Delegate). The only deception allowed for class projects is to alter the hypothesis being tested if knowing the actual hypothesis will affect the data gathered. In this case, debriefing forms must be attached for each project using deception.

In making this request for a delegated IRB review, I certify that

I have completed the Basic Human Subjects training through CITI as required by the UL Lafayette IRB.

All students have completed Human Subjects training through CITI as required by the UL Lafayette IRB.

I have read and understood the guidelines and procedures developed by UL Lafayette IRB for the protection of human subjects and will comply with both the letter and the spirit of the University's policies.

To the best of my knowledge, the class projects submitted in this packet are exempt from the regulations.

Subjects will not be placed at risk greater than normal daily activities for the average person.

The research project(s) do not involve major deception.

No external grant money is used to conduct the research project(s).

None of these projects will be used in a dissertation/thesis/conference presentation/publication.

I acknowledge my responsibility to request approval for any significant changes in any of these projects prior to implementing the change.

By checking this box, I, type faculty sponsor name, am hereby signing my name.   
Date:

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**II. To Be Completed by IRB Delegate:**

These proposed projects have been reviewed and approved by Departmental Delegates of the UL Lafayette IRB for compliance with the Code of Federal Regulations 45 CFR 46, Protection of Human Subjects and as amended.

Evidence of education on Protection of Human Subjects of Research was presented by the researcher(s).

By checking this box, I, type delegated reviewer name, am hereby signing my name.   
Date:

**III. Submit this and the student completed forms electronically to irb@louisiana.edu**

**Submit Copies To:** College/Departmental File, Graduate School Dean or Honors Program Director