**Request for Dartmouth College CPHS to Act as Single IRB**

Please complete this form as a first step in the process of requesting Dartmouth College CPHS to act as IRB of record for any other institution. The form may be sent by email to cphs@dartmouth.edu

Contact the [CPHS staff](mailto:cphs@dartmouth.edu) with any questions.

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**Name of the Dartmouth College Principal Investigator:**

**Email:**

**Department:**

**Study Title:**

**Funding Source:**

Will Dartmouth College be the primary awardee? \_\_\_\_\_\_\_\_\_

If no, please indicate the primary awardee:­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How many sites are engaged in human subjects research (please note that Dartmouth Health and Dartmouth College are separate sites)?

Please list all relying sites, with site PI (if known):

Provide a summary of the research to be conducted at Dartmouth and at the relying sites. Please use lay language.

Please provide a copy of the protocol (if available)

Please describe the timeline for this request and project, include any deadlines for a decision regarding this request: