**Form B**

**Request for Continuing Institutional Review Board Review**

(Please type or print clearly)

Title of the research project:

Date research project was approved:

Research project protocol number:

The data collection for the research project will be completed on what date?

The following researcher(s) are requesting a renewal of the authority to continue with the collection of data for one year:

*Primary Researcher Thesis/Dissertation Director (or other*

*research sponsor). Required if primary*

*researcher is not a DSU employee*

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_ Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mailing Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

For research that is not externally funded, data collection does not include the writing of a research report. If you have stopped collecting data on research subjects, there is no need to apply for a continuation of the study. If, however, you decide to begin collecting data again the application must be completed and submitted to the Institutional Review Board.

Send the application to:

Dr. Beverly Moon

Institutional Review Board Chair

239 Kent Wyatt Hall

Delta State University

Cleveland, MS 38733

irb@deltastate.edu