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| Scientific Validity Review  The IRB expects that a review for scientific validity be conducted at the department level by either the Department Chair/designee or Dissertation/Thesis Committee Chair with appropriate expertise in the given research area.   |  |  | | --- | --- | | Instructions: | Complete the required sections.  Sections marked with an asterisk ( \* ) are required.  Sections marked with a double asterisk ( \*\* ) are required if applicable. | | C:\Users\cbcholka\AppData\Local\Microsoft\Windows\INetCache\Content.Word\UNM_OfficeInstitutionalReviewBoard_Horizontal_RGB.PNG  1805 Sigma Chi NE | Tel: (505) 277-2644  Website: irb.unm.edu | Email: [IRBMainCampus@unm.edu](mailto:IRBMainCampus@unm.edu) |

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| Project Identification | |
| *\* Title of the project:* |  |

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| Principal Investigator of Record | | | | | | | | | | | | |
| \* The Principal Investigator of record is: *(select one)* | | | | | Principal Investigator | | | Responsible Faculty | | | | |
| \* Name: |  | | | | | \* Phone: |  | | | \* Email: |  | |
| \* Department: | |  | | \* University Status (e.g. tenure track or visiting faculty, instructor, staff, etc.): | | | | | | | |  |
| \* Affiliation: | | Main Campus | UNM Branch Campus: | | | | | | External Partner: | | | |

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| Additional Contact Person | | | | | | | | | | |
| \*\* The contact person for this project is: *(select one)* | | | | Student Investigator | | | Project Coordinator | | | |
| \*\* Name: |  | | | | \*\* Phone: |  | | \*\* Email: |  | |
| \*\* Department: | |  | \*\* University Status (e.g. undergraduate, master’s or PhD student, staff, etc.): | | | | | | |  |

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| Scientific Validity Review | | | | | |
| *\* Do you have a conflict of interest (significant personal or financial interest) associated with the review of this project?* | | | | **Yes.** **Do not review.** | |
| **No.** Complete review. | |
| \* Verify that the following criteria are met: | | | | | |
|  | The rationale and methods for the project are clearly stated and are scientifically sound or have scholarly merit. | | | | |
|  | The specific aims and objectives of this project are clearly stated and measurable. | | | | |
|  | The standards for conducting this research are consistent with any guidelines of relevant professional associations and scholarly disciplines. | | | | |
|  | The research includes procedures that are appropriate to the purpose of the project with the least amount of risk. | | | | |
|  | The project design is adequate to achieve the specific objectives of this project and the proposed participant population is appropriate. | | | | |
|  | The data to be collected are necessary to the meet the objectives of the project. | | | | |
|  | Adequate literature review has been done to support and justify this project. | | | | |
|  | Data considerations, including sample size and justification, estimated accrual and duration, and data analysis are clearly described and are adequate to meet the project objectives. | | | | |
|  | The researchers involved in this project have sufficient resources/facilities to carry out the research. | | | | |
|  | The researchers are qualified by training and experience to personally conduct and/or supervise the project. | | | | |
| \* As department reviewer, I have determined this project is: | | | **Approved** | | **Disapproved** |
| *\*\* Comments:* | |  | | | |

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| Scientific Validity Reviewer | | | | |
| **I am:** | **Department Chair/Designee** | **Dissertation Committee Chair** | **Master’s Thesis Committee Chair** | |
|  | |  | |  |
| \* Name | | \* Signature | | \* Date |