HUMAN RESEARCH ETHICS PROGRAM
NEW JERSEY DEPARTMENT OF HEALTH AND SENIOR SERVICES

www.nj.gov/health/hrep

IRB SUBMISSION CHECKLIST

Please provide the appropriate number of copies of the following documents: *Full Board review: 25 copies; Expedited Review: 3 copies; and Exempt Review: 2 copies. If you are requesting a Full Board Review only include 3 copies of the budget and grant application or contract, if applicable.*

- ☐ IRB Application
- ☐ Protocol
- ☐ Assurance for the Ethical Conduct of Research (OC-41)
- ☐ Informed Consent Documents (consent/assent forms, scripts, etc.)
- ☐ Instruments (survey, questionnaire, abstraction form, rating scale, etc.)
- ☐ Research Ethics Training Certification for all investigators and key support personnel
- ☐ Curriculum Vitae/Resumes for all investigators and key support personnel
- ☐ Grant Application or Contract

If conducting research involving FDA-regulated Drugs, Devices, Biologics, Compounds, or OTCs, please contact the Human Research Ethics Program for a list of additional required documents.

I hereby certify that the above-checked documents have been included with the appropriate number of copies.

Project Title	
Name of Principal Investigator (Print)	
Signature	Date