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| **For Requesting a Waiver of the Informed Consent Process** |
| **All forms must be typewritten and submitted via email to** [**MCirb@mercy.edu**](mailto:MCirb@mercy.edu)**.** |

**Section 1. PROTOCOL INFORMATION**

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| **Principal Investigator:** Click or tap here to enter text. |
| **Protocol Number:** Click or tap here to enter text. |
| **Project Title:** Click or tap here to enter text. |

**Section 2. REQUEST FOR WAIVER**

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| A protocol which does not include an informed consent process may be approved by the IRB under certain conditions. To request IRB approval of a protocol which does not include an informed consent process, please provide a response to all the following questions. Please be specific in explaining why each statement is true for this research. |
| **2A. Explain why and how the research involves no more than minimal risk to the subjects.**  Click or tap here to enter text. |
| **2B. Explain why the waiver will not adversely affect the rights and welfare of the subjects.**  Click or tap here to enter text. |
| **2C. Is the research team collecting identifiable private information and/or identifiable biospecimens?** Yes  No  **If yes, explain why the research could not practicably be carried out without using such information or biospecimens in an identifiable format.**  Click or tap here to enter text. |
| **2D. Explain why the research could not practicably be carried out without the waiver of informed consent.**  Click or tap here to enter text. |
| **2E. If a waiver of informed consent is approved by the IRB, will subjects be provided with additional pertinent information after participation?**   Yes  No  **Explain/describe why:**  Click or tap here to enter text. |