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**IRB Preliminary Approval or Waiver for Graduate Thesis**

 **Before you start your research**

All research involving living human beings or bodily tissue samples requires advance approval from AUC’s Institutional Review Board (IRB). Each student’s thesis advisor is responsible for ensuring that this form is filled in accurately. The IRB approval or waiver form should be signed once your thesis proposal/topic has been approved by the department. It is very important to submit this form **before** starting data collection for your research. This could take place prior to, or while, being enrolled in any of the following:  590, 591, 598, 599 on the MA level or 691, 699 on the PhD level.

**Student Name**: **Email:**

**AUC ID #** **Mobile #**

**Department/Unit**:

**School:**

**Thesis Title:**

**Date:**

**Name of Thesis Advisor:**

**Thesis Advisor’s Email:**

The advisor should check one of the following boxes.

\_\_\_ IRB approval is necessary for this thesis.

\_\_\_ IRB approval is not necessary for this thesis, since the research is

not concerned with living human beings or bodily tissue samples.

**Signature of Student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date:**

**Signature of Thesis Advisor:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date:**

**Name and Signature of Chair /Graduate Program Director: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Date:**

**Name and Signature of the Dean of the School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Date:**

**Student submits to Department/Program which sends to the Office of the Dean of the School**

1. Copy of this IRB preliminary form to be included with (2) The thesis proposal

and (3) The thesis proposal approval form.