



University of North Alabama Institutional Review Board Authorization Agreement

Institution or Organization Providing IRB Review (Institution A):

Name (Institution/Organization A): _____

IRB Registration #: _____

Federal-wide Assurance (FWA) # if any: _____

Institution Relying on the Designated IRB (Institution B):

Name (Institution/Organization B): University of North Alabama (UNA)

FWA#: _____

The Officials signing below agree that the University of North Alabama may rely on the designated IRB for review and continuing oversight of its human subjects research described below.

This agreement is limited to the following specific protocol(s):

Name of Research Project: _____

Name of Principal Investigator: _____

Sponsor or Funding Agency: _____

Award Number, if any: _____

(____) Other (describe): _____

The review performed by the designated IRB will meet the human subject protection requirements of UNA's OHRP-approved FWA. The IRB at Institution/Organization A will follow written procedures for reporting its findings and actions to appropriate officials at UNA. Relevant minutes of IRB meetings will be made available to UNA upon request. UNA remains responsible for ensuring compliance with the IRB's determinations and with the Terms of its OHRP-approved FWA. This document must be kept on file by both parties and provided to OHRP upon request.

Signature of Signatory Official (Institution/Organization A):

Date: _____

Print Full Name: _____

Institutional Title: _____

Signature of Signatory Official (University of North Alabama):

Date: _____

Print Full Name: _____

Institutional Title: _____