Austin Community College
Institutional Research Review Committee

**** INACTIVE FORM ****
Application for Research Review

This document serves as a ***planning guide*** to help prepare your responses before completing and submitting the final application. You may copy/paste these answers into the online Research Review Application. Contact the IRRC at irrc-group@austincc.edu if you have any questions.

1. INVESTIGATOR INFORMATION

1.01 Principal Investigator Name:

1.02 Phone:

1.03 Email:

1.04 Please specify your status:

- o ACC full-time faculty/staff
  - 1.04.01 Department:
  - 1.04.02 Job Title:
  - 1.04.03 Are you submitting this application for a thesis or dissertation as a student at another institution?
    - Yes
      - 1.04.03.01 Institution:
      - 1.04.03.02 ACC Full-Time Faculty/Staff Liaison Form – please attach the completed form
    - No
- o ACC part-time faculty/staff
  - 1.04.01 Department:
  - 1.04.02 Job Title:
  - 1.04.03 ACC Full-Time Faculty/Staff Liaison Form – please attach the completed form
- o ACC student
  - 1.04.01 Department:
  - 1.04.02 Major:
  - 1.04.03 ACC Full-Time Faculty/Staff Liaison Form – please attach the completed form
- o Non-ACC employee or student
  - 1.04.01 Institution:
  - 1.04.02 Job Title (if an employee)/Major (if a student):

1.04.03 ACC Full-Time Faculty/Staff Liaison Form – please attach the completed form

2. PROJECT INFORMATION

2.01 Project Title:

2.02 Anticipated Future Start Date:

2.03 Anticipated End Date:

2.04 Purpose of Project:
- o To fulfill requirements related to a course project at a college/university
- o To fulfill requirements related to a thesis at a college/university
- o To fulfill requirements related to a dissertation at a college/university
- o As part of extremally funded project
- o For my own scholarly interest
- o Other
    - 2.04.01 Please describe:

2.05 Funding Status
- o Externally Funded
    - 2.05.01 Funding Agency:
- o Internally Funded
    - 2.05.01 Name of Internal Department or Program Providing Funds:
- o Not Funded
- o Grant Application
    - 2.05.01 Grant Name:
- o Other
    - 2.05.01 Please describe:

2.06 Has your study been approved by the IRB at your home institution or another IRB?
- o ACC is my home institution
- o Yes, my home institution has approved my study
    - 2.06.01 Please upload the approval
- o No, my home institution has not approved my study
    - 2.06.01 Check box - Checking this box indicates that you acknowledge that if you are affiliated with an institution other than ACC, any approval of ACC's IRRC will be conditional upon approval of your home institution's IRB.

2.07 What are the project goals? (Please describe what policy, practice, or future research you hope this project will achieve, inform, or influence)

2.08 Why is this project important? (Please describe the background and significance of your project)

2.09 Please briefly describe the overall research approach (e.g., qualitative, quantitative, or mixed methods). Include the theoretical or conceptual framework guiding the study, the types of analysis you will conduct, and your rationale for selecting this methodology (Please do not describe data collection methods here—that will be addressed in the next question).

2.10 What are the hypotheses?

2.11 How do you intend to disseminate the results of this research? (Select all that apply)

- o Submit for publication
- o Present internally at ACC
- o Present outside of ACC (e.g., conference, academic event)
- o Thesis or dissertation defense
- o Other
    - 2.11.01 Please specify:

2.12 Will ACC be identified during the process of dissemination of the research results?

- o Yes
- o No

3. ACC INVOLVEMENT AND DATA NEEDS

3.01 Why are you interested in using ACC as a basis for your project?

3.02 Has ACC commissioned, co-sponsored, or officially endorsed this project?

- o Yes
    - 3.02.01 Please describe the nature of ACC's involvement:
- o No
    - 3.02.01 How will you ensure that ACC's involvement (e.g., data use, recruitment) is not misrepresented as endorsement of the project?

3.03 Will you request access to existing ACC data?

- o Yes

3.03.01 Please describe the specific data request, and your plan to access the data (Please note that approval of IRRC application does not grant access to institutional data. A separate data request process is required.) If you are an ACC faculty/staff, please complete the Data Request Form. If you are not an ACC faculty/staff, please submit your request through the Open Records Request process.

- o No

4. RESEARCH PROCEDURES

4.01 How will you collect data? (Please note that you will need to include copies of all data collection instruments) (select all that apply)

- o Survey
- o Interview
- o Educational tests (cognitive, diagnostic, aptitude, achievement)
- o Observation of public behavior (including visual or auditory recording)
- o Other
  - 4.01.01 Please specify:
- o Not applicable

4.02 Please attach your data collection instruments, if applicable

4.03 How will data be analyzed? (Please describe software or tools used; indicate "None" or "Not applicable" as appropriate)

4.04 How will you recruit participants? (Please provide recruit documents) (select all that apply)

- o Email outreach
- o Phone calls or text messages
- o In-class announcements or presentations
- o Other
  - 4.04.01 Please specify:
- o Not applicable

4.05 Please provide recruitment documents, if applicable

5. HUMAN SUBJECTS

5.01 What are the selection criteria for participants (e.g., sample size, race/ethnicity, age, gender)?

Austin Community College
Institutional Research Review Committee

5.02 Will your participants include any of the following groups? (Select all that apply)

- o Students enrolled in a course that you teach or supervise
- o Minors (under 18)
- o Vulnerable populations (please specify, e.g., educational disadvantaged persons, non-English speakers)
  - 5.02.01 Please specify:
- o None of above

5.03 How will you select participants?

- o All qualified participants will be selected
- o Other
  - 5.03.01 Please explain:

5.04 What personally identifiable data will be collected? (Select all that apply)

- o Names (First and/or Last)
- o Addresses or Phone Numbers
- o Email Addresses
- o Student ID Numbers
- o Social Security Numbers
- o Photographs or AV Recordings
- o Handwriting Samples
- o Fingerprints
- o No personally identifiable data is included

5.05 If interviews are to be conducted, where will they take place? (Indicate "None" or "Not applicable" as appropriate)

5.06 Will this study require informed consent from participants? (IRRC Guidance for Informed Consent)

- o Yes
  - 5.06.01 How will informed consent be obtained?
    - Participants will sign a physical (paper) consent form
    - Participants will complete an electronic consent form
    - A consent statement and acknowledgment will be included at the beginning of the survey
    - Other
      - 5.06.01.01 Please describe:

  - 5.06.02 If physical consent forms will be used, where will they be collected and stored?

- Stored in a secure, locked physical location accessible only to authorized personnel (e.g., locked filing cabinet in a restricted office)
  5.06.02.01 Please specify:
- Scanned and stored in a secure electronic location accessible only to authorized research team members (e.g., encrypted cloud storage, password-protected institutional server)
- Other
  5.06.02.01 Please describe:
- Not applicable — physical consent forms will not be used

5.06.03 Please upload a copy of your consent script or form, if applicable

o No

6. DATA SECURITY (IRRC Guidance for Data Security)

6.01 Indicate how you will maintain the confidentiality and security of any individually identifiable data to which you have access. (Select all that apply and provide additional details where appropriate)

o Store in a secure electronic location accessible only to authorized research team members (e.g., encrypted cloud storage, password-protected server)
o Store in a secure, locked physical location accessible only to authorized personnel (e.g., locked filing cabinet in a restricted office)
o Use data de-identification techniques (e.g., remove names, IDs, or other direct identifiers)
o Maintain a separate, secure crosswalk file linking identifiers to study IDs (stored separately from research data)
o Use encryption for data transmission and storage (e.g., when emailing or uploading data)
o Restrict access using role-based permissions (e.g., only analysts can view full datasets)
o Ensure all research team members complete training in data privacy and security (e.g., CITI, HIPAA)
o Other
  6.01.01 Please describe:
o Not applicable

6.02 If audio or video recording will be collected, describe how you will ensure their confidentiality? (Select all that apply and provide additional details where appropriate.)

o Store recordings in a secure, encrypted digital location (e.g., password-protected drive, institutional cloud storage)

- o Limit access to recordings to authorized research team members only
- o Assign participant codes and avoid using names in recordings
- o Store consent forms separately from recordings
- o Delete recordings after transcription or analysis is complete
- o Obtain explicit consent for recording and clarify how recordings will be used
- o Other
  - 6.02.01 Please describe:
- o Not applicable

6.03 Please indicate your plan for managing any personally identifiable information (PII) after the study concludes.

- o The study will not collect any individually identifiable data
- o Destroy all identifiable data within 3 years of study completion
- o Retain data for future research (requires justification and IRB approval)
  - 6.03.01 Please provide justification for your plan to retain identifiable information:
- o Archive de-identified data for institutional or scholarly use
- o Other
  - 6.03.01 Please describe:
- o Not applicable

7. BENEFITS

7.01 Will participants receive any form of benefit or compensation? (Select all that apply)

- o No
- o Yes, participants will have learning opportunities
- o Yes, participants will have access to resources
- o Yes, participants will receive course credit
- o Yes, participants will receive remuneration
  - 7.01.01 Please describe the remuneration process, including the type and amount of the incentive, the source of funding, how it will be distributed fairly and equitably, how you will protect any personally identifiable information (PII) related to the distribution:
- o Other
  - 7.01.01 Please describe other benefits or compensation:

7.02 If tests are to be administered, will subjects be informed of their individual results?

- o Yes
- o No
- o Not applicable

8. RISKS

8.01 Could subjects be at risk of criminal or civil liability, damage to employability or to financial standing, or undue embarrassment if responses became known?

- o Yes
  - 8.01.01 Please describe:
- o No

8.02 Does the research deal with any sensitive aspects of the subject's behavior, such as illegal conduct, drug use, sexual behavior, or alcohol use?

- o Yes
  - 8.02.01 Please describe:
- o No

8.03 Is deception involved?

- o Yes
  - 8.03.01 Please explain why it is necessary and how subjects will be debriefed:
- o No

8.04 Please describe any other risks the participants may be exposed to? (Indicate “None” or “Not applicable” as appropriate):

8.05 How will the participants be informed of the risks to which they will be subjected to? (Indicate “None” or “Not applicable” as appropriate):

8.06 Considering the risks discussed in the previous questions, what safeguards will be taken to minimize these risks? (Indicate “None” or “Not applicable” as appropriate):

8.07 Will all subjects be free to withdraw at any time without penalty?

- o Yes
- o No
  - 8.07.01 Please explain:

8.08 What study-related data will the AI tools access? (Indicate “None” or “Not applicable” as appropriate)

8.09 How will AI tools be used in the research? (Indicate “None” or “Not applicable” as appropriate)

8.10 What are the risks of the AI tools and how will they be minimized? (Indicate "None" or "Not applicable" as appropriate)

9. SUBMISSION

9.01 Review ACC's Title IX Employee Reporting Requirements

Please confirm that you and the project research team have read ACC's Title IX Employee Reporting Requirements. These can be found here https://www.austincc.edu/offices/equal-opportunity-compliance/title-ix/responsible-employees

9.02 Please check this box to indicate your agreement with the statement

I certify that the research procedures used in this project and method of consent (if any) will be followed as approved by ACC's Institutional Research Review Committee. Any future changes will be submitted for review and approval prior to implementation.