

**Plymouth State University (PSU)
Institutional Review Board (IRB) Authorization Agreement (IAA)**

Name of Institution Providing IRB Review:

IRB Registration #: _____ ; Federalwide Assurance (FWA) #:

Name of Institution Relying on the Designated IRB:

Plymouth State University (PSU) on behalf of the PSU IRB
IRB Registration #: 0000XXXX; FWA #: FWA000XXXXX

The Officials signing below agree that Plymouth State University may rely on _____ for review and continuing oversight of the human subjects research described below:

Name of Research Project:

Name of Investigator(s):

Name of PSU Investigator(s):

Sponsor or Funding Agency:

The review and continuing review performed by _____ will meet the human subject protection requirements of the PSU OHRP-approved FWA. _____ will follow written procedures for reporting its findings and actions to appropriate officials at PSU. Relevant minutes of _____'s meetings will be made available to PSU upon request. PSU remains responsible for ensuring compliance with the IRB's determinations and with the Terms of its OHRP-approved FWA.

_____ and PSU mutually agree to inform the other Institution in the event of any unanticipated problems involving risks to participants or others, or suspensions or terminations of this protocol, as well as any serious or continuing non-compliance or misconduct on the part of the Investigator.

This document must be kept on file by both parties and provided to OHRP upon request.

Signature of Signatory Official (_____):

_____ Date: _____

Print Full Name: _____ Institutional Title: _____

Signature of Signatory Official on behalf of Plymouth State University:

_____ Date: _____

Joseph N. Boyer, PhD
Director of Research and Innovation