**SINGLE IRB QUOTE REQUEST**

Instructions:

* Please fill out this form fully. Please contact [Charlie Eibeler](mailto:Ceibeler@wcgclinical.com?subject=Request%20for%20sIRB%20Quote) or [Kevin Nellis](mailto:kevin.nellis@downstate.edu?subject=sIRB%20quote) if you have any questions.
* Email a copy of the completed form to Charlie Eibeler at WIRB ([Ceibeler@wcgclinical.com](mailto:Ceibeler@wcgclinical.com)) and [Kevin.Nellis@downstate.edu](mailto:Kevin.Nellis@downstate.edu)
* Await a reply from Mr. Eibeler with your quote.

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| --- | --- |
| Full Study Title | Click here to enter text. |
| Study Nickname | Click here to enter text. |
| Name of Investigator(s) | Click here to enter text. |
| Number of sites |  |
| Site List  *If known, please list sites as they may already have an agreement with WCG* |  |
| Estimated Start Date of Study | Click here to enter text. |
| Number of Informed Consent Forms  *Account for a translated version if that will be part of the study* | Click here to enter text. |
| Will there be a PI at each site? | Yes No |
| Will translation services be required for your informed consent forms?  *Translation costs cannot be provided in advance as they are based on the length of the consent.* | Yes No |
| How many amendments do you estimate will be needed per year?  *Amendments will only be charged if utilized. We recommend including a minimum number of 1 per year and up to 3.* | Click here to enter text. |
| What do you estimate the total years of the study to be? | Rollout: Click here to enter text.  Recruitment: Click here to enter text.  Data Collection: Click here to enter text.  Total - Click here to enter text. |
| Where is the administrative/clinical core site? | Click here to enter text. |
| Where is the data coordination site? | Click here to enter text. |
| Are there any sites that will be exempt from using sIRB (e.g. international sites, VA sites, tribal territory? If yes, how many? | Yes No  Number of Exempt Sites: \_\_\_\_ |

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| Person Completing This Form | |
| Name | Click here to enter text. |
| Title | Click here to enter text. |
| Email | Click here to enter text. |
| Phone Number | Click here to enter text. |