# PROTOCOL TITLE:

*Include the full protocol title.*

Response:

# PRINCIPAL INVESTIGATOR:

*Name*

*Department*

*Telephone Number*

*Email Address*

# FACULTY SPONSOR (for student projects):

# Name

*Department*

*Telephone Number*

*Email Address*

# VERSION NUMBER:

*Include the version number of this protocol.*

Response:

# DATE:

*Include the date of submission or revision.*

Response:

If your research involves specific recruitment of participants outside the Unites States, you must complete and submit this form in conjunction with all other relevant HREB forms.

1. List the international country (locales or countries) from which you plan to recruit participants.
2. Include the name and contact information for someone who can act as a cultural consultant for your study including: name, address, email, telephone number, and position (i.e., why the individual is qualified to serve as a cultural consultant). The cultural consultant should be familiar with the culture of the subject population and or be able to verify that translated documents are the equivalent of English versions of documents submitted. Also the cultural consultant should not have any conflict of interest (i.e., should not be a member of the research team, a relative of a member of the research team, etc…).
3. Indicate that you have checked the [OHRP International Compilation of Human Research Standards](http://www.hhs.gov/ohrp/international/index.html) and specify any required procedures that must be followed to conduct research in that locale (as applicable).
4. Indicate whether documentation of permission from local authorities is necessary. Include documentation or indicate how this will be provided to the HREB.
5. In what language will the materials be provided to participants? If any language other than English will be used, please attach English and translated versions of all documents (e.g., consent forms, recruitment documents, questionnaires, etc…). Include a certification of translation.

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | Country or Locale | Cultural Consultant Information | OHRP Checked | Special Requirements | Local Permission Needed | Local Permission Included | Language | Translation Included |
| 1 |  | Name  Email  Address  Phone  Position |  |  |  |  |  |  |
| 2 |  | Name  Email  Address  Phone  Position |  |  |  |  |  |  |
| 3 |  | Name  Email  Address  Phone  Position |  |  |  |  |  |  |