

## Institutional Review Board (IRB)/Independent Ethics Committee (IEC) Authorization Agreement

**Name of Institution or Organization Providing IRB Review (Institution/Organization A):**

Western Institutional Review Board

IRB Registration #: IRB00000533

Federalwide Assurance (FWA) #, if any: N/A

**Name of Institution Relying on the Designated IRB (Institution B):**

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FWA #: \_\_\_\_\_

The Officials signing below agree that     (name of Institution B)     may rely on the designated IRB for review and continuing oversight of its human subjects research described below: (*check one*)

This agreement applies to all human subjects research covered by Institution B's FWA.

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 subjects protection requirements of Institution B's OHRP-approved FWA. The IRB at Institution/Organization A will follow written procedures for reporting its findings and actions to appropriate officials at Institution B. Relevant minutes of IRB meetings will be made available to Institution B upon request. Institution B 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: \_\_\_\_\_

**NOTE: The IRB of Institution A must be designated on the OHRP-approved FWA for Institution B.**

Signature of Signatory Official (Institution B): \_\_\_\_\_ Date: \_\_\_\_\_

Print Full Name: \_\_\_\_\_ Institutional Title: \_\_\_\_\_