



## Add or Remove Affiliate Institution

**This form must be submitted by the Signatory Institution Primary Contact.**

OMB#: 0925 – 0625 Expiry Date: 01/31/2014
<p>Collection of this information is authorized by The Public Health Service Act, Section 411 (42 USC 285a). Rights of your participation in the NCI CIRB is protected by The Privacy Act of 1974. Participation is voluntary, and there are no penalties for not participating or withdrawing from the NCI CIRB at any time. Refusal to participate will not affect your benefits in any way. The information collected will be kept private to the extent provided by law. Names and other identifiers will not appear in any report of the NCI CIRB. Information provided will be combined for all participants and reported as summaries. You are being requested to complete this instrument so that we can conduct activities involved with the operations of NCI CIRB Initiative.</p> <p style="text-align: center;"><b>NOTIFICATION TO RESPONDENT OF ESTIMATED BURDEN</b></p> <p>Public reporting burden for this collection of information is estimated to average 10 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. <b>An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.</b> Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: NIH, Project Clearance Branch, 6705 Rockledge Drive, MSC 7974, Bethesda, MD 20892-7974, ATTN: PRA (0925-0625). Do not return the completed form to this address.</p>

### Remove Affiliate Institution(s)

<p>Provide information below to remove Affiliate Institution(s).</p> <p>The CIRB will no longer be the IRB of record for these Affiliate Institution(s).</p>		
Affiliate Institution Name	FWA Number	NCI Institution Code

### Add New Affiliate Institution Information

<p>Affiliate Institutions are defined by the CIRB as meeting <b>ALL</b> of the following criteria:</p> <ul style="list-style-type: none"> <li>• the local context considerations of the Affiliate Institution are the same as the Signatory Institution. Local context considerations are reported by the Signatory Institution in the Annual Institution Worksheet About Local Context;</li> <li>• the boilerplate language and institutional requirements of the Affiliate Institution are the same as the Signatory Institution. The boilerplate language and institutional requirements are reported by the Signatory Institution in the Annual Institution Worksheet About Local Context; and</li> <li>• the conduct of research at the Affiliate Institution is monitored by the same office as the Signatory Institution.</li> </ul> <p>Provide the information requested for each Affiliate Institution that meets the CIRB's definition and provide contact information for Sub-Investigators and Research Staff for each Affiliate Institution.</p>	
Signatory Institution Name	
Affiliate Institution Name	
FWA Number	NCI Institution Code
Is this Institution an NCI-designated Cancer Center? (Yes, No)	



Sub-Investigator Information

Sub-Investigators are physician investigators who have a significant role in the conduct of studies opened using the CIRB and function under the direction of a specific study's Signatory Institution Principal Investigator. Sub-Investigators will receive access to the CIRB website.

Provide the contact information for each Sub-Investigator located at the new Affiliate Institution named on page one.

Sub-Investigators will receive information about how to access the CIRB website in a separate email.

Sub-Investigator Information

First Name	Last Name	Degree
NCI Investigator Number	Email Address	
Telephone Number ( ) -	Extension	

Sub-Investigator Information

First Name	Last Name	Degree
NCI Investigator Number	Email Address	
Telephone Number ( ) -	Extension	

Sub-Investigator Information

First Name	Last Name	Degree
NCI Investigator Number	Email Address	
Telephone Number ( ) -	Extension	

Sub-Investigator Information

First Name	Last Name	Degree
NCI Investigator Number	Email Address	
Telephone Number ( ) -	Extension	

Sub-Investigator Information

First Name	Last Name	Degree
NCI Investigator Number	Email Address	
Telephone Number ( ) -	Extension	

Sub-Investigator Information

First Name	Last Name	Degree
NCI Investigator Number	Email Address	
Telephone Number ( ) -	Extension	



National Cancer Institute  
Central IRB Initiative

<b>Sub-Investigator Information</b>		
First Name	Last Name	Degree
NCI Investigator Number	Email Address	
Telephone Number ( ) -	Extension	
<p>If you need to add more Sub-Investigators from this new Affiliate Institution, access the Add or Remove Affiliate Institution Personnel form located at the following URL <a href="https://www.ncicirb.org/Personnel_AffiliateInstitution.doc">https://www.ncicirb.org/Personnel_AffiliateInstitution.doc</a>. Complete the form, save it as a Word document, and email it to the CIRB Operations Office at <a href="mailto:ncicirbcontact@emmes.com">ncicirbcontact@emmes.com</a>.</p>		

<b>Research Staff Information</b>		
<p>Provide contact information for Research Staff from the new Affiliate Institution named on page one who have a role in the conduct of studies opened using the CIRB and function under the direction of a specific study's Signatory Institution Principal Investigator. Research Staff will receive access to the CIRB website.</p> <p>Research Staff will receive information about how to access the CIRB Website in a separate email.</p>		
<b>Research Staff Information</b>		
First Name	Last Name	Degree (optional)
NCI Person ID Number	Title/Role	Email Address
Telephone Number ( ) -	Extension	
<b>Research Staff Information</b>		
First Name	Last Name	Degree (optional)
NCI Person ID Number	Title/Role	Email Address
Telephone Number ( ) -	Extension	
<b>Research Staff Information</b>		
First Name	Last Name	Degree (optional)
NCI Person ID Number	Title/Role	Email Address
Telephone Number ( ) -	Extension	
<b>Research Staff Information</b>		
First Name	Last Name	Degree (optional)
NCI Person ID Number	Title/Role	Email Address
Telephone Number ( ) -	Extension	
<b>Research Staff Information</b>		
First Name	Last Name	Degree (optional)
NCI Person ID Number	Title/Role	Email Address
Telephone Number ( ) -	Extension	



National Cancer Institute  
Central IRB Initiative

<b>Research Staff Information</b>				
First Name		Last Name		Degree (optional)
NCI Person ID Number	Title/Role		Email Address	
Telephone Number ( ) -		Extension		

<b>Research Staff Information</b>				
First Name		Last Name		Degree (optional)
NCI Person ID Number	Title/Role		Email Address	
Telephone Number ( ) -		Extension		

<b>Research Staff Information</b>				
First Name		Last Name		Degree (optional)
NCI Person ID Number	Title/Role		Email Address	
Telephone Number ( ) -		Extension		

<b>Research Staff Information</b>				
First Name		Last Name		Degree (optional)
NCI Person ID Number	Title/Role		Email Address	
Telephone Number ( ) -		Extension		

<b>Research Staff Information</b>				
First Name		Last Name		Degree (optional)
NCI Person ID Number	Title/Role		Email Address	
Telephone Number ( ) -		Extension		

<b>Research Staff Information</b>				
First Name		Last Name		Degree (optional)
NCI Person ID Number	Title/Role		Email Address	
Telephone Number ( ) -		Extension		

<b>Research Staff Information</b>				
First Name		Last Name		Degree (optional)
NCI Person ID Number	Title/Role		Email Address	
Telephone Number ( ) -		Extension		

If you need to add more Research Staff from this Affiliate Institution, access the Add or Remove Affiliate Institution Personnel form located at the following URL [https://www.ncicirb.org/Personnel\\_AffiliateInstitution.doc](https://www.ncicirb.org/Personnel_AffiliateInstitution.doc). Complete the form, save it as a Word document, and email it to the CIRB Operations Office at [ncicirbcontact@emmes.com](mailto:ncicirbcontact@emmes.com).