

## Section A: Signatory Institution Information

### NCI CIRB SIGNATORY INSTITUTION ENROLLMENT FORM

The NCI CIRB Signatory Institution Enrollment Form is a Microsoft Word document that must be completed electronically. Once the Form is completed, save it as a Word document, then email it to the CIRB Operations Office at [ncicirbcontact@emmes.com](mailto:ncicirbcontact@emmes.com).

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OMB#: 0925 – 0625  
Expiry Date: 01/31/2014

Collection of this information is authorized by The Public Health Service Act, Section 411 (42 USC 285a). Rights of your participation in the National Cancer Institute (NCI) Central Institutional Review Board (CIRB) Initiative is protected by The Privacy Act of 1974, as amended. The purpose of the information collection is to conduct reviews of clinical trial studies. Although your participation in NCI-sponsored research and completion of the forms is voluntary, if you wish to participate in the CIRB, you must complete all questions on the form. The information you provide will be combined for all participants and reported as summaries. It will be kept private to the extent provided by law.

#### NOTIFICATION TO RESPONDENT OF ESTIMATED BURDEN

Public reporting burden for this collection of information is estimated to average 4 hours 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. **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.** 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.

## Section A: Signatory Institution Information

Section A: Signatory Institution Information (Institution of Signatory Official who signs the Authorization Agreement)			
Signatory Institution Name			
Street Address			
Street Address #2			
City		State	Zip
OHRP Federalwide Assurance (FWA) Number			
NCI Institution Code		Using which CIRB: <input type="checkbox"/> Adult-Late Phase Emphasis <input type="checkbox"/> Pediatric <input type="checkbox"/> Adult-Early Phase Emphasis	
Is this Institution a participating member of a Community Clinical Oncology Program (CCOP)? (Yes, No)		Name of CCOP	
Is this Institution a participating member of a Minority-Based Community Clinical Oncology Program (MBCCOP)? (Yes, No)		Name of MBCCOP	
Is this Institution an NCI-designated Cancer Center? (Yes, No)		Name of NCI-designated Cancer Center	
Identify the Signatory Official at the Signatory Institution			
First Name		Last Name	Degree (optional)
Title/Role		Email Address	
Telephone Number ( ) -		Extension	
Identify the person(s) who will serve as the Signatory Institution Primary Contact			
Signatory Institution Primary Contact Information			
First Name		Last Name	Degree (optional)
NCI Person ID Number	Title/Role	Email Address	
Telephone Number ( ) -		Extension	
Signatory Institution Primary Contact Information			
First Name		Last Name	Degree (optional)
NCI Person ID Number	Title/Role	Email Address	
Telephone Number ( ) -		Extension	
Signatory Institution Primary Contact Information			
First Name		Last Name	Degree (optional)
NCI Person ID Number	Title/Role	Email Address	
Telephone Number ( ) -		Extension	

Institution GUID (Internal Use Only)	
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## Section B: Component Institutions as Defined by the CIRB

Component Institutions are defined by the CIRB as meeting **ALL** of the following criteria:

- the Component Institution operates under a different name than the Signatory Institution, but the Signatory Institution has legal authority for the Component Institution;
- the FWA number for the Component Institution is the same as the Signatory Institution;
- the local context considerations of the Component 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;
- the boilerplate language and institutional requirements of the Component 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
- the conduct of research at the Component Institution is monitored by the same office as the Signatory Institution.

List all Component Institutions that meet the CIRB's definition.

NOTE: Information about Affiliate Institutions, and related Investigators and Research Staff information, is captured in Section F.

### Component Institution Information

Institution Name

NCI Institution Code

Street Address

Street Address #2

City

State

Zip

### Component Institution Information

Institution Name

NCI Institution Code

Street Address

Street Address #2

City

State

Zip

### Component Institution Information

Institution Name

NCI Institution Code

Street Address

Street Address #2

City

State

Zip

### Component Institution Information

Institution Name

NCI Institution Code

Street Address

Street Address #2

City

State

Zip

### Component Institution Information

Institution Name

NCI Institution Code

Street Address

Street Address #2

City

State

Zip

## Section C: Signatory Institution Principal Investigator Information (continued)

### Section C: Signatory Institution Principal Investigator Information

Signatory Institution Principal Investigators (PIs) are individuals designated to open studies using the NCI CIRB.

Provide contact information for PIs from the Signatory and/or Component Institutions.

Signatory Institution Principal Investigators will receive information about how to open a study in a separate email.

#### Signatory Institution Principal Investigator Information

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

#### Signatory Institution Principal Investigator Information

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

#### Signatory Institution Principal Investigator Information

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

#### Signatory Institution Principal Investigator Information

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

#### Signatory Institution Principal Investigator Information

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

#### Signatory Institution Principal Investigator Information

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

#### Signatory Institution Principal Investigator Information

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

#### Signatory Institution Principal Investigator Information

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

Click [here](#) to add more Signatory Institution Principal Investigators.

Click [here](#) to move to the next section.

## Section C: Signatory Institution Principal Investigator Information

Signatory Institution Principal Investigator Information		
First Name	Last Name	Degree
NCI Investigator Number	Email Address	
Telephone Number ( ) -	Extension	
Signatory Institution Principal Investigator Information		
First Name	Last Name	Degree
NCI Investigator Number	Email Address	
Telephone Number ( ) -	Extension	
Signatory Institution Principal Investigator Information		
First Name	Last Name	Degree
NCI Investigator Number	Email Address	
Telephone Number ( ) -	Extension	
Signatory Institution Principal Investigator Information		
First Name	Last Name	Degree
NCI Investigator Number	Email Address	
Telephone Number ( ) -	Extension	
Signatory Institution Principal Investigator Information		
First Name	Last Name	Degree
NCI Investigator Number	Email Address	
Telephone Number ( ) -	Extension	
Signatory Institution Principal Investigator Information		
First Name	Last Name	Degree
NCI Investigator Number	Email Address	
Telephone Number ( ) -	Extension	
Signatory Institution Principal Investigator Information		
First Name	Last Name	Degree
NCI Investigator Number	Email Address	
Telephone Number ( ) -	Extension	
Signatory Institution Principal Investigator Information		
First Name	Last Name	Degree
NCI Investigator Number	Email Address	
Telephone Number ( ) -	Extension	
Signatory Institution Principal Investigator Information		
First Name	Last Name	Degree
NCI Investigator Number	Email Address	
Telephone Number ( ) -	Extension	
Signatory Institution Principal Investigator Information		
First Name	Last Name	Degree
NCI Investigator Number	Email Address	
Telephone Number ( ) -	Extension	

Click [here](#) to add more Signatory Institution Principal Investigators.

Click [here](#) to move to the next section.

## Section C: Signatory Institution Principal Investigator Information

<b>Signatory Institution Principal Investigator Information</b>		
First Name	Last Name	Degree
NCI Investigator Number		Email Address
Telephone Number ( ) -		Extension
<b>Signatory Institution Principal Investigator Information</b>		
First Name	Last Name	Degree
NCI Investigator Number		Email Address
Telephone Number ( ) -		Extension
<b>Signatory Institution Principal Investigator Information</b>		
First Name	Last Name	Degree
NCI Investigator Number		Email Address
Telephone Number ( ) -		Extension
<b>Signatory Institution Principal Investigator Information</b>		
First Name	Last Name	Degree
NCI Investigator Number		Email Address
Telephone Number ( ) -		Extension
<b>Signatory Institution Principal Investigator Information</b>		
First Name	Last Name	Degree
NCI Investigator Number		Email Address
Telephone Number ( ) -		Extension
<b>Signatory Institution Principal Investigator Information</b>		
First Name	Last Name	Degree
NCI Investigator Number		Email Address
Telephone Number ( ) -		Extension
<b>Signatory Institution Principal Investigator Information</b>		
First Name	Last Name	Degree
NCI Investigator Number		Email Address
Telephone Number ( ) -		Extension
<b>Signatory Institution Principal Investigator Information</b>		
First Name	Last Name	Degree
NCI Investigator Number		Email Address
Telephone Number ( ) -		Extension
<b>Signatory Institution Principal Investigator Information</b>		
First Name	Last Name	Degree
NCI Investigator Number		Email Address
Telephone Number ( ) -		Extension

If you need to add more Signatory Institution Principal Investigators from the Signatory and/or Component Institutions, access the form located at the following URL [https://www.ncicirb.org/Personnel\\_SignatoryInstitution.doc](https://www.ncicirb.org/Personnel_SignatoryInstitution.doc). Complete the form, save it as a Word document, and email it with your completed Enrollment Form to the CIRB Operations Office at [ncicirbcontact@emmes.com](mailto:ncicirbcontact@emmes.com).

## Section D: Sub-Investigator Information

Sub-investigators are those who have a significant role in research, under the direction of the Signatory Institution Principal Investigator, and need access to the CIRB website.

Provide the contact information for Sub-Investigators from the Signatory and/or Component Institutions.

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	

### 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	

Click [here](#) to add more Sub-Investigators.

Click [here](#) to move to the next section.

## Section D: Sub-Investigator Information (continued)

<b>Sub-Investigator Information</b>		
First Name	Last Name	Degree
NCI Investigator Number	Email Address	
Telephone Number ( ) -	Extension	
<b>Sub-Investigator Information</b>		
First Name	Last Name	Degree
NCI Investigator Number	Email Address	
Telephone Number ( ) -	Extension	
<b>Sub-Investigator Information</b>		
First Name	Last Name	Degree
NCI Investigator Number	Email Address	
Telephone Number ( ) -	Extension	
<b>Sub-Investigator Information</b>		
First Name	Last Name	Degree
NCI Investigator Number	Email Address	
Telephone Number ( ) -	Extension	
<b>Sub-Investigator Information</b>		
First Name	Last Name	Degree
NCI Investigator Number	Email Address	
Telephone Number ( ) -	Extension	
<b>Sub-Investigator Information</b>		
First Name	Last Name	Degree
NCI Investigator Number	Email Address	
Telephone Number ( ) -	Extension	
<b>Sub-Investigator Information</b>		
First Name	Last Name	Degree
NCI Investigator Number	Email Address	
Telephone Number ( ) -	Extension	
<b>Sub-Investigator Information</b>		
First Name	Last Name	Degree
NCI Investigator Number	Email Address	
Telephone Number ( ) -	Extension	
<b>Sub-Investigator Information</b>		
First Name	Last Name	Degree
NCI Investigator Number	Email Address	
Telephone Number ( ) -	Extension	

Click [here](#) to add more Sub-Investigators.

Click [here](#) to move to the next section.



**Section D: Sub-Investigator Information (continued)**

<b>Sub-Investigator Information</b>		
First Name	Last Name	Degree
NCI Investigator Number	Email Address	
Telephone Number ( ) -	Extension	
<b>Sub-Investigator Information</b>		
First Name	Last Name	Degree
NCI Investigator Number	Email Address	
Telephone Number ( ) -	Extension	
<b>Sub-Investigator Information</b>		
First Name	Last Name	Degree
NCI Investigator Number	Email Address	
Telephone Number ( ) -	Extension	
<b>Sub-Investigator Information</b>		
First Name	Last Name	Degree
NCI Investigator Number	Email Address	
Telephone Number ( ) -	Extension	
<b>Sub-Investigator Information</b>		
First Name	Last Name	Degree
NCI Investigator Number	Email Address	
Telephone Number ( ) -	Extension	
<b>Sub-Investigator Information</b>		
First Name	Last Name	Degree
NCI Investigator Number	Email Address	
Telephone Number ( ) -	Extension	
<b>Sub-Investigator Information</b>		
First Name	Last Name	Degree
NCI Investigator Number	Email Address	
Telephone Number ( ) -	Extension	
<b>Sub-Investigator Information</b>		
First Name	Last Name	Degree
NCI Investigator Number	Email Address	
Telephone Number ( ) -	Extension	
<b>Sub-Investigator Information</b>		
First Name	Last Name	Degree
NCI Investigator Number	Email Address	
Telephone Number ( ) -	Extension	
<b>Sub-Investigator Information</b>		
First Name	Last Name	Degree
NCI Investigator Number	Email Address	
Telephone Number ( ) -	Extension	

If you need to add more Sub-Investigators from the Signatory and/or Component Institutions, access the form located at the following URL [https://www.ncicirb.org/Personnel\\_SignatoryInstitution.doc](https://www.ncicirb.org/Personnel_SignatoryInstitution.doc). Complete the form, save it as a Word document, and email it with your completed Enrollment Form to the CIRB Operations Office at [ncicirbcontact@emmes.com](mailto:ncicirbcontact@emmes.com).

## Section E: Research Staff Information

### Section E: Research Staff Information

Provide contact information for Research Staff from the Signatory and/or Component Institutions who have a significant role in research, under the direction of the Signatory Institution Principal Investigator, and need access to the CIRB website.

Research Staff will receive information about how to access the CIRB Website in a separate email.

#### Research Staff Information

First Name	Last Name	Degree (optional)
NCI Person ID Number	Title/Role	Email Address
Telephone Number ( ) -	Extension	

#### Research Staff Information

First Name	Last Name	Degree (optional)
NCI Person ID Number	Title/Role	Email Address
Telephone Number ( ) -	Extension	

#### Research Staff Information

First Name	Last Name	Degree (optional)
NCI Person ID Number	Title/Role	Email Address
Telephone Number ( ) -	Extension	

#### Research Staff Information

First Name	Last Name	Degree (optional)
NCI Person ID Number	Title/Role	Email Address
Telephone Number ( ) -	Extension	

#### Research Staff Information

First Name	Last Name	Degree (optional)
NCI Person ID Number	Title/Role	Email Address
Telephone Number ( ) -	Extension	

#### Research Staff Information

First Name	Last Name	Degree (optional)
NCI Person ID Number	Title/Role	Email Address
Telephone Number ( ) -	Extension	

#### Research Staff Information

First Name	Last Name	Degree (optional)
NCI Person ID Number	Title/Role	Email Address
Telephone Number ( ) -	Extension	

#### Research Staff Information

First Name	Last Name	Degree (optional)
NCI Person ID Number	Title/Role	Email Address
Telephone Number ( ) -	Extension	

Click [here](#) to add more Research Staff.

Click [here](#) to move to the next section.

## Section E: Research Staff Information (continued)

<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	
<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	

Click [here](#) to add more Research Staff.

Click [here](#) to move to the next section.

## Section E: Research Staff Information (continued)

<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		
<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 the Signatory and/or Component Institutions, access the form located at the following URL [https://www.ncicirb.org/Personnel\\_SignatoryInstitution.doc](https://www.ncicirb.org/Personnel_SignatoryInstitution.doc). Complete the form, save it as a Word document, and email it with your completed Enrollment Form to the CIRB Operations Office at [ncicirbcontact@emmes.com](mailto:ncicirbcontact@emmes.com).

## Section F: Affiliate Institutions as Defined by the CIRB

### Section F: Affiliate Institutions as Defined by the CIRB

Affiliate Institutions are defined by the CIRB as meeting **ALL** of the following criteria:

- 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;
- 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
- the conduct of research at the Affiliate Institution is monitored by the same office as the Signatory Institution.

List each Affiliate Institution that meets the CIRB's definition, and provide contact information for Sub-Investigators and Research Staff for each Affiliate Institution.

#### Affiliate Institution Information

Institution Name	
FWA Number	NCI Institution Code
Is this Institution an NCI-designated Cancer Center? (Yes, No)	

#### Sub-Investigator Information

Sub-investigators are those who have a significant role in research, under the direction of the Signatory Institution Principal Investigator, and need access to the CIRB website.

Provide the contact information for Sub-Investigators from the Affiliate Institution listed above.

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
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NCI CIRB Institution Enrollment Worksheet

Section B: Information About IRBs at Affiliate Institutions Who Rely on an IRB at Your Institution

NCI Investigator Number	Email Address
Telephone Number ( ) -	Extension

If you need to add more Sub-Investigators from this Affiliate Institution, access the 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 with your completed Enrollment Form to the CIRB Operations Office at [ncicirbcontact@emmes.com](mailto:ncicirbcontact@emmes.com).

**Research Staff Information**

Provide contact information for Research Staff from the Affiliate Institution listed above who have a significant role in research, under the direction of the Signatory Institution Principal Investigator, and need access to the CIRB website.

Research Staff will receive information about how to access the CIRB Website in a separate email.

**Research Staff Information**

First Name	Last Name	Degree (optional)
NCI Person ID Number	Title/Role	Email Address
Telephone Number ( ) -	Extension	

**Research Staff Information**

First Name	Last Name	Degree (optional)
NCI Person ID Number	Title/Role	Email Address
Telephone Number ( ) -	Extension	

**Research Staff Information**

First Name	Last Name	Degree (optional)
NCI Person ID Number	Title/Role	Email Address
Telephone Number ( ) -	Extension	

**Research Staff Information**

First Name	Last Name	Degree (optional)
NCI Person ID Number	Title/Role	Email Address
Telephone Number ( ) -	Extension	

**Research Staff Information**

First Name	Last Name	Degree (optional)
NCI Person ID Number	Title/Role	Email Address
Telephone Number ( ) -	Extension	

**Research Staff Information**

First Name	Last Name	Degree (optional)
NCI Person ID Number	Title/Role	Email Address
Telephone Number ( ) -	Extension	

**Research Staff Information**

First Name	Last Name	Degree (optional)
NCI Person ID Number	Title/Role	Email Address
Telephone Number ( ) -	Extension	

**Research Staff Information**

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 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 with your completed Enrollment Form to the CIRB Operations Office at [ncicirbcontact@emmes.com](mailto:ncicirbcontact@emmes.com).

NCI CIRB Institution Enrollment Worksheet

Section B: Information About IRBs at Affiliate Institutions Who Rely on an IRB at Your Institution

**If there are no other Affiliate Institutions, you have completed this form. Please review and return the completed worksheet to the CIRB Operations Office via email to [ncicirbcontact@emmes.com](mailto:ncicirbcontact@emmes.com). Thank you.**

NCI CIRB Institution Enrollment Worksheet  
Section B: Information About IRBs at Affiliate Institutions Who Rely on an IRB at Your Institution

**Additional Affiliate Institution Information**

List each Affiliate Institution that meets the CIRB's definition, and provide contact information for Sub-Investigators and Research Staff for each Affiliate Institution.

Institution Name

FWA Number

NCI Institution Code

Is this Institution an NCI-designated Cancer Center? (Yes, No)

**Sub-Investigator Information**

Sub-investigators are those who have a significant role in research, under the direction of the Signatory Institution Principal Investigator, and need access to the CIRB website.

Provide the contact information for Sub-Investigators from the Affiliate Institution listed above.

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

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NCI CIRB Institution Enrollment Worksheet  
Section B: Information About IRBs at Affiliate Institutions Who Rely on an IRB at Your Institution

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Institution Name

FWA Number

NCI Institution Code

Is this Institution an NCI-designated Cancer Center? (Yes, No)

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