

NEW JERSEY DEPARTMENT OF HEALTH
INSTITUTIONAL REVIEW BOARD

www.nj.gov/health/irb

IRB SUBMISSION CHECKLIST

Please email one (1) electronic copy of the following documents. Forms that require signature should be submitted as scanned versions in PDF. You may submit all documents as a single file or as separate files.

- ☐ Application for Initial Review (IRB-1)
- ☐ Research Protocol
- ☐ Data Use Agreement signed by principal investigator and NJDOH data steward(s).
(Contact researchadmin@doh.nj.gov to request data use agreement template and samples.)
- ☐ Agreement for Ethical Conduct of Human Subjects Research (OC-41) **(Federal employees submit OC-45, instead.)**
- ☐ CITI or NIH/NCI certificates for all investigators and research personnel
- ☐ Curriculum vitae or resumes for all investigators and research personnel

Plus, one copy of the following documents as applicable:

- ☐ Grant Application and award notification
- ☐ Informed Consent Documents (consent/assent forms, scripts, etc.)
- ☐ Instruments (survey, questionnaire, abstraction form, rating scale, etc.)
- ☐ Approval from other external OHRP–approved IRB institutions, if applicable
- ☐ **NJDOH scientists or project staff only:** Institutional Approval of Intramural Research (OC-37)

I hereby certify that the above-checked documents have been included and signed.

Project Title	
Name of Principal Investigator (Print)	
Signature	Date