COMMONWEALTH of VIRGINIA

HAROLD W. CLARKE
DIRECTOR

Department of Corrections

P. O. BOX 26963
RICHMOND, VIRGINIA 23261
(804) 674-3000

General Requirements for Human Subjects Research Proposal Submission

Submit via e-mail (if using standard mail, submit 5 copies) the attached Research Proposal and Research Agreement form, which can also be found at the following website:

http://www.vadoc.virginia.gov/forms/default.shtm

Please limit the proposal to approximately 15 pages, not including curriculum vitae (CV), surveys, references, tables and other related matter. Note that this is a sample outline to use as a guide in completing your Research Proposal. You may submit your affiliate's IRB form in place of this as long as all of the sections listed are addressed.

Your research proposal must include a thorough description of your study including timeline, design, sampling, methods, potential costs to the Department (including required resources from the Dept. such as personnel, supplies/materials, equipment, workspace, access to participants and files), a discussion of the proposal in the context of relevant literature, any surveys or instruments you plan on using, informed consent form(s), your university's IRB approval (if applicable), and the CV of all persons named as investigators and/or project advisors. Please discuss the benefits to the Department as well as the field of study. For those that have gone through the IRB process in a university setting, submission of the same materials is *usually* (with the addition of the aforementioned form) adequate. At the same website, you can find the departmental regulations for conducting research at the Virginia Department of Corrections. No human research may be conducted without informing the participant or his legally authorized representative in writing of the risks, procedures, and discomforts of the research. The voluntary informed consent of the participant or his legally authorized representative to participate in the research must be documented in writing. **If the study participant is under DOC supervision, the informed consent must be supported by signature of a witness not involved in the research**. For a study involving incarcerated participants, consent should clearly state that inmates are to contact the researcher **in writing** with questions about the study. The informed consent form should include a contact address but not a phone number. Upon release they may contact the researcher by phone if any questions arise. Once complete materials are submitted, the proposal will go before the Human Subject Research Review Committee. If approved (after any revisions), the Deputy Director of DOC must approve the study and the warden of the facility (if doing research in institutions) or the Chief Probation Officer (if doing research in community corrections) must also approve before permission is granted. This process takes at least two months.

Please submit all materials electronically to:

HSRRC@vadoc.virginia.gov

RESEARCH PROPOSAL

I. RESEARCHER INFORMATION

A. Principal Researcher(s)

B. Affiliation

C. Address

D. Telephone(s) Office:
Home:

E. E-mail Address

F. Project Supervisor (if this is a student research project or different from A.)

II. PROPOSAL INFORMATION

A. Date Proposal Submitted to R&MS Unit

B. Title

C. Purpose

D. Background & Significance

E. Methodology

F. References

G. Time Frame

H. Benefit to the Department of Corrections

I. Department Resources Required

J. Principal Investigator(s) and Advisor Curriculum Vitae

III. ENDORSEMENTS

A. Funding Source

B. Institutional Review Board approval, if applicable

C. Letters of Support (from involved parties, such as regional director(s), warden, district chief probation officer(s), regional administrator(s), or other VADOC administrators or executive staff)

Virginia Department of Corrections

RESEARCH AGREEMENT

This research agreement is submitted with the research proposal. The following is to be completed by the principal researcher.

Project Title:_____

_____

Project Starting and Ending Dates:_____

Expected Date Final Report Due:_____

Submit a copy of the research report to the Research & Management Services Unit.

I, the undersigned, hereby do affirm that I and all of my research staff have read, understand, and agree to abide by the Commonwealth of Virginia Board of Corrections' *Regulations for Human Subject Research* (Effective January 12, 1995).

_____ _____
(Name of Principal Researcher) (Title)

_____
(Academic/Professional Affiliation)

_____ (_____)_____
(Street Address) (Telephone)

_____
(City, State, ZIP)

_____ _____
(Signature of Principal Researcher) (Date)

_____ _____
(Signature of Advisor, if applicable) (Date)

_____ _____
(Signature of HRRC Chair) (Date)

VIRGINIA DEPARTMENT OF CORRECTIONS
RESEARCH AND MANAGEMENT SERVICES UNIT
EXTERNAL RESEARCH PROJECTS

VOLUNTARY INFORMED CONSENT

This study, entitled "Career Development Among Correctional Officers: An Analysis of Predictive Factors" [***Title of Study***], is being conducted by Dr. John F. Doe [***Name of Person Conducting Study***], Assistant Professor of Administrative Science [***Title of Person Conducting Study***], State University [***Affiliation of Person Conducting Study***]. The purpose of this study is to determine whether there are factors in the backgrounds of correctional officer candidates which predict career success [***Purpose of Study***]. Information obtained from this study will be used to help recruit, train and retain officers in the Department's career service [***Benefits of Study***].

Participants in this project will be asked to complete a questionnaire containing thirty items asking about their decision to enter correctional work, and to identify both positive and negative features of their careers to date [***Study Procedure***]. Your participation will require about 45 minutes [***Time Requirement***]. Answers will be available only to the researchers, retained in their files [***Confidentiality***], and will be given a code in place of names [***Anonymity***]. Your participation is voluntary and you may withdraw at any time without prejudice [***Voluntary Participation***]. No risk to the subject is anticipated, but some questions may result in mild stress or psychic discomfort [***Hazardous Risk***].

The researcher will be available to discuss the project's objectives or procedures during or after completion of the questionnaire [***Answer Inquiries***].

I AGREE to participate in this study.

I DO NOT WISH to participate in this study.

_____ _____
Signature of Participant Date

_____ _____
Witness Date