## **Educational Research Informed Consent Waiver Request**

## **Project & Investigator Information**

Project Title	
Principal Investigator	
Department / Unit	
Email	
Phone	
Description of Research Brief description of the study and purpose	
Population targeted	
Number of participants	
Waiver Request Details	
Type of waiver requested	
Waiver of documentation of consent	
<ul> <li>Waiver of informed consent</li> </ul>	

Justification for waiver (why informed consent should not be obtained, or documentation should not be required)

Risk and Benefit Assessment
Describe risks to participants
Describe benefits to participants or others
How are risks minimized?
Confidentiality
Describe how participant privacy and confidentiality will be protected
Additional Information
Any other relevant information?