

Application for Review Exemption

Basic Information				
Name of Research Project				
Lead Researcher	Name	Organization	Title	Major
	Phone:		Mobile Phone:	
	Fax:		E-mail:	
Reason for Exemption				

We confirm that all information provided in this form agrees with research project we plan to conduct, and we request for exemption of review to IRB.

※ **We observe the following regardless of review exemption.**

1. We will follow Bioethics and Safety Act and other relating guidelines, and will secure proper personnel for conducting research project.
2. We will strictly maintain confidentiality on relating materials of information on human research subject and other matters requiring confidentiality.
3. When there are plans for changes in research project, we certainly will obtain an approval from IRB before we conduct the plans.

※ Attached documents

1. Self-Check Table for Review Exemption
2. Basic mandatory documents required

 Name & Signature of Lead Researcher

 Date

※ If the research is found out to be conducted beforehand, IRB approval is canceled even after the IRB approval, and the result is notified to the corresponding institute.