

## Demographic Questionnaire Research Administration Leadership

NIH Single IRB

Version 1.1

**PIN:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Interviewer:** \_\_\_\_\_

No.	Question	Answer
1.	What type of institution are you associated with?	<input type="checkbox"/> Academic Institution <input type="checkbox"/> Independent IRB <input type="checkbox"/> Other (specify): _____
2.	What is your role with that institution/IRB?	
3.	For approximately how long have you been in that role? This can include time at your current institution as well as time at any previous institution when you served in the same or a very similar role at another IRB.	<input type="checkbox"/> Less than 1 year <input type="checkbox"/> 1 to 2 years <input type="checkbox"/> 3 to 4 years <input type="checkbox"/> 5 years or more
4.	For how many years have you been involved with decision-making about or executing the sIRB process for multi-site studies at your institution? This includes studies by any funder, and studies that were reviewed by an independent or centralized IRB.	<input type="checkbox"/> Less than 2 years <input type="checkbox"/> 2 to 3 years <input type="checkbox"/> 4 to 5 years <input type="checkbox"/> More than 5 years
5.	Has your institution served as the: <ul style="list-style-type: none"> <li>• Reviewing IRB for a multi-site study?</li> <li>• Relying institution for a multi-site study?*</li> </ul> *[Read aloud] This includes studies by any funder, and studies that were reviewed by an independent/centralized IRB.	Check all that apply:  <input type="checkbox"/> Reviewing IRB <input type="checkbox"/> Relying institution <input type="checkbox"/> None of the above (Ineligible)