## **IRB Administration**

OFFICE OF RESEARCH, University of California, Davis IRB Admin, CTSC Building 2921 Stockton Blvd., Ste. 1400, Rm 1429, Sacramento, CA 95817 https://irb.ucdavis.edu/



IRB ADMINISTRATION RELIANCE FEE FORM

## INSTRUCTIONS:

Please indicate the fee to be charged, complete Sections 1-4, as applicable, and submit the completed form with the application for review via IRBNet. This form should be used for each initial review and continuing review submission for studies as indicated in the <u>IRB fee schedule</u>. This form is not required for modification or reportable new information (RNI) submissions. NIH K awards are excluded from fees

or reportable new informati					from fees.	
		UC DAVIS IRE	OF RECORD			
Fees	for Non-l	Industry Sponsored,	Funded/RFP du	e Befo	ore 1/31/21	
INITIAL REVIEW					CONTINUING REVIEW	
Existing Agreement		No Existing Agreement			All Agreements	
☐ Other UC Campus \$ ☐ Non-UC Institution \$		☐ Other UC Ca ☐ Non-UC Inst			☐ Other UC Campus \$ 800 ☐ Non-UC Institution \$ 1,070	
Fees		-Industry Sponsored stry Sponsored, Relia				
* *					ONTINUING REVIEW	
☐ Other UC Campus \$2,224			☐ Other UC Campus \$1,211			
☐ Non-UC Ins		□ Non-UC Institution \$1,620				
		EXTERNAL IRI	B OF RECORD			
Fe	es for In	dustry Sponsored, R	eliance Initiated	After	6/30/20	
STUDY INFORMATIO	N	☐ Other UC Ca ☐ Non-UC Inst	•			
Title of the Study:					CORE IRBNet # (if available):	
. UC DAVIS INFORMAT	ΓΙΟΝ				I	
JC Davis PI Name:	T	iversity Position:	PI Phone:	PI Email:		
Department/Division:	UC Dav	vis Contact Name:	Contact Phone	: Co	Contact Email:	
Financial Contact Name:		Financial Contact Phone:		Financial Contact Email:		
. FUNDER INFORMATI	ON	.1				
f a UC Davis account shoul		ed for review fees, ple	ase provide the	followi	ing information:	
Aggie Enterprise Recharge			-			
f an institution or sponsor s	should be	e billed for review fee	s, please provide	the fo	ollowing information:	
nstitution/Sponsor Name:						
ederal Employee ID Numbe	er:					
nstitution/Sponsor Contact						

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Name & Title:			
Mailing Address:			
City, State, Zip Code:			
Contact's Email:			
Phone Number:	Fax Number:	Fax Number:	
4. RELYING INSTITUTION IN	FORMATION	IRB not reviewing for external sites	
Institution Name:			
Site Principal Investigator:			
Site IRBNet #:			
OFFICE OF RESEARCH USE	ONLY		
☐ New Protocol – UC Campus	☐ Annual Renewal – UC Campus	Notes:	
☐ New Protocol – Non-UC Institutio	n ☐ Annual Renewal – Non-UC Institution		
☐ External IRB – UC Campus	☐ External IRB – Non-UC Institution		