



BOISE STATE UNIVERSITY

**CENTER FOR ORTHOPAEDIC AND
BIOMECHANICS RESEARCH**

**Center for Orthopaedic & Biomechanics Research
(COBR)**

Request for COBR Sponsorship of a Research

Complete all sections of the application and email to: [COBR](#)

Section 1

Classification (check the appropriate box):

- University Research Collaboration
 - Commercial Research Collaboration
 - University Fee-for-Service
 - Commercial Fee-for-Service
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1. Project Name: _____
2. Principal Investigator's Name: _____
3. Principal Investigator's Institutional Affiliation: _____
4. Email Address: _____
5. Phone Number: _____
6. If Principal Investigator is a student the following must be provided:
 - a. Faculty Sponsor: _____
 - b. Department: _____
 - c. Faculty Sponsor Phone: _____
 - d. Is this study your thesis? YES ____ NO ____
7. Has this study been submitted for IRB approval via Boise State University Office of Research Compliance? YES ____ NO ____
 - a. If yes, has the study been granted approval? YES ____ NO ____

Section 2

PROJECT DESCRIPTION: (include hypotheses)

RESEARCH METHODS: (Be as specific as possible — for example, indicate how motion capture data will be processed and what outcome variables are required.)

EQUIPMENT REQUIREMENTS: (Be as specific as possible—indicate if you will need training on any of the equipment needed.)

PERSONNEL REQUIREMENTS:

Will you need assistance from COBR personnel to complete the project?

Yes No

If yes, please explain the type of assistance that is required.

Will non-COBR personnel be involved in the conduct of the project?

Yes No

If yes, please indicate who, outside of COBR, will be involved and describe their roles and responsibilities on the project.

MERITS OF THE STUDY:

For scientific research projects, will it add significantly to the body of knowledge on that topic? If so, indicate the potential for presentations/publications.

For commercial research projects, what potential markets will be reached/patents will be filed?

IS THIS A FUNDED STUDY? Yes No

If yes, please indicate funding source(s). If not, please indicate any costs that may be incurred by COBR (hardware, software, supplies, etc.).

For Internal Use Only:

Meeting Date: _____

Attendees: _____

Yea: _____

Nea: _____

COBR Approval? _____

Signature: _____

Disclaimer: Though the goal of COBR is to be as inclusive as possible and foster scientific research, some projects may fall outside of the scope or capacity of what we are currently able to accommodate. As such, COBR retains the right to refuse acceptance of proposals at our discretion.

What happens if my study is accepted?

If your study is accepted there are several steps that must be taken due to COBR's affiliation with Boise State University and internal standards and procedures.

If approval from Boise State's Internal Review Board (IRB) has not yet been obtained, documentation to this end must be started. For information on how to begin this process please see:

<http://research.boisestate.edu/compliance/institutional-review-board-irb-home/protocol-application-process/>

Research Staff for all studies must be CITI certified according to Boise State guidelines; COBR requires that all individuals who will be working with human subjects in the lab are certified as well. Once completed, a copy of the certificate issued should be sent to COBR. Information on this process can be found here:

<http://research.boisestate.edu/compliance/citi-training/>

If individuals not currently employed by COBR will be performing data collections, they must first be approved as capable by the Biomechanics Lab Manager/Research Associate and then complete the appropriate training modules. See said manager for details.

Once IRB documentation is completed and training certificates are on file, research may begin.