**Principal Investigator:**

**Study Title:**

*The IRB Review of Genetics Research form must be completed and attached to your IRB application, when “Yes” is answered to question 4.6 in Section 4. Methods.*

**Research involving genetic testing conducted by Syracuse University investigators falls under University purview and guidelines. However, genetic testing that involves medical conditions and diagnoses will be referred to the SUNY IRB for review and approval.**

1. **Describe what qualifications, relevant coursework, past experience, or training the researcher(s) has to justify his/her genetics research capabilities.**

1. **Provide a description of the condition/s of interest for which genetic tests will be performed.**

1. **Describe the source from which you plan obtain the genetic material from participants (blood, saliva, etc.)**

1. **Describe the general methods you will employ to conduct the genetic analyses.**

1. **Describe the method by which you will link participants to the genetic samples (i.e. by coding) or if you plan to remove all identifiers with no code or link to participant identities, describe this.**

1. **Describe how you plan to share the results of genetic testing with participants (or if you don’t plan to share results, provide a rationale for why you don’t plan to).**

1. **Describe to whom (the person, categories of persons or organizations) genetic test results will be disclosed and for what purpose.**

1. **Describe your plans to store genetic samples (where, for what duration, for what purpose and who will have access to the samples).**

1. **Describe how participants can withdraw their consent for sample storage and use. If samples cannot be linked to participants, then this is not an option.**

1. **Describe your plan and method to contact participants for future genetic testing on the samples if applicable.** *Include a permission to re-contact consent document.*

1. **Describe your plan for future genetic testing (i.e. the type of conditions for which you may test in the future). If not yet known, state “unknown”.**

1. **Describe your plans to discard samples when all of the genetic testing for which informed consent has been granted is complete.**