

CIP® Examination Work Experience Verification Supplemental Form

This form is to be completely filled out by the applicant,
and be included with their CIP Certification Exam Application and CV/resumé.

Candidate Name _____

Job Title _____

Organization _____

Start Date _____ End Date _____

Position Type Full-Time Part-Time *Percentage of effort dedicated to
HRPP/IRB administration duties* _____

Please check the HRPP/IRB administration-related duties for which you are responsible:

- Serving as a regulatory/technical resource during IRB meetings
- Supporting IRB meetings
- Preparing, reviewing, and maintaining IRB correspondence and documentation
- Providing required ancillary services to the IRB such as conditions of approval, reconciliations, and tracking consent form changes
- Managing and/or supervising the office that provides support for the operation of the IRB
- Developing and implementing IRB policies and procedures
- Performing IRB directed reviews such as exemption determinations and expedited reviews
- Ongoing training of, and serving as a resource to staff, investigators, and IRB members on issues pertinent to the protection of human subjects
- Performing oversight activities of IRBs for or on behalf of a Common Rule agency
- Other HRPP/IRB administration-related duties (describe below)

Please briefly describe any other responsibilities relevant to your HRPP/IRB administration-related role that are not listed in the above checklist.

I certify that I meet eligibility requirements for certification as a Certified IRB Professional, as outlined in the CIP Handbook. My HRPP experience has been substantial and ongoing, as described in the CIP Handbook. I have not had any disciplinary action taken against my professional license or certification which I currently hold or have held in the past. I have read and agree to abide by the Code of Ethics, as outlined in the CIP Handbook. All information provided in support of this application is current, accurate and complete

Candidate Name (Print): _____

Candidate Signature: _____

Date: _____