If you believe your research should have exempt status, you must include the following in a cover letter in lieu of the informed consent form. The cover letter must be printed ON LOYOLA DEPARTMENTAL LETTERHEAD and accompany the survey or questionnaire:

1. A statement that participation is voluntary.
2. A statement that what you are doing is research and the reason for such (i.e., classroom exercise, masters thesis, etc.).
3. A statement explaining the purpose of study--what you are investigating and why.
4. A statement that the participants' responses will be kept **confidential or anonymous**; explain if a participant's name is to be reported or disclosed.
5. A statement that participants do not have to answer every question.
6. A statement that a decision not to participate or to withdraw from the study will not result in any negative consequences for the participants.
7. The names and telephone numbers of the principle investigator (PI), faculty sponsor (if PI is a student), and IRB (irb@loyola.edu, 410-617-2188). These names will serve contact sources should a participant have any questions or concerns about the research.
8. A statement that the research was reviewed by the LOYOLA UNIVERSITY MARYLAND INSTITUTIONAL REVIEW BOARD.

***EXEMPT RESEARCH COVER LETTER SAMPLE***

 *[Date]*

Dear Participant,

My name is John Doe and I am a graduate student in the Department of Psychology at Loyola University Maryland. As part of the research for my master’s thesis, I will be conducting a survey that will exam the perception of mental illness among college students from diverse backgrounds.

Participation in this study is voluntary. If you choose to participate in my project, you will be asked to complete a short survey that should take about 10 minutes to complete. It is not necessary to answer every question, and you may discontinue your participation in the project at any time. If you decide not to participate, there are no penalties and you will not lose any benefits to which you would otherwise be entitled. If you choose to participate in the study, you may withdraw from the study at any time. A decision not to participate or to withdraw from the study will not result in any negative consequences for you. If you want to withdraw from the study, please close the browser window.

If you do choose to participate in the study, your participation will be completely anonymous. Neither anyone reading the results of the survey nor I will be able to identify you. Please do not include your name or any other identifying marks on the survey form. Under this condition, you agree that any information obtained from this research may be used in any way thought best for publication or education.

If you have questions or concerns about your participation in this study, you should first contact the *principal investigator or faculty sponsor at [email, phone number]*. In addition, you may contact Loyola’s Institutional Review Board (IRB) if you have any questions about your rights as a participant at 410-617-2188 or irb@loyola.edu

If you choose to participate in this study by clicking on the survey link you are verifying that you are voluntarily agreeing to participate and that you are 18 years or older. Please click on the link below to begin taking the survey. *(Let them know next steps if they want to participate.)*

Thank you for your time and your consideration.

Sincerely,

John Doe

Graduate Student, Loyola University Maryland

THIS PROTOCOL HAS BEEN REVIEWED AND APPROVED BY THE LOYOLA UNIVERSITY MARYLAND INSTITUTIONAL REVIEW BOARD.