



User Info

Name: \_\_\_\_\_ Onyen: \_\_\_\_\_

Affiliation:  Faculty  Student  Staff  Other: \_\_\_\_\_ PID#: \_\_\_\_\_

IRB Info

IRB Number: \_\_\_\_\_ Title: \_\_\_\_\_

IRB Data Security Classification:  Level I  Level II  Level III

Please initial next to each security measure in the column corresponding to your IRB data security classification level to signify you understand what each measure requires.

**Level I Data Security Recommendations**

- \_\_\_\_\_ Password Complexity
- \_\_\_\_\_ Secure Storage (VPN)
- \_\_\_\_\_ Antivirus
- \_\_\_\_\_ System Updates
- \_\_\_\_\_ Least Privilege

**Level II Data Security Requirements**

- \_\_\_\_\_ Password Complexity
- \_\_\_\_\_ Secure Storage (VPN)
- \_\_\_\_\_ Antivirus
- \_\_\_\_\_ System Updates
- \_\_\_\_\_ Least Privilege

**Level III Data Security Requirements**

- \_\_\_\_\_ Personal Computers may **NOT** be used

**Departing UNC Data Requirements**

Governing IRB requirements for identifiable data are still applicable if you leave UNC. In order for you to take identifiable data with you upon departure, you must either:

1. Leave the IRB project open at UNC and transfer project ownership to an eligible UNC PI to take on oversight and responsibilities
2. Work with the IRB office to transfer your project to your new institution/organization

Taking completely de-identified data is permitted, and ideal, without any IRB approval.

Please initial to acknowledge you understand the "Departing UNC Data Requirements" \_\_\_\_\_

Signatures

*By signing below, you certify that you understand what is required by IRB regarding data security and agree to comply with all required security measures. In addition, you agree to inform SOE ITS of any potential data breaches of IRB research data (e.g. loss of computer, virus, etc.) as soon as you are made aware.*

User's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Faculty Advisor Name (If Applicable): \_\_\_\_\_

*By signing below, you certify that as the faculty advisor on this IRB project you are ultimately responsible for data security and ensuring your students comply with all above.*

Faculty Advisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_