

Request for Waiver of Consent_template

Date:

Mark Vogel, PhD, Chair
Genesys Institutional Review Board
GRMC#

Dear Dr. Vogel,

This letter is to request a waiver of consent for the study entitled, [\[INSERT STUDY TITLE\]](#). The request for a Waiver of Consent under the Common Rule is based on the following circumstances regarding this study: [Select only what applies to the study](#)

- [The study involves no more than minimal risk](#): This study is [\[DESCRIBE THE ASPECTS OF THE STUDY THAT MEET CRITERIA FOR MINIMAL RISK TO THE PATIENT \(to patient health, safety, and/or patient privacy\)\]](#).
- [The study will not adversely affect the rights and welfare of patients](#): This study [\[DESCRIBE WHY THE RESEARCH PROCESSES WILL NOT HARM PATIENT RIGHTS OR EFFECT PATIENT WELFARE\]](#).
- [This research could not practicably be carried out without the waiver of consent](#): [\[DESCRIBE WHY CONSENTING PATIENTS WOULD BE IMPRACTICABLE OR CAUSE GREATER RISK THAN BENEFIT.\]](#)
- [Access to research information](#): Subjects will not be provided with any information on this study after participation. Information will be disseminated in aggregate form only. [\[CHANGE THIS STANDARD STATEMENT IF IT DOES NOT APPLY TO YOUR STUDY\]](#)

I believe the study meets criteria for a waiver of consent. Based on this information, please consider approval of waiving consent.

Thank you for your consideration.

NAME
TITLE
ADDRESS