**Instructions for a Payment Process Exception Request**

*This form is used to request an exception from the University of Utah Accounts Payable process for paying human research participants* <http://fbs.admin.utah.edu/download/AP/ResearchPartPayments.pdf>*.*

*An exception may only be granted by the IRB for studies that require total anonymity when disclosure of the participants’ identities outside the research could reasonably place the participants at risk of criminal or civil liability or be damaging to the participants’ financial standing, employability, or reputation.*

*The IRB approves all exceptions via the ERICA system as part of the standard review process for new studies, amendments, or continuing reviews. When requesting an exception from the IRB, the study team must also describe the request for exception as a privacy protection in the main application.*

***DIRECTIONS FOR USE OF THIS FORM:***

* ***Do not adjust the bottom margin or use the footer.*** *Do not delete the watermark fields in the footer.*
* *Instructions and text in red font should be replaced or deleted.*
* *Once completed, attach this form to the ERICA application for approval.*

**Payment Process Exception Request**

|  |  |
| --- | --- |
| **PI Name:** | <<insert PI’s full name>> |
| **IRB Number:** | <<insert IRB number>> |
| **Study Title:** | <<insert full study title>> |

According to the investigator, this study qualifies for a payment process exception because the study requires total anonymity when disclosure of the participants’ identities outside the research could reasonably place the participants at risk of criminal or civil liability or be damaging to the participants’ financial standing, employability, or reputation. Justification for this request is as follows:

|  |
| --- |
| <<Describe the reason(s) that total anonymity for participants is needed in this study>> |

* The investigator confirms that participants will be paid no more than $600 per calendar year.
* A copy of this approved request will be submitted to the Clinical Research Support Office (CRSO) when requesting a waiver for using the Participant Payments system.
* A copy of this approved request will be included with each payment request made through Accounts Payable.

Approval of this Exception Request by the IRB is indicated by the IRB stamp and approval date in the footer.