



When engaging in Humans Subjects Research with external entities, a letter of agreement from the entity is required. This document provides guidance for these situations. Letters must be on the **official organization or agency letterhead** and submitted as an attachment.

Definitions

Letter of Collaboration: When an organization provides goods, services, or products for the researcher to facilitate the conduct of the research. This is often used when conducting funded research and one or more members from the organization is either engaged in the research or receives payment for the research.

Letter of Cooperation: When an organization agrees to work with a researcher to meet the aims of a research project. An example would be a local clinic agrees to circulate a recruitment flyer and tell their patients about a research study. Organizational affiliates are not engaged in the research.

Letter of Permission: An organization allows the researcher access to their population. Organizational affiliates are not engaged in the research.

External

For entities outside of FAU, a letter from *each* organization or agency cooperating in FAU research is necessary to ensure that relevant information regarding the proposed research has been shared with and agreed to by the appropriate agency/institutional authority. The institutional authority is someone who has signatory authority for the organization (e.g., a school principal, agency director, district authority, etc.). The letter needs to incorporate details as to the role, expectations, awareness and responsibilities of the relevant parties, and then be signed to indicate agreement by the appropriate institutional authority. An e-mail is acceptable in lieu of a formal letter if it contains the same required details as the letter and comes from a valid and verifiable email address.

Internal

For entities within FAU, where the collaborator *will not* be listed as a co-investigator of the research, a letter of cooperation is also often required. For instance, if you wish to gain access to human subjects, obtain identifiable private information, or use space that involves a specific Department or Office within FAU, seek a letter of cooperation. This letter should also incorporate details as to the role, expectations, awareness and responsibilities of the relevant parties, and then be signed to indicate agreement by the appropriate institutional authority. An e-mail is acceptable in lieu of a formal letter if it has the same required details as the letter and comes from a valid and verifiable email address.

Template

The template below has suggested language as to what should be included. Please note that you should adapt the language to the nature of the study you are conducting, the involvement of your particular collaborator, and whether it is an external or internal collaboration.

ORGANIZATIONAL LETTERHEAD

{Community Research Partner/Institution Name}
{Community Research Partner/Institution Contact Information}

{Date}

Dear FAU IRB,

Based on my review of the proposed research by {insert researcher's name, and faculty supervisor if applicable}, I give permission for them to conduct the study entitled {insert study title} within the {insert name of school/community research location}. As part of this study, I authorize the researcher(s) to {insert general descriptions of researcher's activities at partner site, e.g., specific recruitment, data collection, and results dissemination activities}. Individuals' participation will be voluntary and at their own discretion.

We understand that our organization's responsibilities include: {insert descriptions of the following, as applicable: personnel, rooms, resources, and supervision that the partner will provide}. We reserve the right to withdraw from the study at any time if our circumstances change.

We understand that the research will include {insert brief description of the interaction with human participants at the partner site, e.g., "typical classroom instruction, pre-tests, and post-tests."}.

This authorization covers the time period of {____ to _____}.

I confirm that I am authorized to approve research in this setting.

I understand that the data collected will remain entirely confidential and may not be provided to anyone outside of the research team without permission from the FAU IRB.

Sincerely,

{Authorization Official signature}

{Contact Information}