United States Army Center for Initial Military Training (USACIMT)
Project Feasibility Review Form

Purpose: Per *USACIMT Memorandum for Record – Recruitment of Initial Military Training (IMT) Soldiers as Human Research Volunteers for Research Studies*, prior to conducting any qualitative or quantitative research, study, program evaluation, data collection, assessment, survey, focus group, interview, or other similar activities involving IMT personnel (defined as BCT, AIT and OSUT Trainees, including Trainees in "hold-over/hold-under" and reception status, Basic Officer Leadership Course (BOLC) candidates, Drill Sergeants, cadre, and Company, Battalion, and Brigade Commanders, First Sergeants, and Sergeants Major/Command Sergeants Major), the Principal Investigator (or project lead) must obtain approval from the Commander, USACIMT. USACIMT does not conduct a scientific review, but rather, a review to assess the safety, appropriateness, and feasibility of conducting research in IMT (or in the IMT location/timeframe specified). Because a study can impact the training Program of Instruction (POI), basic training resources, time, or instruction of Soldiers, we are required to review the study to ensure that projects are vetted and evenly spaced across installations and time (to ensure projects do not overlap or adversely impact the training mission).

To expedite this review process, please provide the following information in lay (non-scientific) terms. Please return this completed form, a copy of your protocol, a copy of your Institutional Review Board (IRB) approval notification or regulatory determination[1], a letter of support from the commander of the unit with which you intend to conduct the study, and a copy of your human subjects protection training certificate to Cindy Myers, Human Protections Administrator (HPA), USACIMT, cynthia.m.myers15.civ@army.mil

SECTION 1: INVESTIGATOR INFORMATION *To be completed by the Investigator*
Date Form Completed:
Investigator Name:
Other POC:
Organization/Department:
Phone:
Email Address:

[1] If you have not yet received IRB approval or regulatory determination, CIMT approval is withheld until this documentation is available. If IRB approval or regulatory determination is not granted within four months of submitting your proposal to CIMT, your project is withdrawn, and you must reapply. If your activity is exempt from HSR regulatory requirements/IRB oversight, you must still obtain a research determination. If you are from an organization with a DoD Assurance, USACIMT may accept their determination.

SECTION 2: ACTIVITY INFORMATION

To be completed by the Investigator

Instructions: Provide your responses in the shaded rows and be descriptive. Complete and accurate submissions expedite the determination process and prevent unnecessary delays.

1. Title of the proposed activity:

2. Provide a thorough description of the activity:

a. WHO will be asked to participate (e.g., Basic Combat Training/Trainees, Advanced Individual Training/Students, One Station Unit Training/Trainees, Drill Sergeants, Other IMT Cadre) and how many participants are needed?

A letter of support from the Commander of the unit who is being asked to support your activity is required in order to recruit from this pool of participants?

b. WHAT will be asked of participants (e.g., time commitment, inclusion/exclusion criteria, type of data and/or specimens to be collected, if data and/or specimens are identifiable)?

c. **WHEN** will the activity occur (e.g., in the morning, in the evening, during non-duty hours, end of cycle) and what is the timeframe from start to end (e.g., 1 Jul 2023 to 1 Jul 2024)?

d. **WHERE** will the activity occur (e.g., which installation(s), which unit(s), physical location)?

e. **HOW** will the activity occur (e.g., describe data and/or specimen collection methods, instrumentation, products, procedures, interactions)?

f.	**WHY** will the activity occur (i.e., purpose, intent, Army relevance) and WHAT will be done with the results (e.g., reports/presentations/publication, to whom)?

g. WHO will have access to data and/or specimens? Will access include identifiable data or specimens? How will privacy and confidentiality be maintained?

Anonymized is data in which a name or other identifiers have been removed. *Anonymous* means that no one can identify the subject by name. *Coded* means a living individual's identifiable information (e.g., name, social security number) that has been replaced by a code (e.g., a number, letter or combination thereof) and for which there is a key to link the code to the identifiable information of the individual. Coded data are considered identifiable in accordance with (IAW) the Common Rule. *Confidentiality* is personal information that generally cannot be divulged without the individual's consent. *Privacy* is generally any action for which you have the reasonable expectation of privacy (e.g., medical exam, use of a restaurant bathroom).

h. WHAT are the potential risks to participants (e.g., physical, psychological, confidentiality, privacy, etc.)? How will these risks be mitigated? Describe how safety will be considered.

i. LIST all instruments (e.g., data collection tools, product brochures) to be used for this activity (if applicable) and include copies with this submission.

j. WILL any portion of this activity contain a survey, questionnaire, or other collections of information from Army personnel?

If yes, you will require survey approval and licensing by the Army's survey licensing authority for internal Army surveys, the Records Management and Declassification Agency (RMDA). This is a separate review from CIMT review.

k. WILL this activity be used as a basis for completion of an academic degree at your own expense? If so, for whom (name), for what degree (type of degree), and which institution (name of university).

Please indicate whether or not you are part of the Army's Long-Term Health Education and Training Program (LTHET).

If yes, an additional review will be completed by the HPA in order to ensure compliance with regulations and policies applicable to Department of Defense (DoD)-supported and assisted human subjects research (HSR) activities.

l. DESCRIBE any other important considerations not previously mentioned.

m.	In consideration of the above, and in lay terms (very basic, non-scientific), provide a brief description of your project. Also indicate how USACIMT and/or the United States Army will benefit from your proposed research, and whether or not it could offer new and potentially actionable insight.

SECTION 3: RESEARCH TEAM INFORMATION

To be completed by the Investigator

Instructions: Provide the following information for each member of the research team who will be present, on an IMT facility, during the execution of this project, whether or not they will have direct contact with IMT personnel.

Name	Job Title and Organization	Email and Phone Number	Role in Project

SECTION 4: POPULATION AND SAMPLE SIZE INFORMATION

To be completed by the Investigator

Instructions: Provide the population(s) from which your sample will be drawn. Next to each group, indicate the number of Soldiers you are requesting to recruit.

The following locations and groups fall under CIMT's purview;

Fort Benning - AIT, OSUT, BOLC
Fort Eustis - AIT
DLI - AIT
Fort Gordon - AIT, BOLC
Fort Huachuca - AIT, BOLC
Fort Jackson – AIT, BCT
Fort Sam Houston - AIT
Fort Lee - AIT
Fort Leonard Wood - AIT, BCT, OSUT, BOLC
Fort Rucker - AIT, BOLC
Fort Sill - BCT, AIT, BOLC

BCT Trainees:	OSUT Trainees:	AIT Students:
Drill Sergeants:	BOLC Candidates:	Company Commanders:
Company First Sergeants:	Other (specify) IMT Personnel:	
Total Sample Requested (n):		

SECTION 5: POPULATION AND SAMPLE SIZE CHARACTERISTICS

To be completed by the Investigator

Instructions: Provide details of any specific characteristics in your study population (e.g., percent male/female, age, fitness level, injured/non-injured status, MOS, Component, etc.).

SECTION 6: Proposed Data Collection Plan & Timeline

To be completed by the Investigator

Instructions: Provide a step-by-step format of how you intend to execute your data collection. Also, indicate if there are any special requirements for your data collection (e.g., blood draw must be done on an empty stomach).

Week of Training (Reception week, mid BCT, Graduation week, etc.)	Time of Day (morning, evening, anytime, etc.)	Procedure (survey, focus group, blood draw, etc.)	Time-to-Complete (from start to finish, how long will it take to execute this step)
EXAMPLES ONLY: *Step 1. Reception week of BCT*	***EXAMPLES ONLY:*** *Morning, before breakfast*	***EXAMPLES ONLY:*** *Fasting blood-draw and questionnaire*	***EXAMPLES ONLY:*** *90 minutes for complete sample of 100 Trainees*
Step 2. BCT, mid-cycle	*Any time of day*	*Mid-cycle questionnaire and body fat measurements*	*60 minutes for complete sample of 100 Trainees*

SECTION 7: Resources *To be completed by the Investigator* Instructions: Provide what additional IMT resources will be needed to execute the activity (e.g., classroom space to conduct the informed consent process, outdoor space to conduct physical assessments, cadre presence, etc.)?

Investigator: Digitally sign (do not lock form) and submit with supporting documents (e.g., a copy of your protocol, a copy of your Institutional Review Board (IRB) approval notification or regulatory determination, a letter of support from the commander of the unit with which you intend to conduct the study, a copy of your human subjects protection training certificate, copy of the survey/questionnaire, recruitment materials, information sheet, etc.) to the USACIMT HPA.

Digitally sign inside the box

SECTION 8: Addendum
(for additional space/and/or other pertinent information not included above)
To be completed by the Investigator