



Approximately how many subjects you anticipate enrolling in this study (at all research locations/sites)?

Note: it is best to include an approximate range (expected min and max), rather than a specific number of subjects.

Answer: 50-100

Inclusion Criteria - What characteristics (e.g., age, conditions, diagnosis, etc.) must individuals have in order to be included as a research subject? Answer for each subject group, if there are multiple groups.

If not applicable, write N/A; however a common inclusion criterion is that subjects are over the age of 18.

Answer:

College students between the ages of 18 and 25 and who are enrolled in at least 12 credit hours.

Please provide a brief description of the research background and study design:

Exclusion Criteria - What characteristics would exclude subjects from this research who are otherwise eligible (i.e., who meet inclusion criteria)? Answer for each subject group, if there are multiple groups.

If not applicable, write N/A.

Answer:

Background

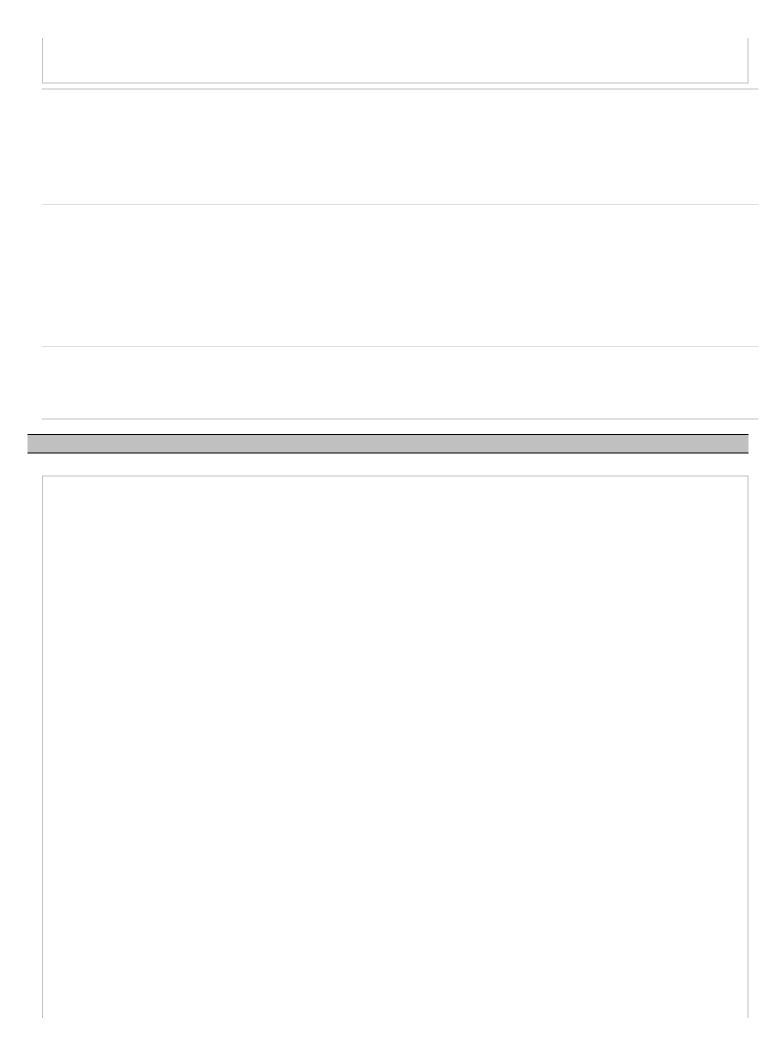
N/A

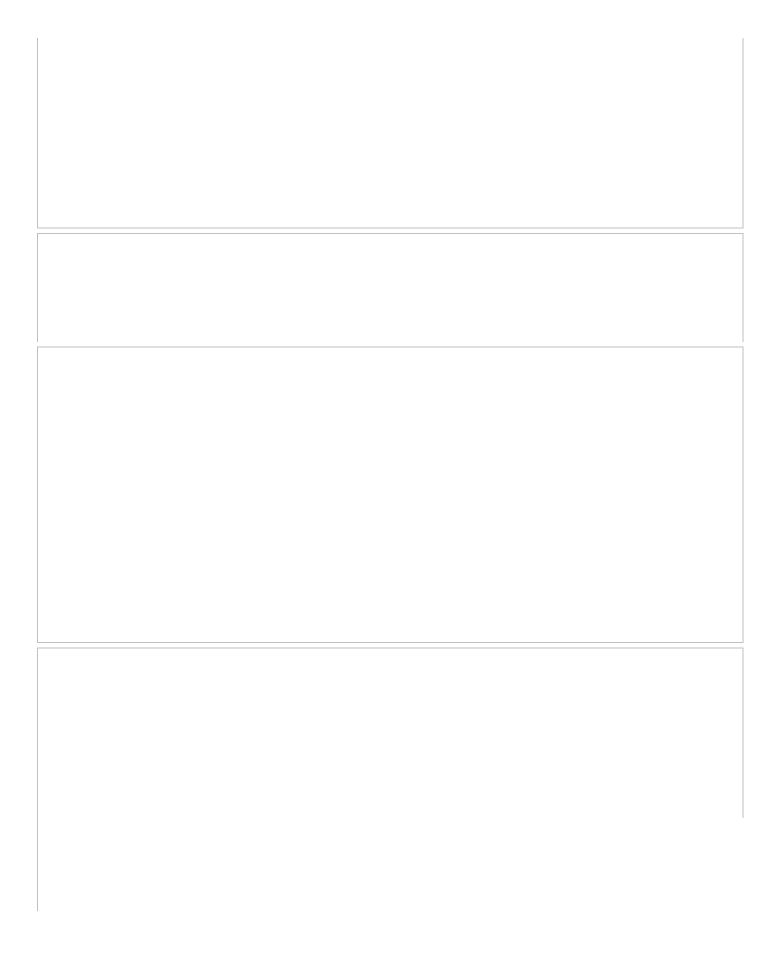
	1 1 /	
Answer:		mee tase o

Throughout the years, research have significant impact on the quality of life worldwide.

According to a survey conducted by the American Psychological Association, 40% of adults report that they lay awake at night because of stations of the station of the stat

Answer:	Yes No	
Answer:	Only being collected electronically (e.g., SurveyMonkey, Qualtrics, etc.). Only being collected non-electronically (e.g., by paper, handwritten methods). Being collected by a combination of electronic and non-electronic methods.	
Answer:	Yes No	
Answer:	Yes No	
Answer:	Yes	
	No No	
Answer:	Internal	
	External (outside agency or organization) Other (please explain)	
Answer: Đ		
		-





Answer:	1. Advertisements (e.g., newspaper, televisiorsio

device.)

SurveyMonkey:

https://www.surveymonkey.com/r/XXXXXXXX

Please upload a copy of each survey/questionnaire/psychometric test you intend to use:

(Be sure to include all directions to subjects, each survey item, and any response scales. Please upload in MS Word format if possible. If submitting revised documents, please submit a version showing tracked changes in MS Word (if possible) AND a clean copy with all changes accepted)

Answer:



Study Materials (Sample).docx 08/15/2023 (Study Instruments (e.g., Surveys, Tests))

Data Collection, Protection, and Records Retention

Will subject identifiers be recorded during the research process?

(names; addresses; phone numbers; email addresses; birth dates, locator information; patient, hospital, laboratory or claim numbers; Social Security numbers; IP addresses; etc.)

Answer:

Yes - direct identifiers will be recorded (identifiers are recorded along with the data)

Yes - indirect identifiers will be recorded (identifiers or potential identifiers are recorded in such a way that they can be linked to subject data - e.g., coding documents, contact information collected separately, time stamps that link data together, etc.)

No - neither direct nor indirect identifiers will be recorded (i.e., the data will be collected anonymously)

Answer:

Names

Addresses

Phone numbers

Email addresses

Birth dates

IP addresses

Social Security Numbers

Names of employers, types of employers, job titles

Locator information (e.g., town, city, state, etc.)

Patient, hospital, laboratory, or claim numbers

Time stamps that can be linked to identifiable information (e.g., participant sign-up info.,

automatic time stamps on survey collection software such as SurveyMonkey)

Other

Answer: Yes

No

Consent is documented by subject signature (written or electronic) but will be collected and stored separately from data so that subject name is not linked to subject data

No one other than the researchers will have access to identifying consent documents

Other

Please de

Answer: Study PI

Study Co-Investigator(s) affiliated with Daemen University

Study Co-Investigator(s) otherwise affiliated

Other

Answer:	Yes No0			

Do you plan to provide debriefing information to study subjects?

Answer:

1. Yes

2. No

Modifications

Adverse Events

Adverse Event Date	Status		Signe d
		No Adverse Events Found.	

Protocol Deviations

Status	Protocol Deviations File/Comments	Submitted By
	No Protocol Deviations Found	

Reviewer Comments

Primary Reviewer: Test Account IRB Member, Review Completed, Due date 08/22/2023 5:00 PM EDT

Test

Title of Research Project:
Faculty Research Advisor:
Student Researchers:
Purpose of the Research Project:
Description of the Research Project and Procedures:

Study Duration:	
Risks:	
Benefits:	
Compensation:	
Confidentiality and Anonymity:	

(Demographics)

Please answer the following questions about yourself.

4. What is your gender? Male Female Other
5. What is your current year in school? Freshman Sophomore Junior Senior Graduate Student
6. What is your Ethnicity? Hispanic or Latino Not Hispanic or Latino Other
7. Please identify your race. Check all that apply: American Indian or Alaska Native Asian or Asian American African or African American Middle Eastern Caucasian (White) Bi-Racial/Mixed Race Other
8. What is your current major?
9. Do you play a collegiate sport? Yes No
10. If yes, are you currently in season? Yes No
11. Which sport do you participate in?
12. Are you on an athletic scholarship? Yes No
13. How many hours per week do you practice? N/A 0 1-5 6-10 11-15 16-20 20+
14. In the past month, have you experienced any of the fo

14. In the past month, have you experienced any of the following? Check all that apply:

Death of a loved one
Divorce/break up
Major illness/injury
Job loss
Pregnancy
Became engaged/got married
Parents separated or divorced
Major health issues or a family member or close friend
Change is residence
Change in school
Major change in financial state
N/A

(Stress)

The questions in this scale ask you about your feelings and thoughts during the last month. In each case, you will be asked to indicate by circling how often you felt or thought a certain way.

15. In the last month, how often have you been upset because of something that happened unexpectedly?

Never

Almost Never

Sometimes

Fairly Often

Very Often

16. In the last month, how often have you felt that you were unable to control the important things in your life?

Never

Almost Never

Sometimes

Fairly Often

Very Often

Never

Almost Never

Sometimes

Fairly Often

Very Often

18. In the last month, how often have you felt confident about your ability to handle your personal problems?

Never

Almost Never

Sometimes

Fairly Often

Very Often

19. In the last month, how often have you felt that things were going your way?

Never

Almost Never

Sometimes

Fairly Often

Very Often

20. In the last month, how often have you found that you could not cope with all the things that you had to do?
Never
Almost Never
Sometimes

Somewhat like me Not much like me Not like me at all

Very much like me Mostly like me Somewhat like me Not much like me Not like me at all

28. I have been obsessed with a certain idea or project for a short time but later lost interest.

Very much like me

Mostly like me

Somewhat like me

Not much like me

Not like me at all

29. I am a hard worker.

Very much like me

Mostly like me

Somewhat like me

Not much like me

Not like me at all

30. I often set a goal but later choose to pursue a different one.

Very much like me

Mostly like me

Somewhat like me

Not much like me

Not like me at all

31. I have difficulty maintaining my focus on projects that take more than a few months to complete.

Very much like me

Mostly like me

Somewhat like me

Not much like me

Not like me at all

32. I finish whatever I begin.

Very much like me

Mostly like me

Somewhat like me

Not much like me

Not like me at all

33. I am diligent.

Very much like me

Mostly like me

Somewhat like me

Not much like me

Not like me at all

(Self-Esteem)

Directions: Indicate the extent to which you agree or disagree with the following items using the scale provided.

34. I feel that I am a person of worth, at least on an equal basis with others. Strongly Agree
Agree
Disagree
Strongly Disagree

35. I feel that I have a number of good qualities. Strongly Agree Agree Disagree Strongly Disagree

Disagree Strongly Disagree
43. At times I think I am no good at all. Strongly Agree Agree Disagree Strongly Disagree
(Physical Activity)
The following questions ask about the time you spend doing different types of physical activity in a typical week. Please answer these questions even if you do not consider yourself to be a physically active person. First think about the time you spend doing work. Think of work as things you have to do such as paid or unpaid work, studying/training, or household chores. In answering -intensity
effort and cause a large increase in breathing or heart rate, - actives that require moderate physical effort and cause small increases in breathing or heart rate.
44. Does your work involve vigorous-intensity activity that causes large increases in breathing or heart rate (carrying or lifting heavy load, digging or construction work) for at least 10 minutes continuously? Yes No
45. In a typical week, on how many days do you do vigorous intensity activities as part of your work? days 1-2 3-4 5-6 7
46. How much time do you spend doing vigorous intensity activities at work on a typical day? hoursminutes
47. Does your work involve moderate-intensity activity, that causes small increases in breathing or heart rate such as brisk walking (or carrying light loads) or at least 10 minutes continuously? Yes No
48. In a typical week, on how many days do you do moderate intensity activities as part of your work? 1-2 3-4 5-6 7
49. How much time do you spend doing moderate intensity activities at work on a typical day? hoursminutes

days?	_hours	_minutes			
					home, getting to and from places, or with , traveling in a car, bus, train, reading,
, ,	or watching t	elevision, but does	not include t	ime s	spent sleeping. How much time do you
spend sitting	or reclining or	n a typical day?	hours		_minutes