

The George Washington University Translator Form

For human subject research involving participants who do not speak English proficiently, documents that you will give to or share with research participants should be translated (e.g. consent documents, surveys, diaries). Translation requirements are based on the risk associated with the research.

- 1) For **Minimal Risk Research** (exempt & expedited review) submit:
 - a) The English version of each document
 - b) The translation for each document
 - c) This form with Sections I and II completed.
- 2) For **Greater Than Minimal Risk Research & Randomized Clinical Trials** submit:
 - a) The English version of each document
 - b) The translation for each document
 - c) The back translation for each document (translation back to English)
 - d) This form with Sections I, II, and III completed.

Note: Do not have document(s) translated until the GW IRB approves the document. Translated documents and this translator form should be submitted as a modification to the approved study prior to enrollment of participants and use of the translated versions of the materials in the research.

If you have questions, call the Office of Human Research at (202) 994-2715 or email ohrirb@gwu.edu.

I. Principal Investigator and Study Information

PI Name:

IRB#:

Study Title:

PI Signature: _____

Date: _____

II. Translator Information

Name of Translator:

Non-English language for translation:

Background in Language:

Native Speaker

Hold a degree/certification in language

Other, please specify:

Please list all of the translated documents.

Translator Attestation Statement

I certify that I am fluent in the above language(s), and that the attached document is a true and accurate translation of the original document to the best of my knowledge and abilities.

Signature: _____

Date: _____

III. Only Applicable to Greater Than Minimal Risk Research & Randomized Clinical Trials

The back translator cannot be the same person who provided the original translation and must be unaffiliated with the study.

Name of Back-Translator:

Non-English language for back translation:

Background in Language:

Native Speaker

Hold a degree / certification in language

Other, please specify:

Please list all of the translated documents.

Back-Translator Attestation Statement

I certify that I am fluent in the above language(s), and that the attached document is a true and accurate translation of the original document to the best of my knowledge and abilities.

Signature: _____

Date: _____