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| **When to use this form:** If research is conducted in a language other than English, submit this form along **with** the translated materials. The Translation Certificated Form is required to verify that the translations are accurate and those who translate the material have the necessary qualifications, skills or experience for serving in this role. This form can be submitted at the time of:* Initial Kuali Protocol submission; or
* Amending already approved Kuali Protocol.
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| **Please note the following:*** + - * The Marquette University IRB must review and approval **all** study documents prior to use. This includes documents in a language other than English.
			* Even if the study involving only non-English speaking subjects, for the IRB to adequately review/approve the study, English copies must be submitted.
			* To avoid multiple translations of the same document due to IRB revisions, MU IRB recommends holding off on submitting non-English version(s) until after IRB has reviewed and approved the English versions.
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| **To be completed by PI** |
| 1. **Principal Investigator:**
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| 1. **Protocol Title:**
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| 1. **Kuali IRB# (if known):**
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| Conducting research with participants who speak languages other than English requires meticulous attention to translation accuracy. Inaccurate translations can lead to misunderstanding, biased data, and ethical concerns. Therefore, the following best practices should be used:* Translations were performed by a qualified translator fluent in both the source and target languages.
* Translator has expertise in the relevant subject area of the research study.
* Translations were reviewed by a separate individual fluent in both languages who did not participate in the initial translation.
* Any discrepancies between the source and target documents were identified and resolved in a consistent and documented manner.
* Back-translation performed by a separate individual for some or all of the documents.
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| **To be completed by Translator** |
| 1. **Translator’s Name:**
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| 1. **Translator’s E-mail Address:**
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| 1. **Translator’ Qualifications:**
 |  |
| 1. **Language of Translation:**
 |  |
| 1. **List document(s) translated:**
 |  |
| 1. **Date(s) of Translation(s):**
 |  |
| **The translator declares that they are fluent in and understand the English language and the language of translation. The non-English documents for this study are a true and accurate translation of the English documents.**By signing/printing below, I, the translator, agree with this statement\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Translator Signature Date |