

Request for PSYC101 Research Participant Hours

Please submit a hard copy of the completed form by Friday of the second week of the semester to Psychology Research Committee Chair.

Semester: Year _____ Fall Spring Summer

PI of the Project: _____

I (PI) have carefully read PSYC101 Research Participant Procedures and agree to follow them.

E-mail address of the PI:
(only if the PI is not a faculty) _____

Faculty sponsor:
(only if the PI is not a faculty) _____

Estimated Hours Needed:
Number of Participants: _____

Amount of Time per Participants: _____

Total Participant Hours (multiply the above two): _____

Project HSR #: _____

If your project has been approved by the IRB, please kindly attach a copy of the official approval letter to facilitate the process.

If you don't have an HSR # yet, state the approximate date you plan to submit an IRB protocol application here. _____

Project Title: _____

The use of participant pool hours is related to (check one answer):

_____ Faculty research project

_____ M.A. thesis

_____ M.S. thesis

_____ Classroom research project (for instructional purposes only): Course # _____

_____ Undergraduate student research project

_____ Other (specify) _____

Signature of the Faculty

Date