Student as Principal Investigator Form

This project has been reviewed to determine that the scope, anticipated risks and benefits, and methodology are appropriate for this research by:

[ ] Thesis/dissertation committee

 [ ] Other: Please specify

The student researcher is qualified to conduct independent research based on the following credentials:

[ ] Has completed a graduate research method course

[ ] Has experience as an independent or closely supervised research assistant

[ ] Complete CITI training or similar training

[ ] Other: Please specify

Faculty Sponsor’s Assurance

By my signature as sponsor on this research application, I certify that I have thoroughly reviewed this IRB application and agree that the student or guest investigator is knowledgeable about the regulations and policies governing research with human subjects and has sufficient training and experience to conduct this particular study in accordance with the research protocol. I further agree to monitor the research study to ensure research protocol is followed.

*Must be completed by the advisor:*

Advisor Name: Advisor name

Date of Approved: Date of Advisors approval of IRB application.

CITI Training Date (or other appropriate training): Advisor CITI completion date

 Please select date

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 Faculty Sponsor Date