

This should be on the external organization/locations letterhead

[DATE]

SIUE Graduate School
Office of Research and Compliance
ATTN: IRB Administrator
1 Hairpin Drive
Campus Box 1046
Edwardsville, IL 62026

Email: researchcompliance@siue.edu

Dear SIUE IRB,

I am writing on behalf of [Name of organization] to share my support of the proposed study titled, “[Title of your Project as it appears on your Quali Protocol Submission], submitted by [Your Name].

[Describe the project, its purpose, and procedures that involve the organization].

I fully support the proposed project that would take place [location]. Upon SIUE IRB approval, I am fully committed to assisting [your name] in any way appropriate.

Sincerely,

[Signature of Person with authority to give you access to this location/population]

[Name of Person signing above]

[Title of person Signing above – this should be clear by their title how they have authority to give you access to this location/population]

Contact information (work phone number and email)