

Faculty Advisor signs. (Please read, print, sign, scan, and upload with your student's protocol submission)

Certification: Student Research Submitted by Faculty Advisor

Your signature below indicates that, to the best of your knowledge, your student has read and understands the policies and procedures governing research with human subjects and that they fully intend to comply with these policies and procedures. I further acknowledge my student is responsible for reporting to the IRB any proposed changes to the approved protocol prior to making these changes.

Faculty Advisor

Signature

Date
