

Graduate School

Southern University and A&M College
Baton Rouge, Louisiana

Registration/Approval of Final Project/Report Proposal **(Form Must Be Typed)**

Applicant Information						
Banner ID#:					Date:	
Applicant Name:						
	<i>Last</i>			<i>First</i>		<i>M.I.</i>
Degree:						
<input type="checkbox"/>	M.A.	<input type="checkbox"/>	M.S.	<input type="checkbox"/>	MBA	
<input type="checkbox"/>	M.Ed.	<input type="checkbox"/>	Ph.D.	<input type="checkbox"/>	DNP	
Field of Study:				Expected Date of Graduation:		
Department:				College:		
TITLE OF FINAL PROJECT/REPORT (Required):						

STATEMENT FOR THE SU-BR GRADUATE SCHOOL – IRB REGISTRATION FORM

Approval by the IRB Chair to conduct the study **MUST** be obtained prior to submitting this form to the Graduate School and collecting data.

Directions:

With respect to the purpose of the study, put an “**X**” in the appropriate blanks below. If “Yes” is indicated for any question, contact **Dr. Reginald Rackley, Department of Psychology, Southern University- Baton Rouge, LA 70813-1241**, (Voice: (225) 771-2290; Facsimile – (225) 771-2082; E-Mail: reginald_rackley@subr.edu to obtain information regarding the procedure for obtaining review and approval of the study by the appropriate SU-BR research-risk committee. Note that obtaining such approval, depending on the nature of the study, may involve several days or weeks.

- YES NO Does this study involve the use of human subjects or the collection of private information from a database or files?
- YES NO Does this study involve the use of animals?
- YES NO Does this study involve the use of biohazards?
- YES NO Does this study involve the use of recombinant DNA?

CHAIR, IRB Research Risk Committee (if applicable)

Date

Student's Signature

Date

We, the undersigned, hereby certify that we have reviewed and approved the topic/title and proposal submitted by the above-named student. (PLEASE TYPE IN ALL NAMES).

NAME :
Faculty Advisor

Date

NAME :
Department Chairperson/Program

Date

NAME :
College/School Dean

Date

NAME: Dr. Doze Y. Butler
INTERIM DEAN, Graduate School

Date