University of Puget Sound INSTITUTIONAL REVIEW BOARD							
Application for Approval	of Rese	earch	Involving Human Subjects				
	(\mathbf{C})	01					

(Cover Sheet)

(Protocols meeting Full Board Review must be submitted two weeks prior to the date of the IRB meeting on which the review is to occur.)

Please Check One:	New Project	RenewalM	Iodification (Attach Ren	ewal/Modification Form)	
Date of Submission: _					
Protocol Title:					
				CITI training	g completed
Principal Investigator:	Typed name: Signature: Department or S Email: Telephone numb			Yes	No
Co-Investigator:	Typed Name: Signature: Email:			Yes	No
Co-Investigator:	Typed Name: Signature: Email:			Yes	No
Co-Investigator:	Typed Name: Signature: Email:			Yes	No
Source of Support (if a	ny):				
Level of Risk to Huma	n Participants:	Minimal _	Greater than m	inimal	
Number of Participants	::				
Are vulnerable populat	ions involved?* _	yesno A	Are children involved?*_	yesno	
*Normal participants a Children are minors un	-		to make independent de	cisions with full mental c	capacity.
Has this proposal beer	or will it he sub	mitted to other I	Juman Subjects Deview	Poords departmental or	mmittaac

Has this proposal been or will it be submitted to other Human Subjects Review Boards, departmental committees, or community agencies for review and approval?

> _____Yes (attach approval letters) ___No