

**La Sierra University ▲ Department of Psychology
Research Participant Pool Application**

Date:

Application for use during _____ quarter, 20_____

Experimenter(s):

Faculty sponsor:

Title of experiment:

Type of research (please check all that apply):

- | | |
|---|---|
| <input type="checkbox"/> Faculty research | <input type="checkbox"/> Other Department or School (please specify) |
| <input type="checkbox"/> Senior <u>Honors</u> Project | <input type="checkbox"/> Other University or College (please specify) |
| <input type="checkbox"/> Senior Research Project (401A) | |
| <input type="checkbox"/> Directed Research (295/495) | |

Number of participants needed this quarter: _____

Maximum length of experiment (in approximate minutes): _____

Does the research require pre-testing participants?

Best estimates of dates during which participants will be used this quarter:

NOTE: Authorization to use the department research participant pool is required each quarter.

Experimenter Signature

Phone number

Faculty Sponsor's Signature

Phone number

Enclosure Checklist:

- Copy of IRB application, if outside of LSU Psychology Department
- Copy of IRB acceptance letter or form
- Experimenter Notification Form, with the top portion filled out