

VITERBO UNIVERSITY
RESEARCHER ASSURANCE STATEMENT FOR
RESEARCH INVOLVING HUMAN PARTICIPANTS

I understand Viterbo University's policies concerning research involving the use of human subjects and agree:

1. To accept responsibility for the ethical conduct of this research project;
2. To obtain approval from the University's IRB prior to instituting any change in the research project;
3. To report to the University's IRB serious adverse reactions or unexpected effects on subjects' and
4. To submit to the IRB an End of Project Report at the completion of the research project (if not exempt).

a. _____
Researcher's printed name Department/Program

Researcher's signature Date

b. _____
Researcher's printed name Department/Program

Researcher's signature Date

c. _____
Researcher's printed name Department/Program

Researcher's signature Date

d. _____
Researcher's printed name Department/Program

Researcher's signature Date

For student research

I have approved the procedures of the research project described in the attached application. I agree to assist the student with the policies for conducting research involving human subjects.

Faculty research/instructor's advisor's printed name Department/Program

Faculty research/Instructor's advisor's signature Date

Date received by IRB: _____ Date approved by IRB: _____