

Faculty Sponsor Form

Faculty sponsor, please complete the following form and sign. Then return this to the IRB chair: IRBChair@northpark.edu

Student name (printed) _____

- I have reviewed _____'s completed application.
- I certify that I am aware of the research design and that I will provide sufficient supervision to ensure this is collected as detailed in the application.
- I will ensure the student will promptly report adverse effects to the North Park IRB in a timely manner.
- I agree to meet regularly with this student and address questions and answers as they arise.
- She/he has adequate training in research with human subjects in order to complete this project/study.
- I have an NIH or CITI training certificate file that was completed within the past three years.

Signed: _____ Date: _____
(typed name is sufficient if it comes directly from the faculty member's NPU email account).

Printed name: _____

Email: _____

Phone: _____