

## Middle Georgia State University IRB Form

Signature Page: An ***original*** of this page must be sent in hard copy to the Chair of the IRB. Applications will not be considered complete until this form has been received with all investigators signatures.

Project Title: \_\_\_\_\_

### **Faculty Supervisor:**

Signature: \_\_\_\_\_

Name: \_\_\_\_\_

Degree: \_\_\_\_\_

Title: \_\_\_\_\_

School/Dept: \_\_\_\_\_

E-mail: \_\_\_\_\_

Telephone: \_\_\_\_\_

Alt Ph#: \_\_\_\_\_