**Application for Departmental Review**

Department of Psychology

Missouri State University

Protection of Human Subjects

Application for Departmental Review

Principal Investigator (Faculty) Erin Buchanan

Project Title Qwerty Preference Ratings

Co-Workers (designate faculty/student)

Kathrene Valentine – graduate student

Marilee Teasley – undergraduate student

Submit a complete copy of your University IRB Application with this form.

I hereby agree to conduct this study in accordance with the procedures set forth in my project description, to uphold the APA ethical principles, and to report to the committee any outcomes or reactions to the experiment which were not anticipated in the risks description and might influence the committees decision to sustain approval of the project.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_                       \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Erin Buchanan Katy Valentine

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_                        \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date                                                                               Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Marilee Teasley

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date

Approved: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Withheld: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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