

Original	Date:	
Amended	Date:	

Return to the College of Graduate Studies

- Email <u>GCAcademicSvcs@utoledo.edu</u> or
- University Hall 3240, Mail Stop 933 or
- Mulford Library 113, Mail Stop 1042

Fillable PDF. Digital signatures and email submission strongly preferred. Illegible and incomplete forms will be returned.

Graduate Research Advisory (GRAD) Committee Approval and Assurances

Purpose of GRAD Form

- To document and approve the formation of the project, thesis, or dissertation committee in compliance with Graduate Faculty committee membership categories and the Graduate Student Handbook.
- To document the committee's approval of the topic and research approach and awareness of the federal requirements for institutional review of research methods.
- To document required approvals are obtained **prior** to beginning any research for a field experience, project, thesis, or dissertation involving humans, animals, radiation, or biohazardous substances in compliance with institutional and federal regulations.

Research Compliance at UToledo

■ The Office of Research and Sponsored Programs provides researchers, staff, and students the resources and tools necessary to conduct research ethically and responsibly and in accordance with all institutional and governmental regulations. Contact the research compliance staff with any questions.

Instructions for GRAD Form

- Student and their primary adviser must complete the following sections:
 - o Student Information: working title is a required field
 - Research Categories: address each category with a YES or NO do not skip any
 - o Committee Members: STUDENT enters each committee member's name and position on the committee the member will fill in their Rocket ID and signature and will forward to the next signer
- After receiving approvals or waivers for the research categories, the form should be completed, signed, and routed to all signers noted in the approval section of this form.
- Student may submit an amended form when adding or removing members from the committee, or recording a change in research approval or waiver.
- The College of Graduate Studies office will receive, review, and record the form, signifying that institutional review requirements have been met.

Student Information				
ROCKET NUMBER	NAME			
DEGREE	PROGRAM			
RESEARCH TYPE (select one):				
WORKING TITLE:				

Research Categories

HUMAN SUBJECTS

A project meets the definition of Human Subjects Research if it involves living individuals about whom an investigator obtains:

- 1. Data through intervention or interaction with the individual, including direction collection such as through interview or questionnaire, or indirect collection such as observation through one-way glass, or reviewing records.
- 2. Identifiable private information

If human subjects are involved, you must file an application for review with a UToledo Institutional Review Board (IRB). Researchers must complete the <u>required human subjects research training</u> **prior** to beginning the research. Additional

	UToledo Medical Center patients or their records to comply RPP) provides guidance to researchers and administrative
support for the UToledo IRBs. For additional information, of	
,	
YES APPROVAL NUMBER/WAIVER	NO
ANIMALS	
If animals (all vertebrates and higher invertebrates such	as octopus) are involved, you must file an application for
approval from the UToledo Institutional Animal Care and I	<u>Jse Committee (IACUC)</u> . For additional information, contact
the <u>IACUC Administrator</u> .	
YES APPROVAL NUMBER	NO
<u>Committee</u> . If approved, required training must be com additional information, contact the department of Radiation	
YES APPROVAL NUMBER	NO
<u>Institutional Biosafety Committee (IBC)</u> . Biological agent recombinant and synthetic nucleic acids; select agents a	you must file an application for approval from the UToledo s include but are not limited to: viruses; fungi; parasites; nd toxins; human blood, cells/cell lines, and other human at transgenic animals; and animal blood, cells/cell lines, and cion, contact the IBC Administrator.
YES APPROVAL NUMBER	NO

Committee Members

All committee members must hold current graduate faculty membership to chair or serve. Faculty should consult the <u>COGS Graduate Council webpage for membership information</u>, including status and renewal. **Instructions:** Member needs to input their Rocket ID (non-UToledo faculty will not have a number), select correct membership status, sign electronically, and forward to the next signer on the list.

Dept. Chair of	Signature		
	Signature	lal S	
	Student Signature and General Approverses	als	
Committee Role	Grad Faculty Membership Status		
Name	Signature	R	
Committee Role	Grad Faculty Membership Status		
Name	Signature	R	
Committee Role	Grad Faculty Membership Status		
Name	Signature	R	
Committee Role	Grad Faculty Membership Status		
Name	Signature	R	
Committee Role	Grad Faculty Membership Status		
Name	Signature	R	
Committee Role	Grad Faculty Membership Status		
Name	Signature Mre Mre	R	

FOR BIOMEDICAL SCIENCE PHD & MSBS PROGRAMS (CAB, MOME, MMI, & NND TRACKS) ONLY

Predoctoral Fellowship/Graduate Research Assistantships: PhD students with a stipend from a predoctoral fellowship/graduate research assistantship will be supported in whole or part by the College of Graduate Studies funds for a maximum of 3 years. Funding from the major advisor's grant(s), student predoctoral fellowship from other source(s), or from the major advisor's home department will extend this support for a fourth year, and beyond, if appropriate. Financial support from COGS also includes tuition of 9 credits per semester (6 credits summer semester) up to 5 years, at which time COGS will pay for 1 credit per semester until graduation, with the exception of students entering with a UT master's degree who will receive tuition support for up to 4 years. All financial support, regardless of source, is contingent upon satisfactory progress toward the degree, as determined by the major advisor and the student's advisory committee. There is no guarantee of financial support beyond the fifth year, although this may be granted under extraordinary circumstances if sufficient financial resources are available to the major advisor and/or the department.

I approve the above-named faculty member in my department serving as the major advisor for the above-named student. Should the major advisor, or any other financial source, be unable to the financial obligations to the student, the department accepts major advisor's financial responsibility for living stipend support.

REQUIRED:

Chair Name	Department	
Chair Signature	Date	
REQUIRED: ADVISOR'S FUNDING	OURCE ACCOUNT NUMBER for financial obligations beginning Year	2:
Account number Advisor's signature		
COLL	SE OF GRADUATE STUDIES USE ONLY	
GRAD form received, reviewed, and	corded by:Date:	
SHACOMI and SGAADVR entered by:	Date:	