

Psychology Research Experience Application

Name of person completing this form:
Department:
Office:
Telephone Number:
Email to be Used for SONA Systems Announcements:
Username as a SONA Researcher (different from participant account):
Title of Study that participants will see on SONA Systems:
IRB Approval Number:
Do you have IRB approval for using minors in this particular study? (YES / NO)
**Note: If “no,” you must set a prescreen filter on your experiment under SONA Systems to “hide” the experiment from students under the age of 18.
Estimated number of participants needed:
Estimated time required for each study session (e.g., 30m, 1hr, 10hr):
Study location (building and room number):
Name of all individuals on IRB protocol for this study:
Psychology Department faculty advisor/collaborator name:

Checklist (Please place a checkmark next to each item after reading)

I read and understand the terms outlined in the Research Experience Procedures.	
I will adhere to the Ethical Principles of Psychologists and Code of Conduct (www.apa.org/ethics).	
I am aware of the data collection deadlines for this term.	
I understand that I must provide a post-participation education form to participants in my study.	
I will provide copies of the Research Experience Evaluation Form to all participants in my study.	
I am aware that participation points are earned in 30 minute increments (rounded up).	
I am aware that SONA Systems automatically credits participants 48 hours after the scheduled appointment time and that I must manually override this if needed.	
I am aware that I must enter a participant timeslot as “Unexcused No Show” if a participant does not show without cancelling more than 24 hours prior to the study – or if they are more than 5 minutes late (this latter example is at researcher’s discretion).	
I realize that I must have specific IRB permission to use participants under the age of 18.	
I understand that I have unlimited timeslots for this semester.	
I have attached (a) a summary of my research project AND (b) a copy of my approval letter from the University's Institutional Review Board to this form.	

Signature: _____

Date: _____