



**REGISTRATION OF THESIS QT
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Southern Illinois University Edwardsville

Graduate Records, Rendleman Hall, Room 1309

Campus Box 1047, Edwardsville, IL 62026-1047

Telephone: (618) 650-3167 Fax: (618) 650-2081

Name

Student Identification Number

Expected Graduation (Term/Year)

Street

City

State

Zip Code

Graduate Degree Program Sought

Phone Number or e-mail address

Thesis Title (please print or type)

Nature of Research (please print or type; briefly describe, in laymen terms, the information-gathering methods and sources to be used)

Indicate if your research involves the use of: _____ Animals _____ Human Subjects _____ Biohazardous Materials

Student must contact the Office of Research and Projects in the Graduate School, Rendleman Hall, Room 2202, or visit the website (www.siu.edu/orp/researchpolicies) for the guidelines and protocols involved in the use of animals, biohazardous materials, human subjects, or recombinant DNA. Under University assurance with the respective federal regulatory offices, all research in these areas, carried out on- or off-campus, must comply with government regulations and University policies. Student agrees to complete the required research protocols and receive approval from the appropriate compliance committee **prior to** the commencement of the research.

Student's signature

Date

At least three Graduate Faculty members must agree to serve on a Thesis Advisory Committee."

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1. printed name

signature

2. printed name

signature

3. printed name

signature

4. printed name

signature

Submit completed form to Graduate Records, Rendleman Hall, Room 1309, or Campus Box 1047, Edwardsville, IL 62026

Office of Research and Projects Review (if research involves animals, human subjects, or biohazardous issues):

_____ Approved

_____ Exempt/No Compliance Review Required

Chairperson, Appropriate Regulatory Committee: _____

Approved by the Dean of the Graduate School: _____