

Application Project Review by
The University of North Alabama
\R X 8 1 \$ H P D L O F R I P F X C C L F D W B R O O D S S O L F B E E M
D S S O L F S W R S R O F B O V H Q W I R U M H Q W F

(Please Type)

Project Director

Last Name

Department/Organization

Phone

Title of Project

Dept./Org.

Phone

Address

E-Mail

Is the above research to be funded? Yes NO

If yes, by what agency?

Will this research be replicated using the methodology herein proposed? Yes NO

If yes, how many times will data be collected?

Based on the Federal and University guidelines for the use of human subjects in research, the proposed research should qualify for the following review (check one)

Exempt

Expedited

Full Review

(Request for exempt, expedited, or full review status is to be approved by the , Q V W L W X W L R Q D O U S A P r i n t t o t h e % R i d i n g of data collection)

!

"

\$ % & % ! ! ' () *
 & # * ! ! ! " " "
 + * , * ! ! " "
 - * . ! / ! " (* ! ! "
 ! \$

+\$ 0 _____

, \$ \frac{\%}{!} \frac{\& \%}{\\$}

2 !

!

-\$3 \frac{\& 3}{}

2 ! \$! \$

\$ % ! & 4 #* ! ! !! ! "

+* . ! ! " ,* !

! ! \$

+ \$! 5 ! & % #* ! !

! ' !! * +* !

! ! \$

\$ % 4 6 & 4
' 7 8 &

! \$*\$

\$ / .!

\$ 3

\$

\$ % ! ! ! 2
! ! .! \$

\$ % 2 ' * 9 \$

\$:

1

\$

\$

" .! ! !

2

\$ %
\$

#*

+*

\$

!

! 1 :
! 1

/ 1 :

!

! ! !
! 1 .

\$ 5 & % !

\$

