Research on Human Subjects at Central Piedmont

Committee Chair Approval

The purpose of this form is for the professor supervising the research of graduate students to approve their application to collect data at Central Piedmont.

Please print, sign, and date form. The completed form may be faxed to (704) 330-6013 or emailed to research@cpcc.edu.

PRIMARY INVESTIGATOR INFORMATION

Name _____
(Last, First)

Degree Sought ◯ Master ◯ Doctoral ◯ Other _____

Title of Proposal

_____

PRIMARY INVESTIGATOR DEGREE-GRANTING INSTITUTION

Institution _____

Department _____

Professor Name _____
(Last, First)

Email _____

Phone _____

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I have read the proposed study and agree with the following:
(please check all that apply)

- ☐ The proposal reflects academic standards of writing.
- ☐ The study is based on sound research principles.
- ☐ The concept and proposal are mature enough to make the request for data.
- ☐ The research questions are appropriate for the proposed study.
- ☐ The student understands the data variables and values they are requesting.
- ☐ The student has provided sufficient detail in the research application proposal to inform Central Piedmont of their intentions.
- ☐ The student has identified appropriate statistical analysis, informed consent, and protection of subject anonymity.
- ☐ In my opinion, the proposed study has little or no risk.

Professor Signature _____

Date _____