



MCHHS First Summer Research Support

Research Plan Due: April 1st

COVER PAGE

Name: _____ Department: _____

Title of Project: _____

Please check the box below that best applies:

- Tenure Track, 9-month Appointment (eligible for \$6,000 research support)
- Tenure Track, 12-month Appointment (eligible for planned course release)

Date of Hire: _____

Please check the appropriate box if this project has human participants, utilizes animals, has special needs, or deals with biohazards. Review will be required by the Office of Sponsored Research. (A project having any of these issues cannot be implemented until it is reviewed and given approval.)

- | | |
|--|---|
| <input type="checkbox"/> Human Participant Protection (IRB) | <input type="checkbox"/> Space Management Task Force |
| <input type="checkbox"/> Institutional Animal Use & Care Committee | <input type="checkbox"/> Institutional Bio Safety Committee |

Please have your Department Head send an email to MCHHS@MissouriState.edu with their comments and approval of your application.