Additional Investigator Form

*By submitting this request, the Principal Investigator (and responsible faculty member if the PI is a student) I declare that I have reviewed this report which provides a complete and accurate description of the event and that upon receipt of the IRB’s review, I will fully and immediately implement any corrective actions required by the IRB.*

*The parties (the IRB, the Principal Investigator, and responsible faculty member if the PI is a student) have agreed to conduct this application process by electronic means, and this application is signed electronically by the Principal Investigator and by the responsible faculty member if a student is the PI.*

*My name and email address together constitute the symbol and/or process I have adopted with the intent to sign this application, and my name and email address, set out below, thus constitute my electronic signature to this application.*

Date

PI Name PI Email Address

Date

PI Name PI Email Address

Date

PI Name PI Email Address

Date

PI Name PI Email Address