

REQUEST FOR AUTHORIZATION TO RECRUIT for RESEARCH
CHILD DEVELOPMENT LABORATORY SCHOOL
Department of Human Development and Family Studies



INSTRUCTIONS:

- (1) Complete this form and return with an attached timeline: *Administrator, Child Development Laboratory School, 2222 Osborn Dr., Palmer 1354, Ames, Iowa 50011 or cdlabs@iastate.edu. (515) 294-5061*
- (2) You will be notified when your request has been reviewed and signed by the Administrator. The review process usually requires 5 working days.
- (3) First priority for research recruitment is given to faculty and students in the Department of Human Development and Family Studies; second priority is given to researchers in other ISU academic departments.

RESEARCHER: _____ DATE: _____

UNIVERSITY OFFICE
ADDRESS: _____ PHONE: _____ E-MAIL: _____

SUPERVISING OFFICE
FACULTY: _____ PHONE: _____ E-MAIL: _____

TITLE OF RESEARCH: _____

PROCEDURE: (Check all that apply)

Parents contact researcher if interested: _____ Researcher contacts parents to recruit: _____
Brief description of method (Example: flyer, e-mail, phone call, etc.)

TENTATIVE RECRUITMENT TIME SCHEDULE: Approximate Dates: _____
(Please keep laboratory school administrator informed of changes in dates and/or completion date)

PROPOSAL TO ISU HUMAN SUBJECTS COMMITTEE

SUBMITTED: (Date) _____ APPROVED: (Date) _____ ISU IRB # _____
(No research may be conducted until approval is received from the ISU Human Subjects Committee.)

BRIEF DESCRIPTION OF RESEARCH PROJECT AND THE POSSIBLE INVOLVEMENT OF LAB SCHOOL FAMILIES:

PLEASE ATTACH A TIMELINE OF YOUR PROPOSAL TO THIS FORM

SIGNATURE: Researcher: _____ Date: _____

Faculty Supervisor: _____ Date: _____

SIGNED LABORATORY SCHOOL ADMINISTRATOR: _____

Distribution of copies: Laboratory School Administrator _____ Office File _____ Researcher _____