**PSYCHOLOGY ETHICS COMMITTEE**

**APPLICATION COVER PAGE**

**2023 - 2024**

This form serves as the cover page for all requests for review by the Psychology Ethics Committee.

All descriptions of the research and supporting documentation should be submitted with this form.

Full instructions for submitting a protocol to the Psychology Ethics Committee can be found at:

http://www.wesleyan.edu/psyc/deptinfo/ethics\_review.html

**Click on Arrow to Select Submission Type:**

**Principal Investigator:**

|  |  |  |
| --- | --- | --- |
| Name: | Student | Faculty (check one) |
| E-mail: | | Phone: |
| Faculty Supervisor (if applicable): | | |
|  | | |

|  |  |
| --- | --- |
| Do you plan to recruit from the Psychology Participant Pool? | Yes No (check one) |

**Title of Project** (75 characters maximum)**:**

|  |
| --- |
|  |

**Short Title** (one word, 6-15 characters without spaces, used as an identifier for your protocol):

|  |
| --- |
|  |

(The short title should be unique from any other protocol previously submitted to the Ethics Committee)

**Faculty Sponsor Statement of Approval for Student Applications** (if applicable)**:**

**🡪 (submit 2 separate documents -- coversheet and protocol/supporting documents)**

Forward your completed coversheet, protocol, and any supporting documents to your faculty sponsor for their review. Once they have reviewed and approved your proposal, they will submit it to the Ethics Committee with the statement *“I have read this protocol for conformity to the Psychology Ethics Committee guidelines and I approve it”* in the body of their email.



***(Do not write in this section. To be completed by Cathy Race.)***

Draft #       Date submitted to committee:            Date returned to PI:

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**COMMITTEE MEMBERS: RECOMMENDATION:**

Fall: PRM (chair), YE; alt - AM            Date Approved            Ethics committee members

Spr: PRM (chair), YE; alt - BJ