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**Principal Investigator: Study Title:**

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**Additional Research Team Members Form**

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| --- | --- | --- | --- |
| ***All research team members must have completed IRB-approved human research protections training.***  ***Use this form as many times as necessary.*** | | | |
| Name: |  | Dept: | |
| Role in the research: | | | |
| Research Ethics Training Source: |  | Date Completed: | |
| Any Potential or Actual financial interested related to this research? Yes No Any Contact with PHI? Yes No Involved in Consent Process: Yes | | | No |
| Name: |  | Dept: | |
| Role in the research: | | | |
| Research Ethics Training Source: |  | Date Completed: | |
| Any Potential or Actual financial interested related to this research? Yes No Any Contact with PHI? Yes No Involved in Consent Process: Yes | | | No |
| Name: |  | Dept: | |
| Role in the research:  Research Ethics Training Source: Date Completed: | | | |
| Any Potential or Actual financial interested related to this research? Yes No Any Contact with PHI? Yes No Involved in Consent Process: Yes | | | No |

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| Name: |  | Dept: | | |
| Role in the research: | | | | |
| Research Ethics Training Source: |  | Date Completed: | | |
| Any Potential or Actual financial interested related to this research? Yes  Any Contact with PHI? Yes No Involved in Consent Process: | | | No  Yes | No |
| Name: |  | Dept: | | |
| Role in the research: | | | | |
| Research Ethics Training Source: |  | Date Completed: | | |
| Any Potential or Actual financial interested related to this research? Yes  Any Contact with PHI? Yes No Involved in Consent Process: | | | No  Yes | No |
| Name: |  | Dept: | | |
| Role in the research: | | | | |
| Research Ethics Training Source: |  | Date Completed: | | |
| Any Potential or Actual financial interested related to this research? Yes  Any Contact with PHI? Yes No Involved in Consent Process: | | | No  Yes | No |

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