Part 1
Senior Thesis Research Funding
Compliance Checklist
Due to Sandra by March 3rd

You will not be considered for funding without this completed form!

Name:
Date:
Adviser:
Likely topic:
Likely location (e.g., name of country, city, state):
Number of weeks I plan to do research:
Likely start date:
Total budget request:
IRB Approval Date (if available):
IACUC Approval Date (if available):

Research Project Information

1. I will be working in a lab on Princeton's campus: □ Yes □ No
2. My adviser has confirmed my workspace. The building and room number are _____________________________
3. I will be working in a lab on another institution’s campus □ Yes □ No
4. I will be conducting field research □ Yes □ No. If yes, where? _____________________________
5. I will be working in the U.S. □ Yes □ No. If yes, where? _____________________________
6. I will be working internationally □ Yes □ No. If yes, where? _____________________________
7. I will need a passport to go to my research location □ Yes □ No
8. I will need a visa to go to my research location □ Yes □ No
9. I will need a Memorandum of Understanding between my host adviser and Princeton □ Yes □ No □ I don’t know

Animal Research:

1. I will be doing research which will include vertebrate animals □ Yes □ No
   If yes: — What species of animal (common & scientific names)?
   If yes: — My Princeton AND my on-site adviser have protocols in place for IACUC approval, which allows the research to take place □ Yes □ No
2. My animals will be contained, if required, in appropriate enclosures approved by my adviser & IACUC □ Yes □ No
3. I will be doing research which may impact/alter an animal’s environment (this can include playing sounds, presenting food or clearing vegetation) □ Yes □ No
   If yes: - Describe
4. If I am working internationally, I understand that I may need to be included in that country’s animal protocol paperwork □ Yes □ No
5. I will be doing research with/on animal byproducts (tissues, blood, carcasses, dung) □ Yes □ No If yes, what byproducts specifically?

6. I will be in the field doing observation only wildlife studies (i.e. no interaction or impact on the study animals in any way) □ Yes □ No. If yes, please explain what the observational studies entail:

**IMPORTANT NOTE:** If you answered yes to any items in the section above, IACUC approval may be required before research can begin. Please contact the Princeton IACUC office at (609)258-3583 or iacuc@princeton.edu for a determination

**Human Subjects Research:**
1. I will be doing research about living individuals to obtain data through intervention or interaction with these individuals □ Yes □ No
2. I will collect and/or analyze identifiable private information about living individuals □ Yes □ No
3. I will analyze de-identified data from living individuals □ Yes □ No
4. I will analyze data only from individuals who are deceased □ Yes □ No
3. I will obtain and/or have access to biological specimens i.e., blood, plasma, fecal matter, breast milk, DNA, etc. from living individuals □ Yes □ No
4. Specimens will be obtained from a repository or other source □ Yes □ No, If yes specify the source:

**IMPORTANT NOTE:** If you answered yes to any items in this section, IRB approval may be required before research can begin. Please contact the Princeton IRB office at (609)258-0865 or irb@princeton.edu for a determination.

**Research safety:**
1. I will be doing research with/on recombinant DNA □ Yes □ No □ I don’t know
2. I will be working with hazardous biomaterials (microorganisms or viruses that can cause human infections, human or non-human primate body fluids or animals/animal tissues known to be reservoirs of zoonotic disease) □ Yes □ No □ I don’t know If yes, please list which biomaterial:
3. I will be working with radioactive materials □ Yes □ No □ I don’t know
4. I will be working with chemicals □ Yes □ No □ I don’t know
5. I will need a permit to conduct my research □ Yes □ No □ I don’t know
6. I will be transporting chemicals, environmental samples or biological materials, including animal or human specimens, to or from the research site □ Yes □ No If yes, I will need a permit □ Yes □ No □ I don’t know
7. I will be working in extreme environments (high altitudes, mines/caves, underwater, etc.), extreme weather areas, under high physical stress, or working with heavy machinery? □ Yes □ No □ I don’t know. If yes, please explain:

______________________________

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Compliance Summary

**Working with Animals**
— If yes to any of the questions in the Animal section above, check the study status below:
— The IACUC has approved the proposed research  □ Yes □ No  If yes, provide the protocol #_____
— My adviser and/or I have a copy of the IACUC Approval  □ Yes □ No
— An application has been submitted to the IACUC and Approval is pending  □ Yes □ No

If NO, contact the IACUC office at (609)285-3583 or iacuc@princeton.edu for guidance

**Working with Human Subjects**
— If yes to any of the questions in the Human Subjects section above, check the study status below:
— The IRB has approved the proposed research  □ Yes □ No
— My advisor and/or I have a copy of the IRB Approval or Non-Human Determination  □ Yes □ No
— An application has been submitted to the IRB and Approval is pending  □ Yes □ No

If NO, contact the IRB at (609)285-3976 or irb@princeton.edu for a determination

**Medical Surveillance & Travel Health**
—I understand that I need to discuss with my adviser, the EHS office, and University Health Services any health implications of my research; including exposure to animals, traveling abroad, vaccinations, preventative medication, etc. □ Yes

— My project is confirmed and will not change substantially □ Yes □ No
— My project might change substantially □ Yes □ No
Part 2
Senior Thesis Research Funding

Budget – Work with your advisor to complete this form and send to Sandra by March 3rd

Date: __________________________

Name: __________________________

Adviser: __________________________

Topic: __________________________

Location: __________________________

Number of weeks: __________________________

Start date: __________________________

End date: __________________________

Total amount requested: __________________________

Signature of adviser, who MUST review and approve the costs: __________________________

<table>
<thead>
<tr>
<th>ITEM</th>
<th>Amount needed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Travel to destination</td>
<td></td>
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<tr>
<td>Local travel at destination; bus, fuel, etc.</td>
<td></td>
</tr>
<tr>
<td>Lodging</td>
<td></td>
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<tr>
<td>Food ($25 a day)</td>
<td></td>
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<tr>
<td>Research permits. Check with your adviser and/or destination if you will need a permit.</td>
<td></td>
</tr>
<tr>
<td>Visas. Check with VisaCentral.com to see if you need one.</td>
<td></td>
</tr>
<tr>
<td>Equipment and supplies – please provide a detailed list by item. Budget will not be accepted without itemized list.</td>
<td></td>
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<tr>
<td>Testing or analysis of samples; or sequencing analysis – please provide a breakdown of likely analysis needed</td>
<td></td>
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<tr>
<td>Shipping of samples</td>
<td></td>
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<tr>
<td>Lab fees required by adviser?</td>
<td></td>
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<tr>
<td>Program fee, Wallacea, e.g.</td>
<td></td>
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<tr>
<td>Money to pay for field assistants</td>
<td></td>
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<tr>
<td>SCUBA expenses; EEB does not pay for dive buddies</td>
<td></td>
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<tr>
<td>Books</td>
<td></td>
</tr>
<tr>
<td>Other, please explain</td>
<td></td>
</tr>
<tr>
<td>Special clothing</td>
<td>Not covered by the university. Student’s responsibility.</td>
</tr>
<tr>
<td>Tips to staff, if staying in Mpala or other places where it is expected</td>
<td>Not covered by the university. Student’s responsibility.</td>
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<tr>
<td>Cell phone</td>
<td>Not covered by the university. Student’s responsibility.</td>
</tr>
<tr>
<td>Passport fees</td>
<td>Not covered by the university. Student’s responsibility.</td>
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<tr>
<td>Immunizations</td>
<td>Not covered by the university. Student’s responsibility.</td>
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<td>---------------</td>
<td>----------------------------------------------------------</td>
</tr>
<tr>
<td>Medications</td>
<td>Not covered by the university. Student’s responsibility.</td>
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</tbody>
</table>
Part 3
Senior Thesis Research Funding
Proposal – Due to Sandra by March 3

Name:

Adviser:

Title of project:

Location of research, or field site:

Dates of project:

Cost of project:

Advisor signature:

Please address each of the points below in your proposal in essay form

- The Question:
- Hypothesis:
- Aim of project:
- Objectives (No more than three specific objectives):
- References: