Please complete all fields with the required information. You must complete a separate request for each individual study you wish to post in Sona (but you may have more than one study approved under the same ICEHR protocol number).

**Contact Information**

*Note: Faculty members must have their primary appointment in the Department of Psychology and are responsible for all aspects of the study. “Researcher” refers to all students/RAs who will be actually testing participants in the study; please include* ***all*** *researchers who will be involved with the study.*

Supervising Faculty Member Name: Click or tap here to enter text.

Supervising Faculty Member Email: Click or tap here to enter text.

Researcher Name(s) and Email(s): Click or tap here to enter text.

**Attachments (check)**

PREP Informed Consent Form

PREP Feedback Form

ICHER Approval Letter

**Complete Study Information**

ICEHR Protocol Number: Click or tap here to enter text.

ICEHR Approval Expiration Date: Click or tap here to enter text.

ICEHR Protocol Title: Click or tap here to enter text.

Complete description of study procedure (include all details, including deception if applicable):People will do all kinds of things. It will ask them to do lots of stuff.

**Study Information for Participants (recruitment on Sona)**

Study Title for participants (will be displayed on Sona): Click or tap here to enter text.

Specify the study type (select one): Choose an item.

Please specify details on study type if requested: Click or tap here to enter text.

Does your study include high-demand tasks? High-demand tasks require additional physical demands on participants, beyond tasks they would normally do as students (e.g., an EEG procedure or pain task). Choose an item.

Specify number credit points (per session, if applicable): Click or tap here to enter text.

ICEHR approved Sona Study Description (will be displayed on Sona):Click or tap here to enter text.