Thesis/Doctoral Culminating Project – Registration and Research Compliance Form

This form is required and should be completed by all students who are doing a master’s thesis or doctoral culminating project (dissertation, capstone, DNP project). The form serves the following purposes: registers your project with the Graduate School, confirms committee chairperson, and aids in research compliance. Advising, as it relates to the project, is at the discretion of the student’s advisor/committee chairperson and/or faculty committee.

**SECTION I**: To be completed by the student

Name:       Student ID#

Phone Number:       WCU Email:

Check one:

[ ]  Master’s Thesis [ ]  DPA Capstone [ ]  EdD Dissertation [ ]  PsyD Dissertation [ ]  DNP Project

Degree:

Anticipated Title of Study:

Committee Chairperson:

Brief summary of your project:

Do you anticipate any subject interaction (human or animal) as part of this project? If yes, please briefly explain:

Do you plan on disclosing the name of any organization or individual? If yes, please explain:

If your project involves human or animal subjects, has this project already received IRB or IACUC approval? If yes, please provide protocol number and date of approval:

Estimated timeframe for project completion:

Signature of Student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Committee Chairperson:

Committee Chairperson Contact Information:

Date:       Anticipated Graduation Date:

**After SECTION I is complete, please send form to** t**hesisdoc@wcupa.edu or deliver to McKelvie Hall, The Graduate School, 102 W. Rosedale Ave. The graduate school staff will log the project and send the form to the ORSP representative for Section II.**

**SECTION II:** To be completed by Office of Research & Sponsored Programs (ORSP) Representative

[ ]  No review required as student already gained appropriate approvals.

IRB Review Required: [ ]  Yes [ ] No

Animal Care Review Required: [ ]  Yes [ ] No

Comments:

Name & Role:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please send completed form to** **thesisdoc@wcupa.edu** **or deliver to McKelvie Hall, The Graduate School, 102 W. Rosedale Ave.**

**Student, committee chairperson, and graduate coordinator will receive an email from the Graduate School with a copy of the signed form by the next business day after it is received from ORSP. If there are any concerns with the information communicated through the email or signed form, the student, committee chairperson, or Graduate Coordinator is encouraged to reach out to** thesisdoc@wcupa.edu**.**