

ATTACHMENT I

Approval Form Checklist
Holden Comprehensive Cancer Center
SPORE Developmental Project Applicants

(return with each copy of application submitted)

Date: _____

Principal Investigator: _____

Department: _____

Title of Proposal/Project: _____

If the answer to any of these questions is affirmative, the proposal must be reviewed by the University's Institutional Review Board, prior to the initiation of the project or the establishment of an account. Contact the Division of Sponsored Programs, 100 Gilmore Hall (335-2123) for the appropriate forms, procedures, and instructions.

Receipt of Approval copies prior to initiation of account.	YES	NO
<i>Note: If any of these uses are involved in the project, then institutional approval is required before award activation. Please allow a maximum of 60 days from the award notification date to obtain relevant approval. Please submit copies of approved IRB and ACURF to the Holden Comprehensive Cancer Center.</i>		
1. The experiments described in this proposal involve the use of human research subjects.		
2. The experiments described in this proposal involve the use of laboratory animals.		
3. The experiments described in this proposal involve the use of radioactive isotopes.		
4. The experiments described in this proposal involve administration of new or experimental drugs to humans.		
5. The experiments described in this proposal involve DNA recombinant molecules.		

Signed: _____
Principal Investigator