

STATEMENT OF ASSURANCES

(EXTERNAL PERSONS)

Human Subjects Research

This document **must be submitted** by the Principal Investigator who is **not associated with Thomas University**. The Principal Investigator's assigned external sponsor (Faculty Member **not associated with Thomas University**), major professor, academic research or dissertation committee chairperson, or research project manager may complete the below assurance statement for submission with the Principal Investigator's Thomas University IRB application.

If the Principal Investigator is working with a Thomas University Faculty Member, the assigned Thomas University Faculty Member should complete the Assurance Statement included within the actual Thomas University IRB application. Should you have any questions, please email the Thomas University Institutional Review Board at irb@thomasu.edu.

External Person's Identity and Acknowledgement of Attestation and Assurance:

External Person's First Name	(Please Print)		
External Person's Last Name	(Dia	ase Print)	
	(Fie	ase rilliy	
Associated Institution's/University's Name:	(Please Print)		
Associated Institution's/University's Address:		ase Print)	
21.	·	,	
City:(Please Print)	State:(Please Print)	Zip Code:	
Felephone Number:	E-mail Address:_		
		(Please Print)	

I believe that the research can be safely completed without endangering human subjects and within the bounds of the principles set forth by the National Commission for the Protection of Human Subjects of Biomedical and Behavioral Research's report, The Ethical Principles and Guidelines for the Protection of Human Subjects of Research (commonly known as the "Belmont Report") and Title 45 – Public Welfare Section 46, "Protection of Human Subjects" of the U.S. Code of the Department of Health and Human Services. Furthermore, I have read the applicant's proposal, and I am willing to supervise the investigator(s), where applicable.

External Sponsor's Signature (SEAL)	Date