



**STUDY SUBJECTS** (check all that apply):

Enrollment goal: \_\_\_\_\_ subjects at Bridgeport Hospital, \_\_\_\_\_ total subjects.

Enrollment will include (check all that apply):

- Fetuses       Children       Emancipated minors       Non-English Speaking  
 Women of childbearing potential       Patients with dementia, psychosis or altered mental state
- 

Will study involve **advertisement for subject recruitment**?  Yes  No (if yes, attach copy of advertisement)

Will Enrolled subjects receive compensation?  Yes  No      Amount \_\_\_\_\_

---

**FUNDING SOURCE:**

- None       Local funds       Yale Funds       Other \_\_\_\_\_
- 

**Principal Investigator (PI) Agreement:**

As the PI of this research project, I certify that the information is complete and accurate. I will assume full responsibility for the protection of human subjects and the proper conduct of the research, making every effort to protect subject's rights and welfare. I agree to conduct this research according to ethical principles and in compliance with all federal, state and local laws, as well as institutional regulations regarding the protection of human subjects.

\_\_\_\_\_  
Signature of the PI

\_\_\_\_\_  
Date

**Supervising Investigator Agreement (If applicable):**

As the Supervising Investigator of this research project, I certify that the information provided in this application is complete and accurate; that this project has scientific value and merit and that the student or resident/fellow has the necessary resources to complete the project and achieve the aims. I will train the student investigator in matters of appropriate research compliance, protection of human subjects and proper conduct of research. The research will be performed according to ethical principles and in compliance with all federal, state and local laws, as well as institutional regulations regarding the protection of human subjects.

\_\_\_\_\_  
Signature of the Supervising Investigator

\_\_\_\_\_  
Date

**Approval by Chair(s) of Involved Department(s):**

The Principal Investigator of this study and all members of the research team are qualified by education, training, licensure and/or experience to assume participation in the conduct of this research and have the support of the department for this project.

\_\_\_\_\_  
Signature of the Departmental Chair

\_\_\_\_\_  
Signature of the Departmental Chair

Department of \_\_\_\_\_

Department of \_\_\_\_\_

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

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