



2021 Spring Face to Face Research Participation

I have received, read and understand the COVID19 safety protocols related to my participation in face to face winter research. I will comply with all safety protocols and direction provided by faculty and staff leads.

Name	Signature	Date

I have provided guidance in the appropriate COVID19 safety protocols related to the participation in face to face spring research for the participants listed.

Name: _____

Signature: _____ Date: _____