LMU DeBusk College of Osteopathic Medicine

DCOM Student Research Project Form

Students planning to conduct any LMU/DCOM-affiliated research must meet with a DCOM faculty member to discuss potential research projects before completing this form. The student submits the form on behalf of the student and faculty mentor. Failure to submit this form may result in denial of any future research travel funds or publication cost requests.

Student Name:
DCOM Class Year:
Contact Information (phone/email):
This project requires approval from (check all that apply): IRB* IACUC* IBCSC* ISCN IBCSC* ICCN IRB requires IACUC approval. *Projects involving pathogens, recombinant DNA, or highly corrosive chemicals requires IBCSC review.
Faculty Mentor (and campus):
Project of interest (brief description and relevant notes regarding feasibility):
For the project listed above, please include a description of the timeline for completion and expected outcomes/deliverables (e.g., poster presentation, manuscript, etc.)

Student: _____

Type Name

Digital Signature

Faculty Mentor:

Type Name

Digital Signature

Please submit the completed form to Dr. Jeff Martin (jeffrey.martin@lmunet.edu) before beginning work on the project. After approval, a fully executed form will be sent to all parties

Approved by:

Research Director/Dean:

Type Name

Digital Signature