Section D

Permission to Survey **NON-Bemidji State** Human Subjects

Title of Proposal:

Name of Investigator(s):

Abstract:

Title and name of institutional representative,

I am asking for permission to distribute my survey to a random sample of [general name of participants] at [Name of school district/company/institution]. My survey will take approximately [#] minutes to complete. I have included a copy of my survey for your review. Thank you.

The signature below indicates that approval has been given to the above named investigator(s).

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Signature of Institutional Representative Date

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Printed Name of Institutional Representative

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Name of School District/Company/Institution