

## Doctoral Project Proposal Hearing Request Form – DNP

Program: Doctor of Nursing Practice (DNP)      Banner ID: \_\_\_\_\_

Student Name: \_\_\_\_\_      Student's Email: \_\_\_\_\_

Please provide a tentative title and brief description of the project.

<p>This project will be submitted to the Office of Research Compliance as a Not Human Subjects Research Project.</p> <p>I understand that, should the proposed project not receive a Determination of Not Human Subjects Research by the Office of Research Compliance, then Institutional Review Board approval must be obtained.</p>	<p>Choose One [Yes or No]</p> <p>_____</p> <p>_____</p>
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**Anticipated Proposal Hearing Date:** \_\_\_\_\_

**Anticipated Project Defense/Final Exam Date:** \_\_\_\_\_

**Anticipated Graduation Date:** \_\_\_\_\_

**Signatures Required.** Student and Chair acknowledge Research Compliance Determination of Not Human Subjects Research or IRB approval is required prior to initiating the project.

Student Signature	Type Name
DNP Committee Chair Signature	Type Name
Program Coordinator Signature	Type Name
Graduate Faculty Representative Signature	Type Name

For more information, visit <http://research.tamucc.edu/compliance/index.html>

Complete this form. Upload to [CGS website](#) to be routed for signatures. Form should be submitted no later than two weeks prior to the hearing and, at minimum, two semesters prior to the student's anticipated graduation. Contact CGS with questions (361) 825-2174

**For College of Graduate Studies Use Only:**

CGS Approval _____	Entered in Banner _____
Academic Advisor _____	Entered on Spreadsheet _____