

2018 NSRF REGISTRATION FORM

Please complete and return by March 1, 2018

(Please print or type)

(Mr., Mrs., Ms., Dr.) Last Name: _____ First Name: _____

Home Address: _____

Phone: (_____) _____ - _____

Faculty Sponsor: Last Name: _____ First Name: _____

Mailing Address: _____

Phone: (_____) _____ - _____

If guest will attend, please print or type name.

1. _____

Please check the events you plan to attend. Registration fees include the cost of all planned social functions.

_____ Evening before mixer Hilton Galveston Student Resort, poolside Wednesday April 25, 2018 6:30 p.m.

_____ Awards Banquet Hilton Galveston Student Resort Friday April 27, 2018 6:00 p.m.

Note: Food will be served buffet style.

STANDARD EQUIPMENT PROVIDED: Auditoriums are equipped with computers and updated technology for use with power point presentations. THE PARTICIPANT MUST PROVIDE ANY SPECIAL EQUIPMENT.

A check, money order, payable to the National Student Research Forum or credit card payment form for \$125 (U.S Dollars) must accompany this form to serve as registration fee. An additional \$50 (U.S. Dollars) Guest Fee is necessary for each guest, including spouse, who will attend the awards banquet (Guest Fee is for the awards banquet only, guests are not allowed to attend the Forum). NO REFUNDS WILL BE ISSUED after April 1, 2018.

THIS FORM, PLUS THE REGISTRATION FEE, MUST BE RECEIVED BY MARCH 17, 2018. Please return original form to the National Student Research Forum. Please keep a copy for your records; a receipt for payment will be provided to you at the close of the meeting. If a receipt is needed before end of conference, please contact the NSRF Coordinator at (409) 772-6958 or NSRF.Galveston@utmb.edu.

COVER SHEET ENDORSEMENT

All presentation participants must complete and return this form by March 17, 2018. Handwritten forms will not be accepted; you will not be allowed to present your work if this form is not returned to the NSRF Coordinator by March 17, 2018.

I acknowledge that the presentation entitled:

The above title will appear under the student participant's name as first author at the National Student Research Forum. Furthermore, any future publications of this work will bear his/her name in conjunction with the faculty members who advised and guided the project.

Student Participant (Please Print)

Student Participant's Signature

Department Chair/Dean (Please Print)

Department Chair/Dean Signature

Faculty/Dean Sponsor (Please Print)

Faculty /Dean Signature

Author's Disclosures

1. CONFLICT OF INTEREST

Please circle one and initial pertaining to conflict of interest and financial disclosures.

A _____ (Initial here) *Neither I nor my spouse/domestic partner* have a significant financial interest or other relationship with any manufacturers of commercial products or service providers. I am not receiving direct payments from a commercial entity with respect to this activity.

B _____ (Initial here) *Either I or my spouse/domestic partner* have a financial relationship, arrangement or affiliation with one or more commercial entities that could be perceived as a real or apparent conflict of interest *in the content of this presentation. (Please attach a written description of the financial relationship that exists including dollar amounts and the source of the funds.)*

2. ANIMAL RESEARCH

Please check here if the research you are presenting at the 2018 NSRF involves the use of animals, including non-human primates. This excludes the use of human subjects (see below).

If your research involves the use of animals, do you have the appropriate and current approvals from your IACUC and/or other institutional committee? (Circle AND initial)

Yes _____ (Initial here)

No _____ (Initial here)

If yes, please attach, the IRB Letter or CITI Certificate

Date of approval: _____ Protocol number: _____

3. HUMAN SUBJECT USE

Please check here if the research you are presenting at the 2018 NSRF involves the use of human subjects or samples.

If your research involves the use of human subjects and samples, do you have approval from your IRB, CITI Certificate or other appropriate institutional committee? (Circle AND initial)

Yes _____ (Initial here)

No _____ (Initial here)

If yes, attach IRB Letter or CITI Certificate

Date of approval: _____ Protocol number: _____

I attest that I have read the above disclosures and agree that the above information is true and accurate.

Student Signature

Date

Faculty Advisor Signature

Date