DEPARTMENT OF SOCIOLOGY

Responsible Conduct of Research: Graduate Student RCR Training Completion Form: YEAR 3 & BEYOND TRAINING

Graduate Student Name: ______

Instructions: Complete and submit this form to Jackie Leavitt (leavit13@msu.edu) no later than May 15 for each academic year (year ending May 15). This form must be approved and signed by your guidance committee chair before being submitted. This report should include a summary of your RCR training completed for the academic year beginning in August through May 15 of the current year. You should also attach any documentation of training activity recorded soon after its completion as part of the on-line system described at: http://ora.msu.edu/RCR

This report covers RCR training ending May 15, ______(provide current year). Please fill out below how you obtained three hours of RCR training, using a combination of the options below.

 During the past academic year, I attended one session of discussion-based training via Graduate School-offered RCR workshops equal to one and a half hours of training. □YES or □NO (Check one)

If you responded yes, please provide workshop title & date:

- During the past academic year, I completed two additional on-line CITI Modules offered by MSU's Human Research Protection Program (HRPP) which I have not taken previously. Two modules is one hour of training. □YES or □ NO (Check one)
 If you responded yes, please provide course title & date:
 - 1.

 2.

- During the past academic year, I completed an IRB refresher course? Each course is equivalent to one hour of training.
 YES or <a>INO (Check one)

If you responded yes, please provide the course title & date:

- 1. _____
- 2.
- 4. During the past academic year, I completed blocks of readings and/or PPT review discussions with an Advisor or PI. □YES or □NO (Check one)

If you responded yes, please provide the name of the faculty member, date, and hours completed.

Graduate Student Signature:	Date:
Faculty Member Signature:	Date:
RCR FOR	RM – YR 3+