## **Application to Conduct Research/Observation at CPE McGill**

Title of Proposal:  Type of Study (e.g., Observational, Behavioural, Clinical):  Principal Investigator/Observer:  Affiliation:  Status (e.g., Professor, Graduate Student):  If student or post-doc, name of supervisor:  Contact Information (address, phone, email):			
		Research funded by:	Unfunded:
		Approved by REB/IRB:	
(Name of Committee & Date)			
Proposed Start Date:			
Signature	 Date		