

University of North Texas Department of Psychology  
Research Participation Pool

Participant Pool Application Form

Researcher Name(s) \_\_\_\_\_

Current Phone number: \_\_\_\_\_

Current e-mail: \_\_\_\_\_

Faculty Supervisor: \_\_\_\_\_

Semester: \_\_\_\_\_

Research Pool Study Name:

\_\_\_\_\_

IRB approval number: \_\_\_\_\_

IRB Expiration Date: \_\_\_\_\_

Previous RP #: \_\_\_\_\_

Number of participants needed (approximately): \_\_\_\_\_

Duration of research participation: \_\_\_\_\_

Is this a multiple session study?    YES            NO