

# Mentor Project Plan Approval

Complete and submit this form with your Scholarly Project Proposal

## SECTION 1

STUDENT: \_\_\_\_\_ Grad Year: \_\_\_\_\_

M2 Scholarly Pathway: \_\_\_\_\_

FACULTY MENTOR: \_\_\_\_\_ Department: \_\_\_\_\_

## SECTION 2

PROJECT TITLE: \_\_\_\_\_

2.A. Do you have **IRB** or **QA/QI Committee** approval for your project?

**YES:** Insert protocol # \_\_\_\_\_ and approval date: \_\_\_\_\_ (if no protocol number, please upload approval communication with this form in Brightspace) *Now skip to section 3*

**NO:** Go to 2.B.

2.B. Is IRB pending?

**YES:** Insert the protocol # \_\_\_\_\_ *Now skip to section 3*

**NO:** Go to 2.C.

2.C. Do you *plan* to submit an IRB proposal?

**YES:** When you have done so, *complete another copy of this form*. Upload it to the 2A&B Scholarly Project Proposal assignment folder on Brightspace. Then email your Pathway Coordinator and [pathways@mcw.edu](mailto:pathways@mcw.edu) *Now skip to section 3*

**NO:** go to 2.D.

2.D. Does your project involve the study of **ONLY** animals/animal tissue **or** other non-human material (i.e. cell culture, E-coli, chemical synthesis, etc)?

**YES:** Advance to section 3

**NO:** Your project proposal must go to the Student-Led Ethics Review Panel. We will send it there, and you will hear from them within one month.

## SECTION 3

**FACULTY MENTOR: Complete this Agreement**

I have met with this student and reviewed the Scholarly Project Proposal accompanying this form. I have agreed to be the mentor for the project outlined above *and will ensure that this work adheres to regulatory guidelines (e.g. Human Subjects Protection, HIPAA)*. I understand that the student's role in this project must represent original work, and demonstrate achievement of each of Glassick's criteria for scholarship. *I believe this student can complete this project by the **end of the M3 year**.*

If I foresee any difficulties with fulfilling the role of mentor during this student's participation in the program, I will contact the Scholarly Activities Director at [pathways@mcw.edu](mailto:pathways@mcw.edu).

Mentor Signature \_\_\_\_\_ Date \_\_\_\_\_

*This form must be signed; photos of signed paper documents or SecureSign PDFs are accepted in Brightspace.*

***Completed forms must be uploaded with scholarly project proposal form in Brightspace.***