Faculty of Health - Psychology

# Psychology Participant Pool

# Student’s Participation Credit Form

This form must be completed by the researcher and given to the participant. The participant should accumulate all of his or her participation forms, staple them together, and lodge them in the Psychology slot of the Faculty Assignment Box (see below).

**I certify that:**

Student Name

Student Number
*(Record the student number on THE participation SUMMARY FORM)*

 **participated in the research entitled:**

Project Title

**which was conducted by:**

Researcher(s) .

**The participant was engaged in the research for:**

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Credit (Circle) |  | 1 |  | 2 |  | 3 |  | 4 |  | 5 | (Hours) |

Signed (Researcher)

Date

Please staple and post your collected forms in the “Psychology” slot of the Faculty Assignment Box opposite H247.