# RESEARCH ADMINISTRATION PROCESS MANUAL ACKNOWLEDGEMENT

*(Manual - Version 1.0)*

## Contact Information

<table>
<thead>
<tr>
<th>Name</th>
<th>Phone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employee ID</td>
<td>Alternate Phone Number</td>
</tr>
<tr>
<td>(if applicable)</td>
<td>Number</td>
</tr>
<tr>
<td>Entity Affiliation(s)</td>
<td>Email</td>
</tr>
</tbody>
</table>

## Research Role(s)

List the role in which you are conducting research at THR (i.e., Principal Investigator, Study Coordinator, Data Analyst, Regulatory Specialist, etc.)

## Acknowledgement of Receipt

By signing this form, you acknowledge your receipt of the Research Administration Process Manual. You acknowledge you have read and understand the manual and will follow the processes as they have been described, unless otherwise instructed by Research Administration staff.

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**Employee Signature**  
**Date**

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**RA Representative Signature**  
**Date**

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*To be signed annually and as needed based on changes/addition to manual or as the result of an audit or as part of a corrective action plan*