Research Project Submission SIP listserv/website

SUBMISSION CHECKLIST Date of Submission:

A.Research Team

	At least one member must be a SIP member or have a letter of support from a SIP member		
1. Name of Principle (Student) Investigator: Karen Suyemoto, PhD McCormack Hall, 041, 00335 Address: 100 Morrissey Blvd. Boston, MA 02125-3393 Phone #: (617) 287-6370 Email Address: Karen, Suyemoto@UMB.edu			
Boston, MA 02125-3393			
Phone	#:(617) 22	87-6370	Email Address: Karen, Suyemoto@UMB, edu
Tribal A	Affiliation:	A I //A	SIP MEMBER: Yes or No
2. Name of other research team member (or Student advisor): Tahirah Abdullah, Plance Comack Hall, 04,00274 Address: 100 Morriss y Blva:			
Addres	s: 100 MC	MA 02125.	3393 The Market Own ode
Phone	#: 617) 2:	87-7026	Email Address: Tahirah. Abdullah@UMB. edu
Tribal A	Affiliation:	NA	SIP MEMBER:Yes orNo
If PI does not have tribal affiliation please respond below and indicate the Native member or			
consultant of your project.			
Name: Claric Moods, PhD Ouinn Adminstration, 03,0061A Address: 100 Morrissey Blvd. Boston, MA 02125-3393			
Phone #: (617) 287-5600 Email Address: Cedvic. W 0005@ UMB, edu			
Tribal Affiliation: Lumber Tribe of North SIP MEMBER Yes orNo			
B. FORMS (Checklist- Please be sure these are attached. Incomplete submissions will not be reviewed)			
1. IRB Application Forms			
2. NRB Approval Letter with Approval Number			
3. Research Proposal including Data			
4. Dissemination Plan			
5. Letter from Research Team that they will submit a publishable summary of findings to the Journal of Indigenous Research for publication.			
6.	TRIBAL IRB	if needed.	