**Attachment G: Record of Test Subject Participation
Human Subject Support for the Division of Safety Research (DSR)**

**Account Number:**

|  |  |  |
| --- | --- | --- |
| Subject Name:  | Can#:  |   |
| Date:  |   |   |
| Protocol Number:  |  |
|  |  |  |
| **Testing Session Experiment** | **Start Time** | **End Time** | **Total time (hours)****Note: round up to 20-minute increments** | **Reimbursement****($30/hour)** |
| Study 1 |  |  |  |  |
| Study 2 |  |  |  |  |
|  | **Total Due:** |  |
|  |  |  |
|   |  |  |
| Participant Signature/ Date |  |  |
|  |  |  |

Name and Address