**Attachment I: Record of Test Subject Participation**

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

|  |  |  |
| --- | --- | --- |
|  Subject Name:  | Can#:  |   |
|  Subject ID: |   |   |
|  Date:  |   |   |
| Protocol Number:  |  |
|  |  |  |
| **Testing Session Experiment** | **Test Completed** | **Total time (hours)****Note: round up to 20-minute increments** | **Reimbursement****($30/hour)** |
| Study 3 Experiment |  |  |  |
|  | **Total Due:** |  |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |
| NIOSH Staff Signature/ Date  |  |  |
| Participant Signature/ Date |  |  |