

Attachment I: Record of Test Subject Participation

Record of Test Subject Participation

Human Subject Support for the Division of Safety Research (DSR)

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|------------------|-------|
| 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