

**NAMES AND QUALIFICATIONS OF PROPOSED MEMBERS
OF THE PROJECT REVIEW PANEL**

MEMORANDUM

TO: IRB Chairperson

FROM:

DATE:

SUBJECT: Project Panel for Review of the _____
(title of project)

I wish to propose the following people for service on the Project Panel for review of the proposed above study:

1. IRB Chairperson:
2. EAMC Pharmacy Director:
3. EAMC Vice President:
4. Physician: _____ Qualifications: _____
5. Physician: _____ Qualifications: _____

The meeting is planned for _____ *****

Signature of Chairperson, IRB

Approved ()

Not Approved ()

Send this letter Via email to IRB@eamc.org or mail to _____