

## Forensic Anthropology Center REQUEST FOR DESTRUCTIVE SAMPLING FORM



Name		
Department/Institution		
Address		
City/State		Zip Code
e-mail		Telephone
Graduate Student:Yes*	No	
of the student to conduct destruction.  Please address all of the inquiries	tive sampling, including tra below. You may also inclu- nust still be filled. Students	sor letter includes a discussion of the ability ining and other experience.  de a grant proposal or dissertation are required to submit a proposal that has
1. State the purpose and sci	entific merit of the propos	ed research.
·		eted. For instance, specify the portion and n for blood and quantity in milliliters, or the

specific part and weight of bone to be removed.

Approved by: Director

3.	Justify why these tissues are critical for the proposed research. Can non-osseous or non-human materials be used in lieu of human samples?
4.	Provide specific protocols that address how the samples will be collected.
5.	Justify why this sampling protocol is the least intrusive method possible.

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6.	Provide evidence of your experience and competence with this protocol.
7.	Explain why FAC collections must be used. Are other collections also being utilized? If so, which ones?
8.	If the project is molecular, list what gene(s) will be sequenced.

9. Is IRB approval required from your institution? If so, has approval been appropriate documentation.	granted? Provide
10. Add any other information that you feel is pertinent to this request.	
	Data
Signature	Date

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