## The College of Idaho Responsible Conduct of Research Training Certification



Name of Undergraduate Student:	Student ID <sup>1</sup> #:	
Term research started (F,W/SP,SU, year):	_	
PI Name:		
NSF Grant Number:		
Title:		
Training completion date:		
Certification of RCR training at The Colle	ege of Idaho:	
(check items completed; use "comments" area to explain any sprequirements (e.g., videos, online tutorials (list URL); mark any not		
Modules at <a href="https://www.citiprogram.org/">https://www.citiprogram.org/</a>	(Rec	quired)
Human subjects training (http://phrp.nihtraining.com/users/login.r	ohp)	NA
Lab safety training (specify:	)	NA
Animal welfare training (specify:	)	NA
Other training (specify:	)	NA
Comments:		
I certify that I have completed the RCR training modules at www.resp the opportunity to discuss their content with my faculty mentor. I have as required by my research project.		
Undergraduate student signature:	Date:	
PI Signature:	Date:	
I certify that the above training has been completed, consistent with consistent with consistent with consistent with consistent with consistent project with the discipline, research project with the project with the discipline of the discipline of the with the discipline of the di		
ORIGINAL CERTIFICATION FORM WITH SIGNATURE Grants Office, Sterry 203		
(document naming convention: CofI_RCRCertForm	_StudentName_Da	ue)

<sup>&</sup>lt;sup>1</sup> Student ID # is the 1<sup>st</sup> six of the last seven digits on the ID card: 25556001234563 is ID# 123456.