**Request Form for Research Badges to Banner UMC Facilities**

*Please complete the information below.*

|  |  |
| --- | --- |
|  |  |
| UA research center/area: | *e.g., Sarver Heart Center, orthopaedic surgery* |
| Research manager or supervisor: |  |
| Research manager email address and phone number: |  |
|  |  |
| BUMC campus you will be accessing: | *e.g., Tucson Campus, South Campus* |
| Patient care areas you will be accessing: | *e.g., 2OPC, D6W, ED, OR* |
| Brief rationale for accessing areas: | *e.g., recruitment, consenting, protocol activities, follow-up* |
| UA Protocol # (IRB #) of IRB-approved study: | *This will be used to verify the list of study personnel on F107 (Verification of Training Form)* |

Please list the research manager and/or staff members who need badges below. Use names as they are listed in the [UA Phonebook](http://directory.arizona.edu/phonebook). Research role will appear on badge.

|  |  |
| --- | --- |
| Staff Name | Research Role |
| *e.g., Mariah Carey, RN* | *e.g., Research Nurse* |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

*If additional space is needed, attach a second form with list of names and roles.*