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| --- | --- |
| Requires 2 business days to process from approval.**4 p.m. CUTOFF**  | **This selection mails checks directly to subjects.** |
| **HSIP Form Completion Instructions** | **Principal Investigator:** | Enter the PI’s uniqname. The PI you enter here must match the PI listed in the eResearch system for this study. You may change the value in the phone number field if it’s incorrect. |
| **Approver:** | Enter the approver’s uniqname. You may also want to enter alternate approvers as well. |
| **Study Information:** | Enter the HUM Number. The **IRB Status, HUM Title, Approval Date, Expiration Date**, and **Tier** fields should auto-populate based on the information associated with the **HUM Number** in the eResearch system.  |
| **Custodian:** | The PI will automatically default here. To reduce the PI’s e-mails, type over with your uniqname. It does not matter who is listed here as the custodian because the custodian does not take physical possession of the checks.  |
| **Distribute To:** | Subject |
| **Total Incentive Amount:** | This is the total amount you plan to spend on all subject in this request.  |
| **Incentive Type:**  | Check  |
| **Payment Type Details:** |  This is the number of cards you are requesting and the card amount. Add rows, if necessary, to request various card amounts. (Card value must be at least $10.00) |
| **Delivery Type:**  | Mail  |
| **Accounting Details:**  | Account Type – IncentiveEnter the shortcode to be charged. |
| **Additional Instructions** | Enter subject details on the Check Information Template, andattach the card template to the actual HSIP request form by clicking on “Add Attachment”.  |
| Template must be received by our office by 4 p.m. for next day checks |
| **Reconciliation Documentation Forms Required** | Documentation Requirement Fulfilled with the Check Information Template |