**Instructions:** **Part I is to be completed and approved by the time of the IPHS 698 registration. This form should be completed in consultation with your ILE Advisor.**

1. **GENERAL INFORMATION**
2. **Date:** Click here to enter a date. **2. Submission Type:**  Initial Revised
3. **a) Student’s Name:****b) E-mail Address:**

**c) UIN:****d) Expected ILE Term:**

**e) Division/Unit:** Choose an item **f) Concentration:**

1. **a) ILE Advisor:**

**b) E-mail Address:**

1. **Faculty Advisor/Mentor (if different from #4):**

**6. Joint Program (if applicable):** **DMD/MPH** **DVM/MPH**  **MD/MPH**

**JD/MPH** **MBA/MPH**

**MSW/MPH** **MUPP/MPH**

1. **Research Project Contact Person (if applicable):**

**Telephone Number**

**FAX Number:**

**Email:**

**IRB Approval:**

a)Is UIC IRB Approval Necessary? Yes No (If yes, answer b, c, and d)

b) Does this project have UIC IRB approval? Yes No

c) Time period of UIC IRB approval: / / to / /

d) UIC IRB reference #:

1. **ILE PROJECT DESIGN PART I**

*(Use the following organization to present your study plan and take whatever space is necessary to completely respond to each section. Complete in 12-point font only. Please submit electronic copies in MS Word)*

1. **ILE Product:** *(Please refer to the Competency Maps located in the* [*ILE Handbook*](https://publichealth.uic.edu/integrative-learning-experience-ile-iphs-698/)*)*
2. **Proposed ILE Project Title:**

*(Propose a possible title that reflects the likely scope of your project. Although we understand that it might need to be edited as your ILE evolves, your proposed title should be sufficiently targeted.)*

**3. Brief Description of Product:** *(In 100-200 words, provide* a brief topical context and description of the rationale for the study including references. *Briefly state the project objectives, the key study question(s)/problem to be addressed, and the type of final product (e.g., program evaluation, management/strategic plan, a research paper, or an implementation of a new intervention)).*

1. **Brief Description of Methods:** *(Briefly describe the qualitative and/or quantitative data sources and data collection methods for the project. The analytic methods should be compatible with the type of data and study questions. For analytic plans, identify the qualitative and/or quantitative analysis methods that will be used for the study. If you are conducting a qualitative study, how will you analyze the qualitative data compiled? If you are conducting a quantitative data analysis, what analytic methods will you use?)*

1. **Initial APPROVAL**

Click or tap to enter a date.

Student Signature Date

**Students: Please do not write below this line**

OFFICE USE ONLY

Reviewed by ILE Advisor:       Click or tap to enter a date.

First and Last Name Date

Comments: