



INSTRUMENT VALIDATION SERVICE FORM

Thesis Title:

Proponent(s)/Author(s):

Research Design/Methodology:

Kind of Instrument

- Researcher-made
- Adapted from other studies (Used by published studies with alterations/editing)
- Standardized (Used by published studies without any alteration/editing)

Corresponding Author/Point Person

Name	Academic Department / Academic Program
-------------	---

Email Address	Contact Number
----------------------	-----------------------

As much as possible, the corresponding author shall be the one to coordinate with RPD throughout the instrument validation service as well as the person who would answer the Instrument Validation Google Form. Avoid changing the point person upon submission of this form.

Requirement Checklist: *Kindly accomplish/attach the following forms/requirements before submitting this form to the RPD*

- This form (SR03) with adviser's signature
- Research Instrument (Questionnaire/Interview Protocol)
- Research Manuscript

We hereby certify that the above information is complete, true, and correct to the best of our ability.

Corresponding Author Signature Over Printed Name and Date	Research Adviser Signature Over Printed Name and Date
---	---

Do not answer beyond this point. For RPD use only

RPD Approval

Validator's Approval

Assigned Validator: _____

Validator's Signature: _____

Assigned by/Date: _____

Approval Date: _____