

**CALIFORNIA STATE UNIVERSITY, FULLERTON  
AUXILIARY SERVICES CORPORATION**

**Waiver of Privacy for Participant Incentive Payments in excess of \$600**

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<b>Project Title</b>	<b>PI Name</b>	<b>Date</b>
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I understand that I will no longer be an anonymous participant in this study because I have received \$600 or more in a calendar year for human subject/incentive payments by the CSUF Auxiliary Services Corporation. I also understand that my personal information, including my name, address, and social security number will be released to the Accounting Office for the purpose of payment to me and for tax reporting.

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**Participant's Name (please print legibly):**

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**Signature of Participant**

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**Date**