**Name, email and phone number of Primary Investigator:**

Name: Click or tap here to enter text. Date: Click or tap to enter a date.

Email: Click or tap here to enter text. Phone: Click or tap here to enter text.

**Please briefly describe the purpose of your research project or proposal (e.g. research questions):**

Click or tap here to enter text.

**Please briefly describe the defining characteristics of your subjects (e.g. age range, level of education, major, profession, etc.):**

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**For DIT Orders:**

Defining Issues Test

**Please indicate which measure(s) you wish to use in your research:**

DIT  DIT1 scoring manual only  DIT2  bDIT

**How will you administer the DIT?**

Paper/Pencil Quantity: \_\_\_\_\_\_\_\_\_\_\_\_

**Or**

Online:

Qualtrics (preferred)  Other survey platform: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Not sure yet

**For ICM Orders/Inquiries:**

Intermediate Concepts Measure

Use Existing ICM in one of these available contexts:

Adolescent  Army

Develop an ICM in a new context: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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