

**Research Paper Approval**  
The Graduate School  
Southern Illinois University

3/29/13

*Date of Approval*

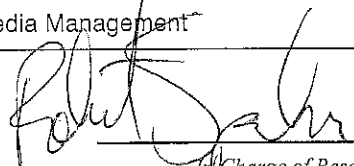
I hereby recommend that the research paper prepared under my supervision by  
Adithi Ravishankar

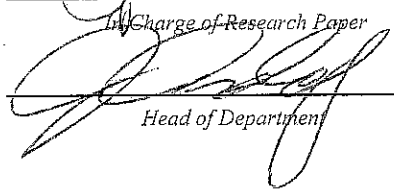
*Student Name*

Entitled

Setting the Stage For An Academic Playground- A Study About the Implication of Adopting  
Social Media Within the Academic Sector and Introducing the Idea of Developing A Socio-  
Academic Networking Platform to Enhance Learning Experiences

be accepted in partial fulfillment of the requirements for the  
Master of Science - Professional Media and Media Management

  
*In Charge of Research Paper*

  
*Head of Department*

*AM* *(N-718)*

**ORAL DEFENSE**  
**GRADUATE SCHOOL**  
**SOUTHERN ILLINOIS UNIVERSITY**

An evaluation of Eligibility for the MS degree in Prof Media & Media Mgmt as reported by members of the final examination committee.

Adithi Ravishankar 850904127  

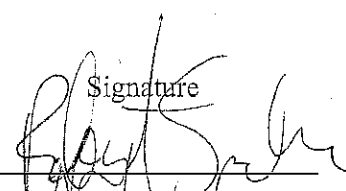
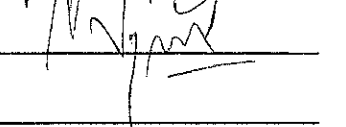

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Name of Student ID Number

1. Evaluation of Oral Defense of:  Dissertation  
 Thesis  
 Research Report

Title: Setting the Stage For An Academic Playground: A Study About the Implication of Adopting Social Media Within the Academic Sector and Introducing the Idea of

2. Members of the examining committee and their evaluation of the oral defense:


Recommended		Name (print or type)	Signature	Check if Chair or Co-Chair
Yes	No			
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>Robert Spahr</u>		<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>Dr. Narayanan Iyer</u>		<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>
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<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>

DATE 3/29/13

HSC Approval letter (exempt)

To: Adithi Ravishankar

From: Jane L. Swanson, Ph.D.  
Chair, Human Subjects Committee



Date: March 5, 2013

Subject: *Social Networking developed for enhancing educational experience*

Protocol Number: 12509

The revisions to the above referenced study have been approved by the SIUC Human Subjects Committee. The study is determined to be exempt according to 45 CFR 46.101(b)2. This approval does not have an expiration date; however, any future modifications to your protocol must be submitted to the Committee for review and approval prior to their implementation.

Your Form A approval is enclosed.

This institution has an Assurance on file with the USDHHS Office of Human Research Protection. The Assurance number is FWA00005334.

JS:kr

Cc: Robert Spahr

SIUC HSC FORM A

REQUEST FOR APPROVAL TO CONDUCT RESEARCH ACTIVITIES INVOLVING HUMAN SUBJECTS

CERTIFICATION STATEMENT

By making this application, I certify that I have read and understand the University's policies and procedures governing research activities involving human subjects. I agree to comply with the letter and spirit of those policies. I acknowledge my obligation to:

- 1. Accept responsibility for the research described, including work by students under my direction.
2. Obtain written approval from the Human Subjects Committee of any changes from the originally approved protocol BEFORE implementing those changes.
3. Retain signed consent forms in a secure location separate from the data for at least three years after the completion of the research.
4. Immediately report any adverse effects of the study on the subjects to the Chairperson of the Human Subjects Committee, SIUC, Carbondale, Illinois - 618-453-4533 and to the Director of the Office of Sponsored Projects Administration, SIUC.
Phone 618-453-4531. E-mail: siuhsc@siu.edu

Project Title

Social Networking developed for enhancing educational experience

RESEARCH ADVISOR'S ASSURANCE: My signature on this application certifies that the student is knowledgeable about the regulations and policies governing research with human subjects. I am aware of my obligations stated on Form A and will be available to supervise the research. When on sabbatical leave or vacation, I will arrange for an alternate faculty sponsor to assume responsibility during my absence. I will advise the Human Subjects Committee by letter of such arrangements.

[Handwritten signature]

11/15/12

Researcher(s) or Project Director(s) ADITHI RAVISHANKAR
Please print or type name below signature.

Date

[Handwritten signature: Robert Spahr]

11/15/12
Date

Researcher's Advisor (required for all student projects)
Please print or type name below signature.

The request submitted by the above-named researcher(s) was approved by the SIUC Human Subjects Committee.

This approval is valid for one year from the review date. Unless the protocol is approved as Category I (exempt), researchers must request an extension to continue the research after that date. This approval form must be included in all Master's theses/research papers and Doctoral dissertations involving human subjects that are submitted to the Graduate School.

[Handwritten signature: Janet Swanson]

3-4-13

Chairperson, Southern Illinois University Human Subjects Committee

Date