West Virginia University

Use of Controlled Substances in Research

Authorized Users Signature Log

DEA Registrant (print): ______ DEA Registration #: _____

Controlled	Schedule	Authorized User's	Start of Authorized Use		Termination of Authorized Use	
Substance	(I, II, III, IV, V)	Name (print)	Authorized User Signature/Date	DEA Registrant Signature/Date	Authorized User Signature/Date	DEA Registrant Signature/Date

Controlled Substance	Schedule (I, II, III, IV, V)	Authorized User's Name (print)	Start of Authorized Use		Termination of Authorized Use	
			Authorized User Signature/Date	DEA Registrant Signature/Date	Authorized User Signature/Date	DEA Registrant Signature/Date

Keep in Controlled Substance Notebook

Retain for two years after last documented signature.