



Research Closure Form

Instructions: Federal regulation requires that research protocols be reviewed by the IRB on a regular basis for continued approval. This form must be submitted one month prior to the IRB approval expiration date. No research may be conducted past the expiration date unless the study has been reviewed and renewed by the IRB.

Section I: General Study Information

Title of Study	
IRB Protocol #	
Approval Date:	
Name of Primary Investigator (PI)	
PI Email	
Name of Co-Investigator (if applicable)	
Co-Investigator Email	

Section II: Research Status

How many total participants enrolled in the study?	
How many total participants withdrew from the study?	
How many total participants' data was college for the study?	

Since the last IRB review, have any unanticipated problems or adverse events that have not been reported to the IRB? Yes No

If yes, please summarize the events:

Since the last IRB review, has any relevant information been revealed that may have altered the level of risk to participants? Yes No

If yes, please explain:

Section III: Research Progress

Please provide a brief summary of the study results (you may attach a final report, if available):

Section IV: Certification

I hereby certify that the approved research protocol is complete and should be closed. I understand that closure of the research protocol means that no further data collection, follow-up with participants, coding of data, data analysis, and manuscript preparation that requires personally identifiable information may be conducted. I agree to retain research materials for at least 3 years after the closure of the research project and acknowledge that these documents may be subject to review by the IRB at any time, if deemed necessary.

PI Name	
PI Signature	
Date	
Supervisor Name (if applicable)	
Supervisor Signature (if applicable)	
Date	

Completed IRB Forms and supporting documentation should be submitted to (OIRE@nwfsc.edu) in one communication.