Brenau University
1878

Institutional Review Board

Please complete and submit this form to the IRB Office upon completion of data collection for the approved research project.

If you are unable to complete your project after 1 year from approval date, a Continuation Request Form will be required to proceed with your research. A Continuation Request Form can be obtained from the IRB Office or the IRB web page on the Brenau Intranet. Please upload this completed document in a new package (-2,-3,-4) to the completed IRBNet project.

Date: _____

Principal Investigator: _____

Title of Study: _____

IRBNet Project number: _____

Date of completion: _____

How many individuals ended up participating in this study? _____

Were there any problems / adverse events that occurred during this study? ____ Yes ____ No

If Yes, please describe the problem(s) / adverse event(s) that occurred.

_____

_____

_____

Did you report this Adverse Event? ___Yes ____No

If yes, when did it occur (date)? _____

Who did you report it to? _____