### IRB FINAL REPORT FORM

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| **SECTION A: General Information** |
| 1. | IRB Approval Number: |  |
| 2. | Project Title: |  |
| 3. | Principal Investigator(s): |  |
| 4. | Co-Principal Investigator(s): |  |
| **SECTION B: Project Information** |
| 1. | Date Project Closed:  |  |
| 2. | Reason for Closing Project: |
|  | [ ]  Completed | [ ]  Not Funded |
|  | [ ]  Discontinued  | [ ]  Research never started | [ ]  Other |
|  | If discontinued, never started, or other, please explain below: |

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| 3. | Total number of participants enrolled in this study:  |

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| --- | --- |
| 4. | Please provide one of the following as a result of your research: |
|  | [ ]  Publication, abstract, related papers, or summary attached |
|  | [ ]  Summarize below: |

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| **SECTION C: Adverse/Unanticipated Events** |
| 1. | Provide a summary of any unanticipated problems and/or adverse events that occurred. |

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| 2. | If an unanticipated problem or adverse event occurred, was an **Incident Report Form** submitted to the RCO?  |
|  | [ ]  NA  | [ ]  YES | [ ]  NO |
| 3. | Did you receive any complaints about the research?  |
|  | [ ] YES | [ ]  NO  |
|  | If YES, describe the complaint and how it was handled. |

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| **SECTION D: Data Storage** |
| 1. | Where are your project files being stored? Indicate specific locations. *(Note: A copy must be stored on COCC’s campus.)* Data must be kept for at least three years after project is completed. |

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| **SECTION E: SIGNATURES**  |
| *By signing this form, the Principal Investigator attests that he/she has read the information provided as a final report for the IRB and Research Compliance Office.* |
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|  |  |  |  |  |
| **Principal Investigator (PRINT)** |  | **Signature** |  | **Date** |

**This page, signed by all applicable investigators, may be submitted to the Research Compliance Office as a scanned PDF to jdowning@cocc.edu:**