# Shepherd University Institutional Review Board Final Research Closure Report

## IRB Permit Number:

**Principal Investigator:**

**Faculty Sponsor (if any):**

**Title of Research Project:**

**Funding Source (if any):**

**IRB Approval Date:**

**Project Completion Date:**

This final report and closure form officially completes the IRB research project requirements for the above named project. Also, this form must be completed by researchers with human participant research in progress if the researcher leaves Shepherd University prior to completing the research. **Research projects for which students are the principal investigators require the supervising faculty member to ensure this closure report is filed in a timely manner.**

Please complete this form and return it to the IRB Chair at the completion of your research. Attach copies of any results, reports, or abstracts of articles relevant to this project.

1. Were any substantive changes made to the approved protocol? If so, what were they?
2. Did you file a Change of Protocol form and receive IRB approval for the change? If not, why not?
3. How many human subjects participated in the research?
4. Do you have signed consent forms for all participants? If not, why not?
5. Did you follow your data management plan to include closeout procedures? If not, what changes were made and what accommodations have been made to protect the data?
6. Did any unexpected or adverse reactions occur during this research? If so, what were they?
7. Did you file an Incident Report with the IRB for these unexpected problems? If not, why not?
8. In conclusion, please briefly explain (if other reports included do not satisfy this question) what important knowledge this research contributed to the field and what benefits were derived that justified the use of human participants?

Principal Investigator Signature: Date

Faculty Sponsor (if applicable): Date

*For IRB Use*

IRB Approved Need More Info Date