**Algonquin College Research Ethics Board - Annual Research Renewal Form**

Researchers must use this form for any research study involving human subjects that extends beyond one year in duration. Researchers conducting multi-site studies should check with other institutional REBs in order to ensure their annual renewal requirements are met at each participating institution. This form must be completed and sent by email, with any attachments, to REBAdmin@algonquincollege.com.

| **Protocol #:** | *[As indicated on original Certificate of Approval]* |
| --- | --- |
| **Project Title:** | *[As indicated on original Certificate of Approval]* |
| **Principal Investigator:** | *[As indicated on original Certificate of Approval]* |
| **Original Approval Date:** | *[As indicated on original Certificate of Approval]* |

**1. Please indicate the reason for this request:**

(a) Continuing multi-year project as indicated in original application form

(b) Project is continuing beyond the original expected completion date

If (b) please explain why the project has not yet completed:

**2. Is this project funded or financially sponsored?**

Yes  No

If Yes, please provide details of the funding:

**3. Will you be recruiting participants beyond the renewal date?**

Yes  No

If Yes, please attach ALL Information Letters and Consent Forms that will be used to recruit participants to this form.

**4. Have there been any changes to the research methods, procedures, funding/sponsorship, recruitment, data collection, or research questions since first receiving approval?**

Yes  No

If Yes, please provide a detailed description of the changes:

**NOTE: Revised research plans cannot be pursued until approved by the Algonquin College REB.**

**5. Have any ethical concerns or unforeseen risks arisen since receiving your original approval?**

Yes  No

If Yes, please explaining ALL concerns or unforeseen risks in detail:

**6. Have there been any changes in the research personnel in the previous year of the project?**

Yes  No

If Yes, please list all new personnel and affiliations:

**7. Have any participants withdrawn from the study in the past year?**

Yes  No

If Yes, please describe the circumstances surrounding withdrawals:

**8. Please indicate the expected completion date.**

**Signature of Principal Investigator Date**