**Algonquin College Research Ethics Board – Project Completion Form**

Researchers must use this form upon project completion. Researchers conducting multi-site studies should check with other institutional REBs in order to ensure their request for project completion form requirements have been met. This form must be completed and sent by email, with any required 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 provide a brief description of your study results.**

**2. Please answer the following:**

1. How many subjects were proposed for the study? \_\_\_\_\_\_\_\_\_\_\_\_
2. How many participants enrolled? \_\_\_\_\_\_\_\_\_\_\_\_
3. How many participants completed the study? \_\_\_\_\_\_\_\_\_\_\_\_
4. How many participants withdrew after enrollment? \_\_\_\_\_\_\_\_\_\_\_\_

Please describe the circumstances for withdrawing:

**3. Did any ethical concerns arise or have any participants experienced adverse events as a result of their participation in the study?**

[ ]  Yes [ ]  No

If Yes, please provide details:

**4. Please give the reason(s) for closing the study (ex: end of project).**

**5. Did any unforeseen circumstances arise during the study?**

[ ]  Yes [ ]  No

If Yes, please provide details:

**My signature certifies that the above information is correct and that no additional procedures will be conducted at Algonquin College without ethics approval. Proper safeguards to ensure confidentiality and security of data will be maintained until all data is destroyed.**

**Signature of Principal Investigator Date**