

*Office Use Only:*

**IRB Protocol #:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date Received**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Circle one: Exempt Expedited

Research Integrity & Compliance
Institutional Review Board
**office:** Research 1, 1735 NDSU Research Park Drive, Fargo, ND 58102
**mail:** NDSU Dept. #4000, PO Box 6050, Fargo, ND 58108-6050
**p:** 701.231.8995 **f:** 701.231.8098 **e:** ndsu.irb@ndsu.edu **w:** [www.ndsu.edu/irb](file:///C%3A%5CUsers%5Ckristy.shirley%5CAppData%5CLocal%5CMicrosoft%5CWindows%5CTemporary%20Internet%20Files%5CContent.Outlook%5CDownloads%5Cwww.ndsu.edu%5Cirb)

IRB Protocol Termination Report

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| --- |
| Protocol #:        |
| Title of Project:       |
| Principal Investigator:       | Co-Investigator:       |
| Department:       | Department:       |
| Email Address:       | Email Address:       |
| Phone:       | Phone:       |

*This form is submitted for a closed or terminated research project that was previously approved by the NDSU IRB. This form should be completed after all recruitment, research interventions, data collection has been completed and all research data has been de-identified.*

[ ]  **Project completed**: Summarize the results of the research (300 words or less):

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[ ]  **Project has not been/will not be completed**: No further work will proceed under this protocol for the following reason(s):

 [ ]  Research will continue under another protocol title(s)/number(s).

 List new protocol #s:

[ ]  **Principal investigator has left NDSU**. Subject consent forms must be retained for three (3) years following the close of the study. Existing subject consent forms are filed at the following location(s):

[ ]  Other:

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**SUBMISSION INSTRUCTIONS:**

The Principal Investigator must submit via official NDSU Email.