



UNITED TRIBES
 TECHNICAL COLLEGE
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**UTTC Institutional Review Board (IRB) for Protection of Human Subjects
 Protocol Closeout Form**

Congratulations on completing your study! Please complete and submit this form to the IRB prior to the expiration date in order to closeout your research project.

Project Title: _____

IRB Protocol # _____ Closeout Date: _____

Principal Investigator (PI): _____

Email: _____ Phone: _____

Co-Investigator (if applicable) _____

Email: _____ Phone: _____

UTTC Sponsor (if applicable) _____

Protocol Information:

How many subjects consented or enrolled in the study? _____

How many subjects completed? _____

How many subjects were withdrawn from the study? _____

Reasons for withdrawal if applicable:

Were there any unanticipated problems, serious adverse events, or protocol deviations not previously reported?

Yes No

If yes, please provide an explanation:

Were there any changes or amendments to the protocol, consent form, risk/benefit, unanticipated problems, study staff or any other study related changes that were not previously reported to the UTTC IRB??

Yes No

If yes, please provide an explanation:

Protocol Closeout Assurances:

- Final report, summary of findings, and/or de-identified data is attached.
- I will notify the UTTC IRB of any presentations, poster session, or publications I do or participate in that are derived from this research project.
- Research was not started or was not fully carried out.

If the research was not started or fully carried out, please provide an explanation:

I certify that the statements herein are accurate and complete.

Signature of Principal Investigator

Date

Email form to irb@uttc.edu