**Eastern Illinois University**

**Institutional Review Board (IRB)**

**COMPLETION OF RESEARCH ACTIVITIES**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| IRB Number: | |  | | | | | |
| Title of Project: | |  | | | | | |
| **Investigator(s)** | | | | | | | |
| Principal Investigator: | |  | | Status: | | Choose an item. | |
| Email: | |  | | Phone: |  | | |
| Department or Unit: | |  | | | | | |
| Co-Investigator: | |  | | Status: | Choose an item. | | |
| Email: | |  | | Phone: |  | | |
| Department or Unit: | |  | | | | | |
| If there is more than one Co-Investigator, complete the [Application for IRB Review Addendum: Additional Co-Investigators](https://www.eiu.edu/grants/Application%20for%20IRB%20Review%20Addendum%20Additional%20Co-Investigators.docx) and include it with this submission. | | | | | | | |
| **Project Information:** | | | | | | | |
| Project begin date: |  | | Project end date: | |  | | |
| Total number of subjects enrolled in the study: | | | | | | |  |
| Number of subjects who formally voluntarily withdrew from study at their own request: | | | | | | |  |
| Number of subjects who dropped out or did not finish the study: | | | | | | |  |
| Please identify any problems the participants may have encountered during the research study. How were the problems handled? | | | | | | | |
|  | | | | | | | |
| **ATTACH A SUMMARY OF THE COMPLETED RESEARCH (AN ABSTRACT IS SUFFICIENT).** | | | | | | | |

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Principal Investigator’s Signature Date

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Faculty or EAP Staff Sponsor’s Signature Date

(required when the PI is a student)

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IRB Chair Signature Date