

SECTION 1 – GENERAL INFORMATION	
1.1 Notice submission date:	
1.2 Short title of project (if applicable):	
1.3 Full title of project:	
1.4 File number:	
1.5 Principal investigator:	
Facility:	
Mailing address:	
Telephone:	
Email:	
1.6 Name(s) of co-investigators	
1.6 Person supervising the research (if the research is conducted by a student or postdoctoral fellow):	
Facility:	
Telephone:	
Email:	

SECTION 2 - INFORMATION PERTAINING TO THE RESEARCH PROJECT

2.1 Please indicate the project's final initial approval date:

2.2 Please indicate the project's planned end date:

2.1 Has the research project started (taken place)?

- No
 Yes

If not, please explain:

2.4 If the research project required the recruitment of participants:

2.2.1 How many participants did you plan to recruit?

2.2.2 How many participants took part in your research?

2.2.3 If there is a significant difference between 2.2.1 and 2.2.2., please explain.

2.2.4 Did any participants withdraw from the project along the way?

2.5 If the project only involved the review of medical records or archived biological specimens, how many records or specimens were evaluated?

2.6 Did the project end earlier than planned?

No

Yes

If yes, please explain: _____

a) End date:

b) Why?

c) Please describe how participants were informed of the project's early end.

d) Were participants informed of potential risks related to the project's early end (if applicable)?

No

Yes

Not applicable

e) Is a clinical follow-up planned to ensure the safety and well-being of participants (if applicable)?

No

Yes

Not applicable

If yes, please indicate the number and main reason (if known):

2.7 Specific items to report (e.g., recruiting challenges, serious or unexpected side effects, ambiguities, etc.):

SIGNATURE

The signatures attest to the following:

- the information contained in this form was provided in good faith and to the best of your knowledge;
- all researchers involved in the request have reviewed the request and approve of its content;
- you will assume the role and responsibilities that are incumbent upon you throughout the execution of this research project;
- you agree to obtain authorization in advance from the Research Ethics Board for research involving humans before implementing any substantial change made to this research project.

Signature of Principal Investigator

Date

First and last name (please print)

Form completed by: _____

Date

I confirm that I reviewed this ethics approval request, completed by the student researcher or postdoctoral fellow, before it was submitted to the Ethics Board.

Signature of Research Project Supervisor
*(If the principal investigator is a student
or postdoctoral fellow)*

Date

First and last name (please print)