RESEARCH ETHICS BOARD (REB) REPORTING

ANNUAL RENEWAL FORM

**All Yukon College REB approved research projects are valid for one year. As outlined in the Tri-Council Policy Statement (TCPS2), continuing research ethics review shall consist of minimally an annual status report for project renewal or an end of study report for project closure.**

**Instructions:**

1. Please complete this form electronically and submit as SINGLE document (.doc or .pdf) to ethics@yukoncollege.yk.ca
2. Do not leave any question blank. If a question is not applicable to your proposal, please enter N/A in the response.

*\*Please note that your form will be returned to you for completion if all of the above criteria are not met.*

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| Applicant Information  |
| **REB Reference Number:** Click here to enter text.  |
| **Title of Study:** Click here to enter text.  |
| **Principal Investigator:** Click here to enter text.  |
| **Position at Yukon College:** Choose an item.**If Adjunct or Other (list position and home institution):** Click here to enter text. |
| **Faculty:** Click here to enter text. | **Department:** Click here to enter text. |
| **Email address:** Click here to enter text. | **Phone number:** Click here to enter text. |
| **Date of initial REB approval:** Click here to enter a date.  |
| **Date(s) of past renewals or amendments (if applicable):** Click here to enter a date. |
| **Funding Source(s):** [ ]  Not applicable [ ]  Received from: Click here to enter text.  |
| project Summary  |
| **What is the current status of the study?** Choose an item.If other, please explain: Click here to enter text. |
| **What is the expected closure date of this study?** Click here to enter a date.  |
| **What was the original number of participants to be recruited?** Click here to enter text. |
| **How many participants have completed the study?** Click here to enter text. |
| **How many participants are currently enrolled in the study?** Click here to enter text. |
| **How many additional participants are required for the study?**Click here to enter text. |
| **Have any research participants withdrawn from the study?** [ ]  Yes [ ]  No**If Yes, how many participants withdrew and explain the circumstances**. Click here to enter text. |
| **Have there been any changes to the study (e.g., study design, changes in recruitment material, procedures, consent process, addition of participants) that have not been previously reviewed and approved by the REB?** [ ]  Yes [ ]  No**If Yes, please complete and attach an *REB Amendment Form.*** |
| **Have there been any changes to research personnel (e.g., Principal Investigator, Other Investigators or students)?** [ ]  Yes [ ]  No**If Yes, please list the former and/or new personnel and position(s)**. Click here to enter text. |
| **Have there been any unanticipated issues or events with the participation of humans in your project (legal, physical, psychological, social or other) that have not yet been reported to the REB?**[ ]  Yes [ ]  No**If Yes, please explain what happened and what steps were taken to resolve the issue.**Click here to enter text. |
| ACCURACY OF INFORMATION |
| By signing, I certify that I have read and understand [policy AR-03](https://www.yukoncollege.yk.ca/sites/default/files/inline-files/AR-03_Research_Ethics_Policy_-_October_2014_1.pdf) developed by Yukon College for ensuring ethical conduct in research and that I will comply fully with the letter and spirit of this policy, the [Tri-Council Policy Statement 2 (TCPS2](http://www.pre.ethics.gc.ca/eng/policy-politique/initiatives/tcps2-eptc2/Default/)) and any others that may apply. All the information included in this form is, to the best of my knowledge, true; and no necessary information has been knowingly omitted. I further acknowledge my responsibility to report any significant changes in the project, and to obtain written approval for those changes from the Research Ethics Board, prior to implementing those changes. I agree to report any unanticipated issue or event that may increase the level of risk to participants, or has other ethical implications that might affect participants’ welfare.  |
|  |

Click here to enter a date.

Signature of Principal Investigator Date