**FORM 5: RESEARCH STUDY COMPLETION REPORT**

**INSTRUCTIONS:**If you have completed research that involved the collection of data from human participants and received approval from the Seneca Research Ethics Board (REB), it is mandatory to complete and submit this application form to notify the Seneca REB.

This form should be used by both internal and external applicants to inform the REB that the research study being conducted by or with Seneca faculty, staff and/or students has been completed.   
There are 3 parts in this form:

* PART A: General Information
* PART B: Project Information
* PART C: Signature

**Submission Instructions:**   
The Seneca REB only accepts electronic copies of documents. Please complete all 3 parts and submit the full application along with the relevant appendices in electronic format to [REB@senecacollege.ca](mailto:REB@senecacollege.ca). Please print Part C with original signatures, and attach the scanned copy to your submission.   
  
You will receive an email acknowledgement of your submission within 2 business days. This email will notify you whether or not the REB has closed your file.   
  
Please see <http://www.senecacollege.ca/research/ethics-board.html> for submission deadlines and meeting dates.

**PART A: General Information**

|  |  |
| --- | --- |
| Title of Research Project: |  |
| Original Approval date: |  |
| Renewal date (if applicable): |  |
| Study Completion date: |  |
| Principal Investigator: |  |
| Co-Investigator: |  |
| Other Researcher(s): |  |
| E-mail address(es): |  |
| Organization affiliated with (if not Seneca or in addition to Seneca): |  |
| Phone: |  |
| Additional contact information: |  |

**PART B: Project Information**

1. How many research participants were proposed for the study? Please provide your response in the space below.
2. How many research participants were involved for the study? Please provide your response in the space below.
3. Did any research participants actively withdraw from the study?

Yes No

If yes, how many and please describe the circumstances in the space below.

1. How many research participants completed the study?
2. Since receiving the original or renewed ethics approval, have there been any **adverse** or **unanticipated** events?

Yes No

If yes, please describe in the space below.

1. Has data been stored/destroyed as per section 16 in the application form?

Yes No

1. Please provide in the space below the reason for closing the study (i.e., end of study, discontinued, etc.).

**PART C: Signature**

My signature certifies that the above information is correct and that no unapproved procedures were used in the study. Proper safeguards to confidentiality and security of data will be maintained until all data is destroyed as promised.

Principal Investigator’s Signature Name & Title Date