

**University of the Pacific
Institutional Review Board
Final Report**



Investigator:	
Advisor:	
Project Title:	
IRB Protocol #:	
Expiration Date:	

This form must be completed and submitted to indicate that procedures with human subjects are completed. Submit to Research and Graduate Studies with your Thesis/Dissertation Checklist.

Date activities involving human subjects ended on (mm/dd/yy):

Number of subjects seen to date:
Have there been any adverse effects (unanticipated problems) on human subjects? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, please explain:
Have there been any changes in activities or subject groups since the last review period? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, please explain:
Have there been any other problems related to human subjects? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, please explain:

Please note that investigators are required to retain informed consent forms for three years following completion of the research.

Certifications for Final Report

To be Completed by Principal Investigator:

I certify that the research activities involving human subjects were conducted as approved in prior protocols by the IRB; that the project is now complete; and, that any additional activities will be submitted for review by the IRB prior to implementation.

Signed: _____

Date: _____

To be Completed by Faculty Advisor (if student project):

In sponsoring this project, I certify that it has been in compliance with federal and University regulations governing the protection of human subjects, that any continuing activities will also be in compliance, and that any proposed changes in activities will be submitted to the IRB for review prior to implementation.

Signed: _____

Date: _____

To be Completed by IRB Administrator:

Approved

Refer to IRB for Review

Signed: _____

Date: _____

Submit to Research and Graduate Studies with your Thesis/Dissertation Checklist.