

**RESEARCH ETHICS BOARD**

**APPLICATION FOR STUDY TERMINATION**

*An end-of-study report is required as soon as possible from the date of completion or termination of research.*

**PROTOCOL INFORMATION:**

QCH Protocol #:      Last Renewal Approval:       Original Approval:

 YY/MM/DD YY/MM/DD

Principal Investigator:

Protocol Title

Co-Investigators (if changed from last approval):

Research Coordinator Name:       Email:       Tel:

**TERMINATION REQUEST** **[ ]**

Please include an end-of-study report/summary below, or append to this form.

**End-of-study report/summary of findings and conclusions:**

**Signature of Principal Investigator Date**