UNIVERSITY OF   
CHARLESTON

INSTITUTIONAL REVIEW BOARD FOR HUMAN PARTICIPANTS IN RESEARCH

**Project Closure Form**

To: Chair, UC-IRB Protocol #: Click here to enter text.

Date:Click here to enter text.

Primary Investigator: Click here to enter text.

Other Investigators: Click here to enter text.

School/Division: Click here to enter text.

Project Title: Click here to enter text.

Funding Agency: Click here to enter text.

Date Project Closed: Click here to enter text.

Reason for Closure: Click here to enter text.

Total Subjects in the Study: Click here to enter text.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Click here to enter text.

Signature of Principal Investigator Date

***Please attach a summary of project findings to this form.***

Submit application to: Direct problems or issues to:

Electronically: [irb@ucwv.edu](mailto:irb@ucwv.edu) (single PDF) Dr. Calvin Lathan, Chair, UC-IRB