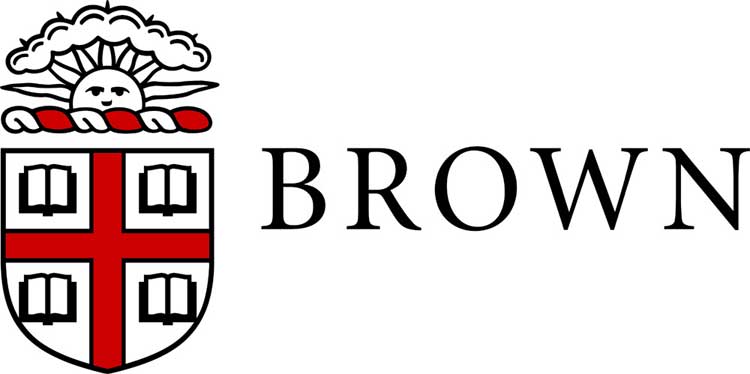
**Brown University**

**Study Closure Form**

**Study Title:** Click or tap here to enter text.

**Principal Investigator**: Click or tap here to enter text.

**IRB Study ID#:** Click or tap here to enter text.

1. **Collaborating Organizations**
2. Does the study involve any [collaborating organizations](https://www.brown.edu/research/conducting-research-brown/research-compliance-irb-iacuc-coi-export-control-research-data-management-and-data-use-agreements/irb/hrpp-glossary#collaborating)?

YES

NO (Skip to PART II**)**

1. Does Brown serve as the [IRB of Record](https://www.brown.edu/research/conducting-research-brown/research-compliance-irb-iacuc-coi-export-control-research-data-management-and-data-use-agreements/irb/hrpp-glossary#ior) for any of the collaborating organizations?  
    YES **IF YES,** ***this closure may take up to 30 days, per the reliance agreement.***

NO (Skip to PART II))

* 1. All research activities have been completed at ALL collaborating organizations.

YES

NO **If NO, s*tudy cannot be closed until research activities are completed.***

* 1. All collection and analysis of research data at collaborating organizations have been completed.

YES

NO **IfNO, s*tudy cannot be closed until data collection and analysis are completed.***

1. **Special Considerations**
2. Is the study FDA regulated or does the study involve an FDA-regulated product?

YES

NO

**IF YES:**

* + - 1. I certify that I have completed all requirements for study closure in accordance with [FDA regulations](https://www.brown.edu/research/studies-involving-drugs-and-or-devices).
      2. If this study is conducted under an Investigational Device Exemption (IDE) or Investigational New Drug (IND) Application, attach the Final Report that will be submitted to the FDA.

Click or tap here to enter text.

1. Does the study have any specific funding/contractual terms and conditions that affect study closure?

YES

NO

**IF YES:**

1. I certify that I have reviewed all sponsored-funding terms and conditions and am under no obligation to keep this study open.
2. Is the study a [clinical trial](https://www.brown.edu/research/conducting-research-brown/research-compliance-irb-iacuc-coi-export-control-research-data-management-and-data-use-agreements/irb/clinical-trials)?

YES

NO

**If YES:**

* 1. Has the study been registered on ClinicalTrials.gov?

YES

NO

* 1. I certify that I have reviewed and will abide by the clinical trial registration, reporting, and consent form [posting requirements](https://www.brown.edu/research/clinical-trials#reporting).

YES

1. **More Information Requested on the Huron E-Form Question #7**

This section only asks for information since the last IRB review. Only provide an explanation for the items that were left unchecked in question #7 on the E-form.

Click or tap here to enter text.