**SECTION A: General Information**

***General Information***

**Title of Course:** Click here to enter course title.

**Date of Original REB Approval:** Click here to enter a date.

**LAM #:** Click here to enter LAM#.

**Today’s Date:** Click here to enter a date.

**Principal Investigator Name:** Click here to enter first and last name.

**School/Department:** Click here to enter School/Department.

**Telephone:** Click here to enter phone number.

**Email:** Click here to enter e-mail address.

***Additional Information***

1. When did this research begin? Click here to enter a date.
2. Is this research still active? **Please select one.**

a. **YES**, when will the interaction with human participants be completed?

(If uncertain, please choose longest estimation) Click here to enter date.

b. If **NO**, when was the interaction with human participants completed?

Click here to enter date.

1. What is the funding status of the project?

Funded  Unfunded

**Agency:** Click to enter Agency.

**Funding Start Date:** Click to enter date.

**Funding End Date:** Click to enter date.

1. Have there been procedural or other changes to this application since its original ethics clearance? **Please select one.**

a. If **YES:**

A Change Request form has been filed

A Change Request form is attached

1. Since original ethics clearance was granted, have any ethical concerns arisen or have any participants experienced adverse events as a result of their participation in the study? **Please select one.**

a. If **YES** please describe in detail below, or append additional pages

Click here to enter details.

**Principal Investigator Assurance**

I confirm that the information provided in this Completion Report is correct and that for so long as this study remains incomplete, I continue to be bound by the terms of the assurance provided by me on the original application for research ethics approval.

Name of Principal Investigator (signature not required):

Click here to first and last name.

Date: Click here to enter date.

**Documents for Submission (Please note, hard copy consent forms to be retained by instructor for a period of 2 years in a secure location-locked filing cabinet in locked office)**

All Student Course-Based Research Ethics Application Forms

All Reviewer Checklists

Any TCPS-2 Certificates not submitted with the initial application

**Submission Instructions:** Please email the completed form and all supporting documentation to [reb@lambtoncollege.ca](mailto:reb@lambtoncollege.ca)