

Application for Continued Review

Approved Number						
Name of Research Project						
Researcher	Category	Name	Organization	Title	Contact Information	E-mail
	Lead Researcher					
	Co-Researcher					
Date of Initial Approval			Date of Final Approval			
Effective Period						
Interim Report	<p>1. Summary of Changes in Research</p> <p>a. Changes in research proposal after final review? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>b. Changes in human research subject recruit and selection criteria after final review? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>c. Changes in consent acquiring process or forms after final review? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>d. Addition or withdrawal of researcher after final review? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>e. Changes in conflict of interest of researcher after final review? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>2. Has all human research subject signed approved written consent form? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable (consent exempted research)</p> <p>3. Has human research subject giving written consent received a copy of the written consent form? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable (consent exempted research)</p>					

We apply for continued review on research proposal as above.

※ Attachments

1. Research proposal currently in use
2. Explanatory note and consent form currently in use
3. Copy of certificate of education

 Name & Signature of Applicant
 (Lead Researcher)

 Date of Application