Approval Date:

For IRB Use Only

File Number:

**Renewal Request and Progress Report**

**University of North Texas Institutional Review Board**

Submission and approval of this form is required annually for all studies approved by Expedited or Full Board review that will continue beyond the initial year of approval. Please submit this form 25 to 30 days prior to the expiration of your current approval period. All recruitment, data collection, and analysis of identifiable data must cease on the expiration date unless renewal has been approved.

**Filling Out and Saving the Form**

Save this file as a Word document on your computer, answer all questions completely within Word, and submit it along with all supplemental documents to the IRB Office as described on page 2.

Please type in the blue fields and use a font size of 11. Check “No” or “Yes” on items #7 & 8 and elaborate on “yes” answers as indicated.

***For Mac Users: To select your response for each check box, click on the appropriate check box and then hit the space bar to place an “X” in the box to indicate your answer.***

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| **1. IRB Number:** |
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| **2. Title of Study** |
| Must be identical to the title of any related internal or external grant proposal. |
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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **3. Investigator (or Supervising Investigator for Student Studies)** | | | | | | | | |
| First Name |  | | Last Name | | | Email Address | |  |
|  | |  | |  |  | |  | |
|  | | | |  | | |  | |
| UNT Department | | | UNT Building & Room Number | | | Office Phone Number | | |
|  | |  | |  |  | |  | |

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| --- | --- | --- | --- | --- | --- | --- | --- |
| **4. Student Investigator (if applicable, for student studies such as theses and dissertations)** | | | | | | | |
| First Name | | Last Name | | | | E-mail Address | |
|  |  |  | | |  | |  |
|  | |  | | | |  | |
| UNT Department | |  | | Degree Program | | | |
|  | | |  |  | | | |

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| **5. Study Beginning and End Dates** |
| |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | Date Last Approved by IRB | | | |  | | |  | |  | | |  | |  |  | | |  | | | Project Beginning Date |  | | Anticipated Project End Date | | | |  | |  |  | | | |

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| **6. Subject Recruitment** |
| |  |  |  |  |  | | --- | --- | --- | --- | --- | | Total number of subjects enrolled in a study as of this date | | |  | | |  |  | | |  | |  |  | |  | | | Approximate number of subjects who will be enrolled |  | Total number of subjects enrolled since last IRB Review | | | |  |  |  | | | |
| **7. Since the last IRB review, have any injuries, adverse events, or any other unanticipated problems involving risks to subjects or others occurred?** |
| No  Yes – Provide a description of each event and explain how the event was handled. |
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| **8. Do you have a signed informed consent form for every subject that has participated in your study? (If your study involved a waiver of signed informed consent, please describe briefly how the informed consent process was conducted.)** |
| No – Describe any problems you have had obtaining informed consent and please attach a copy of the form that you are  currently using.  Yes |
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**Investigator or Supervising Investigator Certification**

By checking this box and e-mailing this Renewal Request and Progress Report Form to the UNT IRB from my UNT e-mail account, I am certifying that I am requesting the renewal of this research for an additional one year period. I certify that the information provided about this study is complete and correct.

**Submission of your Renewal Request and Progress Report**

Please e-mail the form (including a copy of the informed consent form currently in use) to [untirb@unt.edu](mailto:untirb@unt.edu). Please insert “Renewal Request and Progress Report” in the subject line of your email.

**If you have questions about your Renewal Request and Progress Report, please contact The Office of Research Integrity and Compliance at (940) 565-4643 or untirb@unt.edu.**