**Innovations for Poverty Action Institutional Review Board (IRB)**

# REQUEST TO CLOSE RESEARCH INVOLVING HUMAN SUBJECTS

**When complete, please file this application, including its attachments, via**[**poverty-action.org/irb**](https://www.poverty-action.org/irb)**.**

Do **NOT** file this application via [humansubjects@poverty-action.org](mailto:humansubjects@poverty-action.org).

Please do not hesitate to reach out to [humansubjects@poverty-action.org](mailto:humansubjects@poverty-action.org) with any additional questions you may have. In your email’s subject, please mention your study’s name, your country, and your study protocol’s number (from your approval letter, if already available).

**Required Documents (if no changes):**

Completed closure form

**Optional Documents**

Brief progress report, detailing the summary of the study results or findings

Any manuscripts or abstracts for publication summarizing the study results or findings

Copy of final closeout report submitted to funder or sponsor

**CLOSURE FORM**

**Date of Application**: Click here to enter a date.

**IPA-IRB Protocol Number**: Click here to enter text.

**Title of Study:** Click here to enter text.

**Former or alternate titles if known:** Click here to enter text.

**Project IRB Contact:** Click here to enter text.

**Funding source:** Click here to enter text.

**Risk designation:** Choose an item.

**Project end date:** Click or tap to enter a date.

**IRB Expiration date:** Click or tap to enter a date.

NOTE- If IRB approval expired: No research-related activities may occur after the IRB expiration date unless the PI contacts the IRB in advance and is determined that continuation during expiration is appropriate for subject safety and the IRB has made an allowance for it. In the space below please indicate if any activities have occurred during the lapse in IRB approval and describe those activities. Otherwise please state NA (not applicable).

Click here to enter text.

**Would you like to close or retire this study?  close  Retire** (A study can be closed once in final analysis, when no identifiers are being used and there is no expectation of returning to surveying subjects. This is at the discretion of the PI, many of whom prefer to keep a project under IRB oversight until papers have been written.)

**If this study is being retired before the project end date, please provide a short explanation below:**

Click here to enter text.

**If you are closing the study, please respond to the following questions:**

1. What is the current status of the project?

On-going

Completed **Date of completion** Click here to enter a date.

Still in Proposal Stage

On hold/stopped (please explain)

Other (please explain)

**Risk Status:**

2. Has any component of this project **ever (as an original application or for any amendment to the protocol)** been considered **more than minimal risk** and therefore approved by the **full convened** board at IPA IRB at a monthly meeting?

*(Note: Your approval letter would say “board approval” rather than “expedited approval” if this was the case.”)*

No

Yes

**3. Did the research result in publications or are any publications pending?**

No

Yes, please explain

**4. Have results from this study been posted to AEA RCT registry, clinicaltrials.gov, or another similar research results registry? If this is not a requirement for your study, please state NA.**

No

Yes, please explain

**Enrollment of human subjects:**

5. **Have all subjects completed all study-related procedures and visits in your research?**

No ( closure with the IRB is not appropriate at this time)

Yes Estimated number: Click here to enter text.

6. **Would you need to enroll in additional subjects over the next year?**

No

Yes ( closure with the IRB is not appropriate at this time)

1. **Would you need to collect additional identifiable data from enrolled subjects over the next year or re-contact enrolled subjects?**

No

Yes (closure with the IRB is not appropriate at this time)

1. **Have any subjects withdrawn from the study?**

No

Yes If yes, how many? Click here to enter text.

Describe the circumstances and reasons given, if known.

Click here to enter text.

1. **Are there any pending actions related to previously submitted items ( modifications, deviations, unexpected events) that have not yet been addressed or any items not previously submitted to the IRB that require submission to the IRB at this time?**

No

Yes (closure with the IRB is not appropriate at this time)

1. **For sponsored studies only: has the sponsor/grant or funder completed a close-out visit at all sites and has a final close-out report been sent to the sponsor/funder?**

Click here to enter text.

**Reportable Events**

Please respond fully, even if previously reported to the IRB

1. **Were there any adverse or unexpected events experienced during this study that did or could affect the human subjects involved? This refers to anything that had to be reported in an unexpected event report.**

No

Yes If yes, please explain, including the nature of the events, how they were handled and the number of subjects involved

1. **Were there any complaints about the research?**

No

Yes If yes, how many? Click here to enter text.

Describe the circumstances and nature of the complaints.

Click here to enter text.

1. **Deviations (Unexpected Events)**

Have there been any deviations from the study protocol or any other previously approved IRB documents that did *not* receive approval before they were implemented?

No

Yes

**If yes, please explain in detail all the deviations from the protocol or other approved study documents below.**

Click here to enter text.

Principal Investigator: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature

Typed Name: Click here to enter text. Date: Click here to enter a date.

\* An email from the PI, acknowledging this renewal, can substitute for a signature if necessary due to constraints of travel.