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## RESEARCH ETHICS COMMITTEE RESEARCH PROJECT ANNUAL RENEWAL APPLICATION

This Renewal Form is an application for continuing ethics approval and must be submitted for review and approval prior to the study's expiry date. Ethics approval expires each subsequent year from the day the REC approval was initially granted unless otherwise indicated by the BCHS Research Ethics Committee. Failure to submit this form prior to the expiry date signifies that the study does not have REC approval and all research activities must be suspended. Conducting research without REC approval may result in a notice of non-compliance involving corrective action, up to and including, termination of the research study.

Please provide a copy of the renewal approval letter from the University Research Committee or Review Board or other academic affiliate.

Board or other academic affiliate.			
Full Study Title			
Principal Investigator (PI)			
Date of Initial REC/Board approval: (D/I	M/Y)		
Period Renewal is Requested: From (D/M/Y) To (D/M/Y)			
Overall Objectives and Purpose of the St	udy:		
Objectives (Brief Summary)			
Purpose (Brief Summary)			
Date of All Amendments to Protocol and Informed Consent reviewed by BCHS			
REC since last approval			
Are there safety reports/adverse events since the last approval?		☐ Yes	☐ No
If yes, please attach a summary statement.			
Patient accrual for this study is currently		☐ Open	☐ Closed
Please provide an update on the study's	overall progress		
I hereby acknowledge there have been	no amendments made to this research	project that h	nave not been
previously approved by the BCHS Resea	rch Ethics Committee and am requesti	ng for renewa	l only.
Signature of Principal Investigator:			
Date:			
Email Address:	Telephone Contact:		
Submit this request, together with suppo	orting documentation noted above to t	he Research E	thics Committee