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| Grant Closure Form |
| **INSTRUCTIONS AND INFORMATION**   * The Closure Form should be submitted to the IRB-HSR when the grant funding has concluded. * **Forms should be submitted electronically to** [**IRBHSRcontinuations@virginia.edu**](mailto:IRBHSRcontinuations@virginia.edu) * A receipt of acknowledgement for the closure will be returned to the contact person listed on the routing form. |
| IRB-HSR or UVA Study Tracking#:       PI Name: |
| Title: |
| ***Check one of the following:***  Never funded  Training Grant Completed  Funded- all protocols funded by this grant have been closed  Funded- the following protocols funded by this grant will remain active:  I confirm a modification to each protocol will be submitted prior to the next continuation review to remove this sponsor as a funding source. Yes |
| **Comments:**  **Do you confirm the PI is aware of this grant closure and has reviewed and approved this report?**  Yes  No  **Submitted by:**       **Date**: |
| **CONTACT INFORMATION**  Provide contact information for a representative who can answer any questions the IRB might have concerning this submission: Approvals/receipt of acknowledgments will also be sent to the person listed below.  Contact Name:       Phone Number:  E-Mail Address:       Messenger Mail Box #:  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |