Northern Border University

The Vice Presidency of Graduate Study and Scientific Research Deanship of Scientific Research



وكالة الجامعة للدارسات العليا والبحث العلمي

عمادة البحث العلمي

جامعة الحدود الشمالية

اللجنة الدائمة المحلية للأخلاقيات الحيوبة والطبية بالجامعة

Local Committee of Bioethics (HAP-09-A-043)

Final Report (Study Completion or Termination)

Note: Incomplete submissions will be returned without review. Please ensure all sections are completed accurately.

1. Date
2. Study Title
3. Study Design
Provide a brief description: 4. Principal Investigator (PI) Information
4. Principal Investigator (PI) Information Name:
College/Department:
PI Title/Position:
Phone:
Email:
Sponsor/Funding Source (if applicable):
5. Study Subjects
Total number of subjects involved in the project:
The following figures should reflect activity for the entire duration of the study: • Planned enrollment:
• Actually enrolled:
Completed participation:
• Discontinued participation:
• Number of signed informed consent forms maintained in study files:

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6. Project Summary

Please provide a concise summary of the st	tudy, its progress,	and outcomes	(attaching
reports or reprints is not a substitute):			

7. Study Termination (if applicable) If the study was terminated before completion, please specify the reason:			
Report prepared by:	Date:		
Reviewed and approved by (PI):	Date:		