

Human Research Ethics Committee End of Project Report

v180711



The University's Human Research Ethics Committee is required to monitor research projects to which it has given approval. Please use this form to provide a report at the completion of your research project. Please ensure that this report is lodged by the approved end date for the project.

The **Primary Contact** as per the Human Research Ethics Application (HREA) form (usually the Chief Investigator) is responsible for notifying the committee by completing and submitting this form to ethics@csu.edu.au.

All fields with a red border are required.

1. Research Project

| | |
|----------------------|----------------------|
| Title | Protocol Number |
| <input type="text"/> | <input type="text"/> |
| | Approved End Date |
| | <input type="text"/> |

2. Primary Contact (main applicant on approved HREA form for this research project usually the Chief Investigator)

| | |
|----------------------|---------------------------------|
| Name | Staff/Student ID No. (if appl.) |
| <input type="text"/> | <input type="text"/> |
| Phone or Mobile | Email |
| <input type="text"/> | <input type="text"/> |
| School/Faculty | Work Address |
| <input type="text"/> | <input type="text"/> |

3. Research Project Team

| Name | Role | Staff/Student ID No. (if appl.) |
|----------------------|----------------------|---------------------------------|
| <input type="text"/> | <input type="text"/> | 11140654 |
| <input type="text"/> | <input type="text"/> | 99914813 |
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Attach an additional page if there are more team members to list.

4. Briefly summarise the project results and completion

Provide a brief report on the research project and how the project was finalised. Outline aspects of the project you felt were successful and any areas you felt did not proceed as well as you expected. Please provide any information or learning that may be useful for the HREC.

Attach an additional page if the response does not fit in this field.

5. Signatures

I confirm that all research team members have had the opportunity to review the information above prior to submission of this form.

Name of Primary Contact

Signature

Date

Name of Supervisor (for student researcher/s)

Supervisor Signature

Date

Submit all applications to:

ethics@csu.edu.au

Note: The submit button above will not work until **all required fields** (marked with **red borders**) are complete.
Electronic files with digital signatures are preferred.

Before sending, remember to attach any additional documents relevant to this form, such as additional pages of information or copies of relevant approvals.