CBU Research Ethics Board – Final Project Report 1. APPLICANT 1.1 LOCAL PRINCIPAL INVESTIGATOR Name: _____ Department: Phone: Email: Degree Program: ____ FOR STUDENT SUBMISSIONS Supervisor's Name: _____ Supervisor's Department: _____ Phone: _____ Email: _____ Co-investigator(s) Names and Affiliations (Include academic status & contact email and phone number): 1.2 Project Title: 1.3 Date of Initial Ethics Clearance: 1.4 1.3 Project Completion Date: _____ 2. FINAL REPORT 2.1 Minimal Risk studies ☐ There were no problems encountered in interactions with human participants. ☐ There were problems encountered. Please attach a detailed description of the nature of the problems, how they were dealt with, and the final outcomes. 2.2 More than Minimal Risk studies Please attach a description of how the study was conducted with an emphasis on any problems that were encountered. Provide a detailed description of the nature of the problems, how they were dealt with, and the final outcomes.