|  |  |
| --- | --- |
| **🞎 Research Progress Report and IRB Approval Extension Request**  **🞎 Research Project Closure Notification** | |
| **➊ Project Detail** | |
| **Research Proposal Number**……………………………………………………………………………………………………………………………………………………  **Type of IRB Approval** 🞎 Exemption 🞎 Expedited 🞎 Full Board  **Reference Number (COE/COA)** ..............................................................................................................................................................  **Title of Research Project**  (Thai)..............................................................................................................................................................................................................  (English).........................................................................................................................................................................................................  **Duration of the Study**: From ............................. to ................................... | |
| **➋ Details of Principal Investigator/Advisor and Co-investigators** | |
| **1. Principal Investigator/Advisor’s Name** ............................................................................................................................................  Faculty...............................................................................Tel................................................................................  **2. Researcher/Student’s Name**...............................................................................................................................................................  Faculty.............................................................................. Tel.................................................................................  **Or Research coordinator Name**..............................................................................................................................................................  Faculty.............................................................................. Tel................................................................................. | |
| **➌ Report of research project result related to IRB** | |
| **3.1 Research project was completed as planned.**  🞎 Yes 🞎 No, please specify............................................................................................................................  **3.2** **The number of participants in research project**…………………………………………………………………….……Person (s)  🞎 As was planned  🞎 Not go as planned, due to………………………………………………..................................................................................  **3.3** **The number of participants who still engage with on-going research**…………………………………..……Person (s)  **3.4** **The number of participants whose data are completely collected** ……………………………………….…Person (s)  **3.5 The number of participants who withdraw from research project** …………………………………………..…Person (s)  **3.6 Adverse event occurring from research project that affected participant (s)**  🞎 Yes, Number of affected participant (s)…...........................................……Person (s)  Please specify reason..............................................................................................................................................  🞎 No  **3.7 Modification or Deviation of research project**  🞎 Yes, Number of time (s) ........................................ time (s)  Please specify reason…………....................................................................................................................................................  🞎 I have notified IRB on (please specify date)……………………………………………………………………......................  🞎 I have not yet notified IRB  🞎 No    **3.8 Problems and obstacles in conducting research**  .....................................................................................................................................................................................................  .....................................................................................................................................................................................................  ..................................................................................................................................................................................................... | |
| **➍ Request for the extension of research project / Notification of research project closure** | |
| **4.1 Expected project completion date** ......………………………………………………………..………..  **4.2 Project closure date (please specify date)** ................................................................... | |
| **➎ For Principal Investigator/Advisor and Co-researchers** | |
| Signature ……………………………………………………………  (Printed Name ......................................................................)  Principal Investigator/ Student  Date .................................................... | Signature ……………………………………………………………  (Printed Name .....................................................................)  Department Head/ Program Chair/ Advisor  Date .................................................... |
| **➏ For IRB Sub-committee of Faculty........................................................................................................................................** | |
| 🞎 Acknowledge the progress report and extension request for IRB approval certificate  🞎 Acknowledge the closure of research project  Signature………………………………………………  Name....................................................................  Date........................................................... | |
| **➐ For IRB Staff** | |
| 🞎 All required documents have been submitted  🞎 Missing documents..........................................................................................................................................................  Signature………………………………..................……  (IRB Staff)  Date………………............................................... | |
| ➑ **For IRB Committee** | |
| **For IRB Committee Secretary**  🞎 Acknowledge the progress report and extension request for IRB approval certificate  🞎 Acknowledge the closure of research project  🞎 Research project storing date ……………………………………………………………………………….….  🞎 Meeting Number............../............... Agenda Number............................................................  Signature ……………………………….........…….…  (IRB Committee Secretary)  Date ............................................. | |
| **Dear Chair of the KMUTT Institutional Review Board**  🞎 Acknowledged and approved. Please proceed with the document collection.  🞎 Others ....................................................................................  Signature ………………….................................….............….……………  (Chair of the KMUTT Institutional Review Board)  Date ........................................................................................ | |

**Notes:**

**For progress report and IRB approval certificate extension, please submit the following documents:**

1. Progress report for IRB-approved research project (IRB Form-04)

**For closing research project, please submit the following documents:**

1. Progress report for IRB-approved research project (IRB Form-04)

2. Research project summary or thesis, or final report, in PDF and Word

**\*\*\* Please submit the documents to** irb@kmutt.ac.th **\*\*\***