**School of Social Work and Social Policy**

**Research Ethics Committee**

**End of Project Report Form**

Date:

Name (and REC reference number) of applicant (and supervisor, if relevant): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title of project: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date Approved:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |
| --- | --- | --- |
| **Questions:** | **YES** | **NO** |
| Were there any modifications to the procedures and process for which approval was granted? If so, please provide details in the space below.  | □ | □ |
| Were there any adverse outcomes associated with the conduct of the research? If so, please provide details in the space below. | □ | □ |
| Is all data being stored in accordance with Trinity’s data storage policy, in adherence to the Freedom of Information Act, and in compliance with the requirements of the Data Protection Commissioner? | □ | □ |
| Will all data be kept for at least 2 years in accordance with the School’s data storage policy? | □ | □ |

**Modifications to the procedures for which approval was granted:**

**Adverse outcomes associated with the conduct of the research:**

**Any additional information which you or your supervisor wish to bring to the attention of the REC?**