



Institutional Review Board

Notification of a submission to another IRB

Principal Investigator: _____

Address: _____

Phone: _____ Fax: _____ E-mail: _____

Faculty Advisor (if PI is a student): _____ ML: _____

Title: _____

Name of IRB Submitted to _____

Please send your completed submission with approval to the IRB office. As with any study reviewed by our IRB, we expect the Principal Investigator to notify our office when the study is completed, or if it is terminated for any reason.

I certify that the information on this form is accurate to the best of my knowledge.

PI Signature

Date