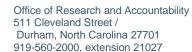


Research Study Continuing Review/Interim Report

Research reports are due by December 1 and March 1 of each year. Section 1:

Identifying Information

Project Title:				
Principal Investigator:				
Email:				
Phone:				
	ersity/Organization ation:			
Section 2:	Status of Research			
	Recruitment and/or col Study is no longer colle Study is no longer colle activities for this cycle y Study collection is mult renewal research applie Study collection is pe activities, and any follow activities are limited to	llection of new participar cting, but participants are cting data and participant year. i-year and will continue for cation. rmanently closed; particy-up has been completed only data analysis with continue for c	nts or review of records to continue. e still involved in research-related act ts have completed research-related for the follow year pending approval of icipants have completed research-related d by research team. The remaining resollected data.	of elated
	Study Participant at Cor of participants originally ap	•		
Number o	of participants solicited sin tion report:	<u> </u>		
	of participants enrolled sin ion report:	ce the last		
	of participants who withdre last continuation report:	ew from the study		
Number o	of participants originally ap	proved by DPS:		
	of participants enrolled sing of the study:	ce the		
*Number	of participants who withd	rew from the study:		
		1		





*Withdrawing includes any participants who started the process but did not complete, whether by leaving the study early, not returning for follow-up sessions, or if investigator terminates participation.

Section 4: Summary of Progress within Review Report Period:

		Since the last review report, was the study open to enrollment? ☐ Yes ☐ No ○ If "yes," continue to next section. If "no," continue to Section 5. Since the last review report, were participants enrolled in the study? ☐ Yes ☐ No ○ If you answered "no," describe the reason(s) for no enrollment and then continue to Section 5.
	>	Have any participants complained or raised concerns about this study? ☐ Yes ☐ No o If you answered "yes," please provide a description of complaints/concerns and how they were handled. Have there been any amendments since the last status report? ☐ Yes ☐ No o If you answered "yes," were the amendments submitted to DPS via the modification form? ☐ Yes ☐ No Have there been any unanticipated problems with the study? ☐ Yes ☐ No o If you answered "yes," please describe below:
I confi	irm the onfirm ctivity,	Primary Investigator Assurance at Review Period at I have adhered to the DPS guidelines as established in the approved research application ation letter. I attest to the accuracy of this report, and I accept responsibility for the conduct of the supervision of participants, and the maintenance of informed consent documentation as
-	-	vestigator:
Date:		