

**WOR-WIC COMMUNITY COLLEGE DISTRICT
INSITUTIONAL REVIEW BOARD
ANNUAL RENEWAL FORM**

Directions to Researchers: This form is submitted when the previous IRB approval period has expired and research continuation is still needed.

Title of Research Proposal:

Principal Investigator or Researcher:

Campus or Institutional Name, Department, and Address:

Phone:

E-mail:

Reasons for IRB Approval Extension and Research Renewal

Please describe the specifics for the extension and IRB renewal.

Unexpected Problems or Contingencies

Please describe any issues that may have interrupted your research and how they were resolved.

Principal Investigator's Signature:

Date:

Email form to: irb@worwic.edu