

**END OF DATA COLLECTION REPORT
FOR RESEARCH INVOLVING THE USE OF HUMAN SUBJECTS
Central Michigan University
MA in Education Students Only**

Complete the following and submit one copy to your MA in Education Capstone Project monitor for forwarding to the MA in Education Director. Include copies of signed consent forms, if required.

Project title: _____

Name of Investigator: _____ Student ID No.: _____

Address: _____ Phone: (____) _____
Street

City State Zip

Project dates: from ____/____/____ to ____/____/____

This is to verify that the above named research involving human subjects was performed according to the procedures approved by the IRB. The project is now complete.

A total of _____ subjects participated in this research ; _____ subjects voluntarily withdrew from the project; and _____ subjects experienced complications, adverse reactions, or injuries resulting from participation in the research project. The MA in Education Office will maintain all records for this project for 1 year.

Student's printed name	Program center
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Student's signature	Date
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Faculty monitor's printed name	Program center
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Faculty monitor's signature	Date
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MA in Education office use only:

MA in Education Director's signature	Date
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***Submit only if IRB review was required.**