**Logo

Description automatically generated**

**IBC Protocol Closure Form**

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| --- | --- | --- | --- |
| **A. Principal Investigator (PI)** | | | |
| Name: |  | Department: |  |
| Email: |  | | |

|  |  |  |  |
| --- | --- | --- | --- |
| **B. Protocol Information** | | | |
| IBC Protocol Title: |  | | |
| IBC Protocol Number: |  | Approval date: | Click or tap to enter a date. |
| Status:  (Please check one.) | Project was never conducted. Please close the file.  Project is complete. Please close the file. | | |

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| **C. Project Summary** |
| Please provide a brief summary of the project outcomes and products (e.g., plasmids, genetically modified organisms) below. |
|  |
| Have all biological materials listed in the protocol been terminally inactivated and/or disposed of as indicated in the protocol?  Yes  No  If “no” is checked, describe plan below for maintaining the materials (e.g., transferring to new IBC protocol or new PI). |
|  |

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| --- | --- |
| I certify that the information contained in this form is complete and accurate. | |
|  | Click or tap to enter a date. |
| **Principal Investigator Signature** | **Date** |

|  |  |  |
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| IBC Use Only | | |
| Closed | Date: | Click or tap to enter a date. |
| Comments: | | |