Date: **\_\_\_\_\_\_\_\_\_\_\_\_\_**

To: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact No: **\_\_\_\_\_\_\_\_\_**

This is to inform you of the IRB decision related to your application for review of the following documents:

IRB Protocol No:

Study Protocol Title:

Study Protocol Number:

Principal Investigator:

Sub-Investigator/s:

Sponsor:

 Protocol Version No.: Version Date:

 ICF Version No.: Version Date:

 Other Documents:

 Review Status: \_\_\_\_\_\_Full Board \_\_\_\_\_\_Expedited

 Meeting Date:

IRB Decision: \_\_\_\_\_\_Approved \_\_\_\_\_\_\_Minor revisions required

 \_\_\_\_\_\_Disapproved \_\_\_\_\_\_\_Major revisions required

Details of Action Required from PI:

Very Yours Truly,

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name and Signature

PELI IRB Chair

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_