

RESEARCH STUDY STATUS REPORT

**Instructions:**  As the principal applicant, please complete this report when your study is at the **mid-point and** at **completion** to let the Glenrose Research Office know that your study file can be closed. Please send the completed form to grhresearch@ahs.ca.

|  |
| --- |
| **Project Summary** |
| Report Date | Research Study Title | Prepared by Principal Applicant Name |
| Click or tap to enter a date. | Click or tap here to enter text. | Click or tap here to enter text. |
| **What is the Current State of Your Study? How Has Your Study Progressed?** |
| Click or tap here to enter text. |
| **How Has Your Study Impacted Patient Care at the GRH?** |
| Click or tap here to enter text. |
| **Has Your Study Resulted in Further Pursuits (e.g., additional funding, etc.), and Has It Allowed Your Research Work to be Extended?** |
| Click or tap here to enter text. |
| **Has Your Study Led to Protocol, Process or Product Development @ GRH?** |
| Click or tap here to enter text. |
| **Has Your Study Allowed for Team and Capacity Building at the GRH? If so, please describe.** |
| Click or tap here to enter text. |
| **How Do You Plan to Translate Your Knowledge and Study Findings to GRH Clinical Staff?** |
| Click or tap here to enter text.  |
| **Has Your Study Ended? If so, please provide the date.** |
| Click or tap here to enter text. |
| **Were You Provided with GRH Funding for this Study? If yes, were there unspent funds to be returned to the GRH RSO?** |
| Click or tap here to enter text. |
|  |

Date of Submission: Click or tap to enter a date.