### Form 03.1-02-v001.0

**Document Receipt Form**

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Research Registration Number: | | ⬜⬜⬜ / ⬜⬜ - ⬜⬜ | | | | | | Submitted date: | | | | |  |
| Type of Submission: | | ⬜ Initial Review  ⬜ Resubmission for re-review  ⬜ Protocol Amendments | | | | | | | ⬜ Continuing Review of Approved Protocols  ⬜ Protocol Termination | | | | |
| Protocol Title: | | |  | | | | | | | | | | |
| Principal Investigator: | | | | |  | | | | | | | | |
| Contact Number/s: | | | |  | | | | | | Fax : | |  | |
| E-mail: |  | | | | | | Preferred Contact | | | | ⬜ Phone ⬜ Fax ⬜ e-mail | | |
| Institute: | | | | | |  | | | | | | | |
| Delivery route: | | | | | | ⬜ Post ⬜ E-submission ⬜ in Person | | | | | | | |
| Documents submitted: | | | | | | ⬜ complete ⬜ incomplete, will submit on…………... | | | | | | | |
| Documents to be submitted later : | | | 🗖 information for subjects  🗖 informed consent form  🗖 case report forms (CRF)  🗖 recruitment materials  🗖 study budget  🗖 investigator’s brochure  🗖 others…………………… | | | | | | | Check what documents are received later on.  🗖 information for subjects  🗖 informed consent form  🗖 case report forms (CRF)  🗖 recruitment materials  🗖 study budget  🗖 investigator’s brochure  🗖 others…………………… | | | |
| Received by: | | | Name | | | | | | | Signature | | | |
| Date received: | | |  | | | | | | |  | | | |

***Note:*** *Please bring this receipt with you when contacting the UP-CPH ERC.*