

	UP OPEN UNIVERSITY Institutional Research Ethics Committee	
	SITE VISIT REPORT FORM	REC Form No. 16 (A)
		Version No: 02
		Date of Effectivity:

<dd/mm/yyyy>

<NAME OF MEMBER>

Member
UPOU IREC

Re: <STUDY PROTOCOL TITLE> <UPOU IREC CODE>


Dear **<TITLE OF MEMBER> <SURNAME>**:

We wish to inform you that the UPOU IREC has appointed you to be a member of the Site Visit Team responsible for verifying compliance of the study site with UPOU IREC approved protocol and related documents, such as, contents of the informed consent form, etc. This site visit is being organized because of: _____ As part of the team, your responsibilities include the following:

1. Review the study protocol and the ICF (note: make sure that the site is using the most recent version)
2. Review the post-approval documents (note: make sure that the site is using the most recent version)
3. Ask the PI or staff to explain the informed consent process
4. Ensure security, privacy, and confidentiality of the documents at the study site
5. Discuss the findings with the research team
6. Solicit feedback from the study site

The details of the Site Visit are as follows:

Study Site	
Address	
Date	<dd/mm/yyyy>
Time	<hh:mm>

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To facilitate the intended site visit, please signify your confirmation by signing in the space provided below, date your signature, and return one copy of this letter to the UPOU IREC Staff. Also, if you have any questions regarding the information outlined in this notification, you may visit the UPOU IREC Secretariat at the UPOU IREC Office, email _____, or call telephone number _____ for assistance.

Thank you and best regards.

Very truly yours,

 Name and Signature
 Chair, UPOU IREC

 Name and Signature
 CONFORME of Member
 DATE SIGNED: <dd/mm/yyyy>