|  |  |
| --- | --- |
| Complaint Report  The purpose of this form is to document complaints from participants or others. | C:\Users\cbcholka\AppData\Local\Microsoft\Windows\INetCache\Content.Word\UNM_OfficeInstitutionalReviewBoard_Horizontal_RGB.PNG  1805 Sigma Chi NE | Tel: (505) 277-2644  Website: irb.unm.edu | Email: [IRBMainCampus@unm.edu](mailto:IRBMainCampus@unm.edu) |

|  |  |  |  |
| --- | --- | --- | --- |
| Project Identification | | | |
| IRB reference number: |  | Principal Investigator of Record: |  |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Person Reporting Complaint | | | | | | | | | |
| Name: |  | | | | | Complainant prefers to be anonymous | | | |
| Phone: | |  | | | | Email: | |  | |
| Address: | |  | | | | | | | |
| Complainant is: | | | Participant | Research Staff | | | Other: | | |
| Would they like to receive follow-ups, if there are any? | | | | | Yes (must have contact information) | | | | No |

|  |  |
| --- | --- |
| Details of Complaint(s) | |
| Date(s) of incident(s): |  |
| An explanation of the concern, complaint, or question. Please be as specific as possible: | |
|  | |

|  |  |  |  |
| --- | --- | --- | --- |
| Additional Information | | | |
| How would you like to see your concern/complaint resolved? | | |  |
| Have you discussed this concern/complaint with the PI or other staff? | | |  |
| *If complainant was/is a participant, ask the following:* | | | |
|  | When did you start participating in the project? |  | |
|  | Are you still participating in the project? |  | |
|  | Do you have a consent form for this project? |  | |
|  | Do you have any other written information about this project? |  | |
|  |  |  | |

|  |
| --- |
| Complaint Investigation and Resolution |
| Process of assessing and investigating complaint: |
|  |
| Resolution and Actions taken: |
|  |