

Six monthly progress of Project

Institute Ethics Committee Reference No. _____

Study title: _____

Name of the Principal Investigator _____

Designation / Department _____

Duration of Study _____

Date of Starting of the Study _____

Period of Six monthly progress report: from _____ to _____

Progress:

Side Effect if any:

Amendments if any:

Discontinuation reasons:

Progress:

Signature of Principal Investigator _____

Date: _____