	AMYA POLYTECHNIC COLLEGE, INC. RESEARCH ETHICS COMMITTEE (REC)		
	APPLICATION FOR CONTINUING REVIEW FORM	REC Form No.	
		Date of Effectivity	
		Version No.	1
		Version Date	02/12/26

Instructions to the Researcher: Please accomplish this form and ensure that you have included in your submission the documents that you checked below (in Section 3. Checklist of Documents).

General Information			
Title of the Study			
REC Code		Study Site	
Name of Researcher			
Co-researcher (if any)			
Institution		Contact Information	Tel. No.: Mobile No.: Email:
Institution Address of Institution			
Ethical clearance effectivity period			

Reportable Negative Event Report	
Start of study:	Expected end of study:
Number of enrolled participants:	Number of required participants:
Deviations from the approved protocol:	New information (literature or in the conduct of the study) that may significantly change the risk-benefit ratio:
Issues/problems encountered:	
Justification for application for Continuing Review:	