

DATE: [CURRENT DATE]

TO: [PI NAME]

FROM: SUNY University at Buffalo Institutional Review Board

PROJECT TITLE: [IRBNET ID AND PROJECT TITLE]

SUBMISSION TYPE: [SUBMISSION TYPE]

ACTION: DISAPPROVED

DECISION DATE: [DECISION DATE]

PI Name, Degree:

The SUNY University at Buffalo IRB (UBIRB) has considered and **disapproved** your proposal, referenced above.

Research activities may not be conducted as set forth in this submission. If you decide to re-submit this project for re-review, the concerns stated below should be addressed in your re-submission materials

The reasons for the IRB's decision and recommendations, if any, are as follows:

Minutes pull in

If you have any questions, please contact the UBIRB . Please include your project title and reference number in all correspondence with this committee.

This letter has been electronically signed in accordance with all applicable regulations, and a copy is retained within SUNY University at Buffalo's records.