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| **Is this a CTIMP?** |  |  |  | **For archivist use only** **(Box No’s)** |
| **Yes** |  | **No** |  |  |  |  |  |

**STU Archive Transfer Form**

|  |  |
| --- | --- |
| **Project Title:** |  |
| **Project Start Year:** |  | **Project End Year:** |  |
| **Chief Investigator:** |  |
| **Trial Manager:** |  |
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| **The items being archived have been checked for the following:** |
|  |  |  **All data have been checked and accounted for.** |
|  |
|  |  |  **An archive contents list is included within individual boxes.** |
|  |
|  |  |  **Any participant identification data are stored separately.**  |
|  |
|  | **If above have not been completed please detail reason(s):** |
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| **Signed:** |
| **Trial Manager:** |  | **Date:** |  |
| **Chief Investigator:** |  | **Date** |  |
|  |

**Archive Contents**

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| --- | --- | --- | --- |
| **Project Box ID No.** | **Detailed Listing of Contents** | **Review/****Destruction year** | **Archive No. (For archivist use only)** |
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