

R&D Archive Chain of Custody Form

Study Identification

| | |
|---|--|
| Study Name | |
| R&D Reference No. | |
| IRAS No. | |
| REC or EudraCT No. | |
| Number of boxes for the study | |
| Destruction Date (provided by Sponsor) | |
| Box No. (Allocated by R&D after QC check) | |
| Barcode No. | |
| Security Tag No. | |

Delivery Team

| | |
|-----------|---|
| | I confirm that study documentation is complete (including files from supporting departments) and prepared according to instructions in the Research Delivery Team Process Map |
| Name | |
| Signature | |
| Date | |

R&D Approval

| | |
|-----------|--|
| Name | |
| Signature | |
| Date | |

Collection by Archive Vault Driver

| | |
|-----------|--|
| Name | |
| Signature | |
| Date | |

One study per box only unless the sponsor is the same then multiple studies may be archived in the same box. Return completed form to rdoffice@nnuh.nhs.uk