<dd/mm/yyyy>

**<NAME OF PI>**

Principal Investigator

<Institution/Affiliation>

<Address>

**Re: <MMMC-RERC Code> <Study Protocol Code> <Study Protocol Title>**

Dear **<TITLE OF PI> <SURNAME>,**

We wish to inform you that the **Mary Mediatrix Medical Center- Research Ethics Review Committee** acknowledged receipt of <*Progress Report*/ *Continuing Review Application/ Final Report/ Site Visit Report>* dated <date of document>.

Upon review of <*Progress Report/ Continuing Review Application Form/ Final Report Form/ Site Visit Report Form*> and <submitted document/s>, MMMC-RERC action is **<APPROVE/** **REQUEST INFORMATION/ RECOMMENDATION FOR FURTHER ACTION/ PENDING*>***. Recommended revisions and/or clarifications are summarized below:

1.

Please note that the cut-off date for submission is on <cut-off date>**.** Should you have any questions or clarifications regarding the abovementioned recommendations, please contact Administrative Staff at telephone number (043) 773-6800 local 1194 for assistance.

The **MMMC-RERC** looks forward to your immediate response and action.

Very truly yours,

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**<NAME OF CHAIR>**

Chairman, MMMC-RERC

Date: