

## Instructions

1. Use this form if you are converting hard copies of research study-related materials that are normally not captured in electronic form.
2. Use only **one** form per unique protocol/study number, do **not** combine multiple study protocols.
3. Do not destroy any records that relate to an ongoing or reasonably anticipated investigation, legal action or proceeding, Freedom of Information request, audit or program review regardless of if the records retention period has expired.
4. A modification request for digitization is not required, however you must send one completed copy of this form to [ethics@msvu.ca](mailto:ethics@msvu.ca) which will be saved in the REB protocol file.
5. \*\*\*Please place this completed document in your digitized protocol folder.

<b>REB File Protocol # (e.g., xxxx-xxx)</b> Click or tap here to enter text.	<b>Principal Investigator:</b> Click or tap here to enter text.	<b>Telephone/e-mail:</b> Click or tap here to enter text.	<b>Date:</b> Click or tap here to enter text.
<b>Record Type / Description (e.g., signed informed consent; questionnaires; data (type), etc.)</b>	<b>Dates</b>		<b>Electronic Storage Location (e.g., MSVU OneDrive; Encrypted External Drive; MSVU Network Storage: etc.)</b>
	<b>Study Closure</b>	<b>Digitized on</b>	
	Date	Date	
	Date	Date	
	Date	Date	
	Date	Date	
	Date	Date	
	Date	Date	
<b>Record Retention Period:</b>	Click or tap to enter a date.		
<b>Anticipated Destruction Date:</b>	Click or tap to enter a date.		
<b>Authorized by Principal (please print):</b> Click or tap here to enter text.	<b>Principal Researcher Signature:</b>		<b>Supervisor's Signature (for student or post doc research):</b>