**Notification of Commencement of Research Protocol**

**HREC No:**

**PROTOCOL TITLE:**

**PRINCIPAL INVESTIGATOR:**

This is to advise that the above research protocol commenced on:

 / /

Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_ /\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_

**Please email to:** **CHQEthics@health.qld.gov.au**