

INSTITUTIONAL REVIEW BOARD

SOP No:
Version No:
Approval Date:
Effective Date:

SOP TITLE

1	.1.	1.	P	οl	icy	Sta	tei	ment
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- 1.1.2.Objective of the Activity
- 1.1.3.**Scope**
- 1.1.4. Responsibilities
- 1.1.5. Workflow

ACTIVITY	RESPONSIBILITY

1.1.6. Description of Procedures

Steps:

1.1.7.Forms

1.1.8. History of SOP

Version No.	Date	Authors	Main Change

1.1.9. References