Declaration of the End of Trial Form (cf. Section 4.2.1 of the Detailed guidance on the request to the competent authorities for authorisation of a clinical trial on a medicinal product for human use, the notification of substantial amendments and the declaration of the end of the $trial^{I}$)

NOTIFICATION OF THE END OF A CLINICAL TRIAL OF A MEDICINE FOR HUMAN USE TO THE COMPETENT AUTHORITY AND THE ETHICS COMMITTEE				
For off	icial use			
	f receipt:	Competent authority registration number :		
		Ethics committee registration number:		
To be	filled in by the applicant			
A MI	EMBER STATE IN WHICH THE DE	CLARATION IS BEING MADE:		
B TR	RIAL IDENTIFICATION			
B.1 Eu	draCT number :	()		
	onsor's protocol code number:	()		
	ll title of the trial :			
C AP	PPLICANT IDENTIFICATION (please	tick the appropriate box)		
C.1	DECLARATION FOR THE COMPE	TENT AUTHORITY		
C.1.1	Sponsor			
C.1.2	Legal representative of the sponsor			
C.1.3	Person or organisation authorised by the	sponsor to make the application.		
C.1.4	Complete below:			
C.1.4.1	Organisation:			
C.1.4.2	Name of person to contact:			
	Address:			
C.1.4.4	Telephone number :			
C.1.4.5	Fax number:			
C.1.4.6	E-mail			
C.2	DECLARATION FOR THE ETHICS	S COMMITTEE		
C.2.1	Sponsor			
C.2.2	Legal representative of the sponsor			
C.2.3	Person or organisation authorised by the	sponsor to make the application.		
C.2.4	Investigator in charge of the application	if applicable ² :		
•	Co-ordinating investigator (for multicen	tre trial):		
•	Principal investigator (for single centre	trial):		
C.2.5	Complete below :			
	Organisation:			
	Name:			
C.2.5.3	Address:			

C.2.5.4 Telephone number: C.2.5.5 Fax number: C.2.5.6 E-mail:

OJ, C82, 30.3.2010, p. 1; hereinafter referred to as 'detailed guidance CT-1'.

² According to national legislation.

D END OF TRIAL

D EN	DOFTRIAL
D.1 Da	ate of the end of the trial in this Member State $?^3$ yes \square no \square
D.1.1.	(YYYY/MM/DD):
D.2	Date of the end of the complete trial in all countries concerned by the trial? 3 yes \square no \square
D.2.1	(YYYY/MM/DD):
D.3	Is it an early termination?⁴ yes □ no □
D.3.1	If yes, give date (YYYY/MM/DD):
D.3.2	Briefly describe in an annex (free text):
	The justification for early termination of the trial;
D.3.2.2	2 Number of patients still receiving treatment at time of early termination in the MS concerned by the
	declaration and their proposed management;
D.3.2.3	3 The consequences of early termination for the evaluation of the results and for overall risk benefit
	assessment of the investigational medicinal product.
E SIG	GNATURE OF THE APPLICANT IN THE MEMBER STATE
E.1	I hereby confirm that/confirm on behalf of the sponsor that (delete which is not applicable):
	• The above information given on this declaration is correct; and
	• That the clinical trial summary report will be submitted within the applicable deadlines in
	accordance with the applicable guidance by the Commission. ⁵
E.2	APPLICANT TO THE COMPETENT AUTHORITY (as stated in C.1) □
E.2.1	Date:
E.2.2	Signature:
E.2.3	Print name:
E.3	APPLICANT TO THE ETHICS COMMITTEE (as stated in C.2): □
E.3.1	Date:
E.3.2	Signature:
E.3.3	Print name:

If the national and global end dates coincide in a concerned Member State, the form shall be submitted only once to the National Competent Authority of this Member State with both sections D1.1. and D2.1 complete.

³ In case of a multi-country trial, if the national and global end of trial dates are different in a given Member State, the sponsor shall submit this form two times :

¹⁾ At the <u>end of the trial in the individual Member State</u>, section D1.1. shall be completed and submitted to the respective National Competent Authority.

²⁾ At the <u>global end of the trial</u>, the sponsor shall complete section D.2.1. with the global trial end date and the completed form shall be submitted <u>to all participating Member States</u> in order to allow the sponsor to prepare the trial result summary within the 12-months (or 6-months in case of paediatric trials) timeframe.

⁴ Cf. Section 4.2. of the detailed guidance CT-1.

⁵ Section 4.3. of the detailed guidance CT-1.