# Appendix A-V

### Research project Amendment Form

Investigators are required to inform the IRB in writing, of project changes prior to their initiation.

IRB#:\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Project Title: |  | | | |
| Principal Investigator (PI): | Name: |  | School: |  |
| Title: |  | Department: |  |
| Telephone: |  | Email: |  |

Please submit a copy of supporting documentation (i.e., project revision summaries, consent form). Changes must be highlighted.

1. Amendment in research design or method Yes No (If yes, summarize below)

2. Other changes in the Project Yes No (If yes, summarize below)

|  |
| --- |
|  |

3. Consent form amendment: Yes No (If yes, submit copy. Changes must be highlighted.)

|  |
| --- |
|  |

4. Change of the principal investigator or co-investigator: Yes No (If yes, complete information below)

|  |
| --- |
|  |

Addition\*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name | Responsibility on Research Project | Designation | University/ School | Email |
| 1. |  |  |  |  |

Please provide copy of the individual’s CV. New individual(s) must sign below.

* Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Deletion

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name | Responsibility on Research Project | Designation | University/ School | Email |
| 1. |  |  |  |  |

Deleted individual(s) must sign below

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*Investigators must have the required CITI training.

Signature of Principal Investigator: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_