IRB REQUEST TO AMEND A CURRENTLY APPROVED PROJECT

 $(Please\ submit\ all\ documentation\ electronically)$

Protoc	ol Information
	Protocol #:
	Title:
	Protocol Approval Date:
Investi	gator Information:
	Principal Investigator (PI):
	Email address:
	Department:
Ameno	lment Information:
1.	Please select ALL of the categories of amendments you are requesting:
	(_) Change in Study Title
	(_) Change in Principal Investigator
	(_) Addition of/ change in research personnel
	(_) Addition of/change to recruitment or compensation procedure(s)
	(_) Addition of/change to survey(s), questionnaire(s), or other research instruments (please attach revised instruments)
	(_) Addition of/change to the identifiers collected in the study, or any others that would impact the privacy and confidentiality of study participants
	(_) Addition of/change to informed consent/assent document(s) and/or procedures (please attach related documents)
	(_) Other changes (please explain)

2.	Please provide a brief description of the reason(s) you are making amendments to the study.
3.	Are any of the changes the result of something that occurred during human participant interaction or an unexpected event? (_)yes (_) no
4.	How will the proposed changes have an impact on the risks or benefits to research participants?
5.	Do these changes involve information that might relate to a subject's willingness to continue to take part in the research? (_)yes (_) no
cha	signing this form, I certify I have disclosed to the IRB all information related to the proposed anges to the protocol as accurately and completely as possible. I will not institute changes to the otocol until approval is received from the IRB committee.
ΡI	Signature:
Da	te of Request: