

**For Internal Use Only Protocol Type:**

[ ]  Full Board [ ]  Expedited

[ ]  Exempt

**Revision Request Form:**

**Full Board/Expedited Amendments and Exempt Modifications**

**Protocol Title:** Click or tap here to enter text.

**Principal Investigator:** Click or tap here to enter text.

**Faculty Advisor (if applicable):** Click or tap here to enter text.

**Protocol Number:** Click or tap here to enter text.

**Date of Request:** Click or tap to enter a date.

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| **PART I. PROPOSED CHANGES** |
| **1. Provide a brief lay summary of the overall project. Include enough detail to allow the MCIRB to evaluate the requested change(s) within the context of the overall project.** |
| Click or tap here to enter text. |
| **2. Please provide a detailed list of the change(s) being requested.** |
| Click or tap here to enter text. |
| **3. State the reason (justification) for the requested change(s).** |
| Click or tap here to enter text. |
| **4. What is your assessment of how the changes will affect the overall risk/benefit ratio of the study and the willingness of individuals to participate?** |
| Click or tap here to enter text. |
| **5. Personnel Changes/New Investigator(s):** |
| Mercy College defines the term “Investigator” as “the project director or principal investigator ***and any other person, regardless of title or position*** (e.g., full or part-time faculty member, staff member, student, trainee, collaborator, or consultant), who is ***responsible*** for the ***design, conduct, or reporting*** of sponsored research.”**Using this definition of “Investigator,” have you added any new Mercy Investigators to this project since your most recent IRB review (initial review or review of your most recent amendment/modification)?**[ ]  YES [ ]  NO **Name of Investigator:** Click or tap here to enter text.**Title:** Click or tap here to enter text.Please include additional sheets if needed to identify all new Investigators by name and title. Attach CITI training certificate(s). |

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| **PART II. ATTACHMENTS** |
| **Do the proposed changes require changes to the following documents?****Yes No** |
| [ ]  | [ ]  | Updated Data Security Assessment |
| [ ]  | [ ]  | Informed consent, assent, parent permission documents / scripts |
| [ ]  | [ ]  | Data collection materials (questionnaires, surveys, interview scripts, etc.) |
| [ ]  | [ ]  | Recruitment materials (emails, flyers, letters, posters, brochures, etc.) |

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| [ ]  | [ ]  | Other: Click or tap here to enter text. |
| **If \*Yes\* to any of the above, please attach the appropriate revised document with all changes highlighted.** |

**Principal Investigator’s signature:** **Date:** Click or tap to enter a date.



*For IRB Use Only*

**Signature of IRB Date Approved/Accepted by IRB:** Click or tap to enter a date.

