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MODIFICATION OF PREVIOUSLY APPROVED RESEARCH FORM

For Expedited and Full Review Research
HENDRIX COLLEGE HUMAN SUBJECTS REVIEW BOARD

Project Title:

HSRB Approval Code #:

Date of modification submission:

Investigator Name(s):

Faculty Sponsor (if student research):

Original Expiration Date:

Original Type of Review:

Expedited

Full

1. In list form, please identify and briefly describe each proposed change.

2. Is this modification being submitted in response to an unanticipated problem or adverse problem or event? If **YES**, please briefly explain.

Yes

No

3. Do any of the proposed changes increase risk?
If **YES**, please briefly explain.

Yes

No

ATTACHMENTS

Please check the relevant items below that support your proposed modifications. Please bold or underline changes in your supporting documents.

New NIH certificates (additional investigators)

Updated informed consent form or verbal consent script

Updated recruitment materials, including scripts, flyers, letters, emails, etc.

Updated questionnaires, surveys, list of interview questions, etc. to be used with research participants

Updated debriefing documents or verbal debriefing script

Other (specify): _____

SIGNATURES: I certify to the best of my knowledge that the information provided herein is an accurate reflection of the research study and that the research will continue to be conducted in full compliance with Federal Regulations and Hendrix College policies and procedures governing human participant research.

Signature of Investigator(s)

Date

Signature of Faculty Advisor (if student research)

Date

To submit your modification for review, please submit one electronic copy to HSRB@hendrix.edu AND one signed paper copy (with original signatures) to the mailbox of the HSRB Co-Chair (Dr. Lindsay Kennedy, DWR 140).