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| --- |
| For IRB Office Use Only: |
| Date Rec’d:  |  | Sent to Review:  |  | Date Approved: |  |
| Revision No. |  | Exp. Date: |  | NEW DATE CODE: |  |

All revisions to a previously approved protocol must be reviewed and approved by the IRB *before* they are initiated. Revisions include but are not limited to, changes in data collection methods, edits to consent forms, changes in research team personnel, or any change that affects the risk associated with the research.

**INSTRUCTIONS:** Please complete all fields and enter “N/A” in any field that does not apply to your protocol. Submit this completed form with any supporting documents via email to IRB@jcu.edu. You will receive a confirmation email when your submission is received. Please contact the IRB Office (IRB@jcu.edu, 216-397-1527) with any questions.

# PROTOCOL INFORMATION

|  |  |
| --- | --- |
| Project Title: |  |
| IRB Log No.: |  | Review Category: |  |

# PRINCIPAL INVESTIGATOR INFORMATION

|  |  |  |  |
| --- | --- | --- | --- |
| Principal Investigator:  |  | Email: |  |
| Advisor (if applicable):  |  | Email: |  |
| Department:  |   |

# PROPOSED PROJECT REVISIONS

Please provide a *detailed* description and the reasons for the proposed revision(s). If new personnel are being added to this study, please provide their contact information, research activity role, and CITI Training completion date.

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# SUPPORTING DOCUMENTATION

Please submit any revised or additional documents with this form. Examples: a new solicitation email or recruitment flyer, a revised survey, a new test instrument, or an edited consent form.

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| For IRB Office Use Only: |
| Original Review Category: |  | Revision Review Method: |  |
| Supporting Documents: |  |
| Review Notes: |  |