

**Research Change/Continuation Form**

*\*\*If additional space is needed for description/information, please provide attachment(s).*

If your research has already been approved by the IRB, this form should be used to make changes or updates.

**Principal Investigator(s):** \_\_\_\_\_

**Title of Project:** \_\_\_\_\_

**IRB# (the name of your approved document):** \_\_\_\_\_

**This research received (choose one):**

Full IRB Approval

Expedited IRB Approval

Exempt IRB Approval

**Please indicate and explain the type of Change/Continuation you are requesting.**

I would like to make minor changes to previously approved research, such as materials, data collection methods, or recruitment techniques.

*Explanation:*

I would like to engage in follow-up research with existing participants. My new questions are attached.

*Explanation:*

I would like to enroll the following number more participants than originally planned.

*Explanation:*

I would like to collect data from a different source of participants (describe below).

*Explanation:*

I would like to extend an approved IRB proposal past the original expiration date.

*Explanation:*

I would like to make some other change that is not included in any of the above categories.

*Explanation:*