

University of Arkansas at Pine Bluff IRB Modification Request

Forms must be submitted electronically as part of a single .pdf document attached to an updated application. Please submit to enamt@uapb.edu (paper or handwritten submissions will not be accepted). If this paperwork is not submitted by the PI of the protocol, please copy the PI on the e-mail to document that he/she is aware of this protocol change.

IRB Number:		
Title:		
PI Name:		E-mail:
Phone:		Department:
- 1	as approved as one of the following: Full*	
Exempt Expedited		rill be reviewed during the monthly IRB Full Board meetings. wed by the IRB Chair.
CHECK ANY CHAN	NGES TO BE MADE TO THE A	
Changing the Information Consent	cipant group ber of participants cedure	Changing site location Changing mailing address, phone numbers Adding new personnel Removing personnel Other (please describe): ***Note: No modifications can be implemented until the IRB has approved your proposed changes.
PI Signature:		Date:
Advisor Signature: (if applicable)		Date:
	OFFICE	E USE ONLY
		proved protocol has been granted by the IRB on: al period which ends on:
Approval for this chanterminated.	ige will continue to be effective u	ipon Annual continuation approval or until the protocol is
Signature of IRB	Chair or designee	Date