

**ROOSEVELT UNIVERSITY
INSTITUTIONAL REVIEW BOARD (IRB)**

Human Subject Proposal Amendment Form

DATE: ____/____/____

IRB NUMBER: _____

INVESTIGATOR/RESEARCHER: _____

EMAIL: _____

DEPARTMENT: _____

PROJECT TITLE: _____

DATE PREVIOUS APPROVAL EXPIRES: ____/____/____

Please describe modifications or amendments to your original research protocol below (*please attach and submit amended documentation*):

(This box will expand to accommodate your description)

The IRB will determine whether additional information or approval is required for the above modification or amendment. Please submit this form to Deidra Somerville, Director of Research and Sponsored Programs, dsomerville@roosevelt.edu.

The information above is true and accurate to the best of my knowledge and I understand that prior IRB approval is required before initiating any changes that may affect the human subject participant(s) in the originally approved research protocol.

Signature of Investigator(s)/Researcher(s)

____/____/____
Date

Signature of Faculty Advisor for Student Researchers

____/____/____
Date

Approving Signature of IRB Chair

____/____/____
Date

Approval of amended methodology is granted from ____/____/____ to ____/____/____