**SAN JOSE STATE UNIVERSITY
HUMAN SUBJECTS INSTITUTIONAL REVIEW BOARD**

**Request for Modifications to Approved Research**

**Name of Investigator(s):**
**Email:**
**Phone Number:**

**Study Title:**

**IRB Protocol Tracking Number:**

1. **Please indicate what type of modification you would like to make by checking all that apply:**

[ ]  Modifications to data instruments.
[ ]  Modifications to consent or assent documents.
[ ]  Modifications to recruitment materials or recruitment methods.
[ ]  Change in number or type of subjects.
[ ]  Change in inclusion/exclusion criteria.
[ ]  Change in research procedures.
[ ]  Change or addition of study sites.
[ ]  Change or addition of study personnel.
[ ]  Other.

1. **Please describe the modifications you want to make to your study and why.**
2. **Explain how these changes affect participants currently enrolled in the study, if applicable.**
3. **If the current participants will be affected, explain how they will be notified of these changes.**
4. **Indicate how the modification impacts the level of risk to subjects.**

[ ]  No Change
[ ]  Decrease
[ ]  Increase

1. **If you marked “Increase” under #5, please describe what the new risk(s) are and how an increase in risk to participants will be mitigated.**
2. **Faculty Supervisor Approval for Student Investigator***This section may not be filled out by student investigators. A faculty or staff member must sign this*

*section if the modification request is for a protocol that was submitted by a student.*

[ ]  I have reviewed and approved the IRB protocol modifications proposed by the student investigator. I understand that modifications affecting participants may not be implemented until a notification of approval has been sent by the Office of Research.

**Faculty Supervisor Signature and Date***Options for signing this form: The* [*DocuSign application*](http://its.sjsu.edu/service-catalog/software-apps/docusign/) *provided by SJSU; converting this form to PDF once it has been filled out and adding a digital signature; providing a handwritten signature once the form has been filled out and scanning the document into pdf. Faculty may also submit this request via email to* *irb@sjsu.edu* *on behalf of the student instead of signing it.*

**Faculty Supervisor Name:
Faculty Supervisor Email:**

**Submission Instructions:** Please be sure to make the modifications to the original protocol submission and attach any documents that have been revised due to the modification. You may email this form, along with any revised or new documents to irb@sjsu.edu. Please allow 2-3 business days for a confirmation from the IRB analyst.