



## REVISION REQUEST FORM

For Changes to Previously-Approved Research

**INSTRUCTIONS:** If you wish to revise your approved study, complete and submit this form in a follow-up package within your existing project at [www.irbnet.org](http://www.irbnet.org). There is no need to revise your original application form, since this form captures what is needed. Revisions include those to the purpose, subject pool, recruitment methods or advertisements, sites, the informed consent process or forms, data collection procedures or instrumentation, personnel, etc. The PI must e-sign in IRBNet before submitting.

<b>Today's Date</b>	Click here to enter date.	<b>Principal Investigator</b>	Click here to enter name.
<b>Study Title</b>	Click here to enter study's title.		
<b>IRBNet Number</b>	Click here to enter project #.	While viewing a project at IRBNet, the number appears at the top of each page, in brackets, directly under the photo header and next to the title. Enter only the number <u>before</u> the dash, which is the project number (not package number after the dash).	

REVISION DETAIL	
1	<p><b>I am adding or removing a co-investigator, research assistant, or other individual who is engaged in research activities (e.g. interpreters, etc.). If adding anyone, attach appropriate CITI Training Report(s) to your IRBNet package.</b></p> <p><input type="checkbox"/> No      <input type="checkbox"/> <b>Adding Personnel</b> Name: Click here to enter name. Role: Click here to enter role.</p> <p><input type="checkbox"/> <b>Removing Personnel</b> Name: Click here to enter name. Role: Click here to enter role.</p>
2	<p><b>I am revising previously-approved documents (e.g. advertisement, informed consent form, survey or questions, etc.). If yes, attach documents to your IRBNet package. Make sure past tracking has been accepted, and only current revisions are tracked.</b></p> <p><input type="checkbox"/> Yes    <input type="checkbox"/> No If yes, click here to describe exactly what documents you wish to revise.</p>
3	<p><b>I am making some other type of revision.</b></p> <p><input type="checkbox"/> Yes    <input type="checkbox"/> No Click here to describe the exact revision(s) you wish to make.</p>
4	<p><b>Will any of the above revisions affect the study's risk to benefit ratio?</b></p> <p><input type="checkbox"/> Yes    <input type="checkbox"/> No If yes, click here to describe.</p>