



RESEARCH ETHICS BOARD
 For Review of RESEARCH INVOLVING Human Subjects
 1000 KLO Road, Room B120
 Kelowna, BC V1Y 4X8
reb@okanagan.bc.ca

Protocol # _____
FORM 5

REQUEST FOR AMENDMENT OF AN APPROVED PROJECT

USE THIS FORM ONLY FOR AMENDMENTS TO AN ONGOING STUDY

An amendment is a minor change to an ongoing previously approved project. Significant changes in the study participants, the nature, number or content of questions studied, and the experimental intervention or manipulation all exceed the requirements for amendments and must be submitted as a new proposal. Please refer to the appropriate OC REB guidelines for information on completing this form.

DATE OF THIS SUBMISSION:

1. Principal Investigator (or Student Supervisor)	2. OC Department/Faculty
3. Phone Number	4. Fax Number
5. E-mail address	6. Address
7. Co-Investigator(s)	8. Student(s)
9. Granting Agency/Source of funding: <input type="checkbox"/> Funded <input type="checkbox"/> Applied for <input type="checkbox"/> Unfunded Date application is due:	
10. Title of Project	
11. Project Time Period (mm/yy – mm/yy)	
12. Indicate where this research is being carried out.	
13. Title/Position of researchers involved (check all that are relevant to THIS project) Faculty Member Undergraduate student Other (specify)	

<p>14. Signature of Principal Investigator (or Student Supervisor)</p> <p><i>I agree to abide by the Tri-Council Policy for Ethical Conduct for Research Involving Human Subjects.</i></p> <p>_____</p> <p>_____</p> <p>Date</p>	<p>15. Signature of Co-investigator(s)</p> <p>_____</p> <p>_____</p> <p>Date</p>
<p>16. Signature of Student</p> <p>_____</p> <p>_____</p> <p>Date</p>	<p>17. Department Head/Faculty Dean (as appropriate)</p> <p>_____</p> <p>_____</p> <p>Date</p> <p>Printed name</p> <p>_____</p>

AMENDMENT

<p>18. Changes to the Study Design: Check any areas that have changed and describe in more detail in item 23.</p> <p>Investigators/Co-Investigators/Students</p> <p>Sponsor</p> <p>Title</p> <p>Research method</p> <p>Subjects</p> <p>Recruitment method</p> <p>Procedures</p> <p>Study Location</p> <p>Time required of the subject</p> <p>Reimbursement</p> <p>Access to data</p>	<p>19. Changes or additions to study documents: Check any that have been revised and attach a copy with the changes highlighted in bold type or underlined. Include a new version date on all revised documents.</p> <p>Recruitment letter</p> <p>Advertisement</p> <p>Poster</p> <p>Consent form</p> <p>Covering letter (consent) for questionnaires</p> <p>Tests</p> <p>Interviews</p> <p>Questionnaires</p> <p>Other</p>
<p>20. Change in investigators/coinvestigators/graduate students - Please list all new investigators/coinvestigators/graduate students</p>	
<p>New Investigator, Co-Investigator or Student:</p> <p>Surname:</p> <p>Given Name(s):</p> <p>Faculty / Department:</p> <p>Telephone number:</p> <p>Email address:</p> <p>Signature _____</p>	<p>New Investigator, Co-Investigator or Student: (If more than two use item 23 or an additional page)</p> <p>Surname:</p> <p>Given Name(s):</p> <p>Faculty / Department:</p> <p>Telephone number:</p> <p>Email address:</p> <p>Signature _____</p>
<p>21. New Title:</p> <p>_____</p>	
<p>22. New Funding Agency or Company:</p> <p>_____</p>	

23. Describe any changes in study design, for example, number of subjects. Explain why these changes are needed. Attach copies of any amended documents (questionnaires, consents, etc).

SUBMISSION CHECK LIST

24. List all documents relevant to THIS amendment. Assign a version date to attached documents.		
5 copies of the revised research proposal		
Original copy + 4 copies of the following documents	✓ If applicable	Version Date
Amendment form (Form 5)	<input type="checkbox"/> Yes	Do not alter the version date on this form.
Advertisement to recruit subjects	<input type="checkbox"/> Yes	
Letter of initial contact	<input type="checkbox"/> Yes	
Subject consent form (and control consent, if different)	<input type="checkbox"/> Yes	
Parent / Guardian consent form	<input type="checkbox"/> Yes	
Telephone contact form (Form 3)	<input type="checkbox"/> Yes	Do not alter the version date on this form.
Deception form (Form 4)	<input type="checkbox"/> Yes	Do not alter the version date on this form.
Questionnaires, tests, interview scripts, etc.	<input type="checkbox"/> Yes	
Cover letter for the questionnaire	<input type="checkbox"/> Yes	
Other required/supporting documents/approvals	<input type="checkbox"/> Yes	Version date not required