Change Request Form Checklist

WHAT? Any proposed change to an approved study must be reviewed and approved by the appropriate AHU research committees (Research Office, Scientific Review Committee, Institutional Review Board, Environmental Health and Safety Office, and/or External Funding Steering Committee) prior to implementation, except where an immediate change is necessary to eliminate hazard to the participant.

WHEN? When you have change(s) request to your approved project, such as investigator(s) or key personnel, study methods, study methods, Informed Consent Document (ICD), and/or study site.

Please submit the following information at https://my.ahu.edu/academics/research/online-submissions/study-change-request-form:

Requested Information

Required Fields*

☐ Project Tracking Number*

☐ Project Title

☐ Indicate the changes:

- Title
- Investigator(s) or key personnel
- Study site
- Aim and hypothesis
- Sample group, sample size and/or sampling method
- Study material and methods (instrumentation for data collection, how the study will be conducted, type of data / samples (where and how the samples will be collected, stored, and analyzed). Upload new survey, questionnaire, etc., under "Additional Documents".
- Informed Consent Document (ICD). Upload the updated ICD under "Additional Documents".
- Other

☐ Description of change(s)

Provide a description of the proposed change(s).

☐ Justification

Provide justification for the proposed change(s) described above.

☐ Additional comments, if applicable

Include any additional comments necessary to clarify the proposed change(s).

☐ References

List the references that support the project change(s), if applicable.

☐ If change on Investigator(s) or key personnel, please specify the following:

- Full name, email address, phone number, status (student, faculty, or staff), faculty status (full-time, part-time, adjunct, affiliated), faculty rank level (Professor, Associate, Assistant, Instructor), degree, and department.
- If Human Subject Research, the investigator must have:
  - IRBnet account and CITI account linked.
  - Required CITI training under AdventHealth Orlando affiliation (
  - Florence Training
  - CV and professional state licenses (only faculty, staff – not students)
  - Conflict of Interest disclosure and training (only PI). You will receive a link to complete it after submission of the change request.

☐ If Human Subject Research, upload the HRP201 Research Personnel Form and HRP203 Modification Application and

☐ Additional documents, if applicable

If uploading more than one file, upload all files as a single Zipped (.zip) file.