

You must have IRB Approval before you can continue your research project after its annual expiration date. Please type your responses (Word document) or use ink (PDF) to complete this form and submit it to the IRB/Research Services Office.

Primary Investigator Name:		Phone No.:
Email Address:	Campus Box No.:	Department:
Title of Project:		
Funding Source/Agency:	Original Period of Research Project: From: To:	
IRB Database Number:	IRB Initial Review Date:	

Section 1: Have you (or your research team) made any changes to the research project since it was approved by the IRB?

NO - No changes made to project.

YES – Please check the appropriate box(es) below to tell the IRB what has changed in your project:

- Research personnel
- Research procedures used
- Informed consent documents
- Types of human subjects participating
- Types of data collected

The IRB also asks that you provide a written explanation for these changes. Attach your explanation to this form and submit them to the IRB Administrator.

Section 2: Annual Progress Report: Multi-year projects are initially approved by the IRB for a 12-month period. Please attach a brief report describing your progress to the IRB to this form.

Principal Investigator/Researcher Assurance:

As principal investigator/researcher, I hereby assure that the information I have provided on this form is correct and accurate, to the best of my knowledge.

 Signature of Principal Investigator/Researcher

 Date

Faculty Advisor Assurance:

As faculty advisor, I hereby assure that the information I have provided on this form is correct and accurate, to the best of my knowledge.

 Signature of Faculty Advisor

 Date

The fields below should be completed by the IRB Administrator

Request Form received on:	Annual Progress Report Attached? <input type="checkbox"/> YES <input type="checkbox"/> NO
Changes to approved protocol? <input type="checkbox"/> YES <input type="checkbox"/> NO	Review completed on:
Approval completed on:	Notification Sent to PI on: