

**Southern Utah University
Institutional Review Board
APPROVED PROTOCOL EXTENSION FORM**

Information entered into this form may be lost if this file is not first downloaded (i.e., saved to a local device) and then opened with Adobe Reader or Adobe Acrobat prior to the entry of any information.

Name of Principal Investigator

E-mail

Phone Number

Department

College/School

Faculty Supervisor (If Applicable)

E-mail

Phone Number

Department

College/School

Project Title

Original Approval Date

Date of Last Approval (if Applicable)

Status of Research Project was:

Exempt

Expedited

Full-board Review

Current State of Research Project:

Active - project is ongoing

Currently inactive - project was initiated but is presently inactive

Inactive - project was never initiated

Total number of subjects
tested to date

Total number of subjects
withdrawing their
participation once
initiated

Total number of subjects
tested since the last IRB
review

If Applicable/Known, Explain the reason(s) why subjects withdrew.

Problems/Adverse Events

No problems/adverse events have occurred

One or more problems/adverse events have occurred

If There Were Problems/Adverse Events

All have been reported to the SUU IRB

One or more problems have not been reported to the SUU IRB (Please complete and attach the Human Subjects Incident Report Form)

Relevant Literature/Findings:

Describe any recent literature or findings since the last IRB review which may affect participants' willingness to participate, risks, and/or vulnerability status. If any of the proposed changes increase the risk level and/or increase participants vulnerability status, you must provide explicit rationale and justification for the change, and a means by which the effect of these changes may be minimized. This information must be included in the informed consent document/script.

Changes to Project:

Indicate which of the following changes (modifications or addendum) you would like to make, if any.

No changes requested

Project personnel-If new PI or Faculty Supervisor IRB Training Certificate must be attached or on file.

Test Location- If off campus permission letter from site must accompany this application

Testing material or apparatus

Incentives/compensation for participation

Procedures

Informed consent

Other: please describe

For each change requested above, indicate what/how you proposed initially (i.e. that which was approved) and the modifications/addendum you would now like to make. For each change, address what if any impact the change might have on a) risks and benefits to the participants and others, and b) the vulnerability status of participants.

Informed Consent:

Paste or attached a printed clean copy of the currently approved informed consent document/script and the proposed document/script.

If informed consent requirements were previously waived by the IRB committee, summarize the reason(s) below.

The information provided in this report is accurate to the best of my knowledge. I assure the IRB that my work involving human participants has been conducted in accordance with policy 6.20 of Southern Utah University, and within the previously approved protocol and conditions, if any, imposed by the IRB.

I agree with the above statement

Principal Investigator's Signature (Typed Signature) Date

Faculty Supervisor's (Typed) Signature (If Applicable)

**Please Submit this Form via E-mail to Michelle Grimes
(michellegrimes@suu.edu) along with any applicable attachments or
supplemental materials.**