

**SPRINGFIELD COLLEGE  
INSTITUTIONAL REVIEW BOARD  
CHANGE OF PROCEDURE FORM  
FOR APPROVED STUDY**

Name of Primary Investigator :

Name of Research Advisor (if faculty member is PI, please list name of Department Chair) :

Title of Research Project :

Please describe the change in procedure(s) below and attach all revised documents (with the revisions highlighted) for review and approval before moving forward with the research.

Principal Investigator's signature

Research Advisor's signature (if faculty member is PI, please have Department Chair sign here)

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IRB action: Expedited\_\_\_\_\_ Full Committee Review\_\_\_\_\_

Approved\_\_\_\_\_ Approved with conditions\_\_\_\_\_ Not approved\_\_\_\_\_

Conditions:

IRB Chair's signature\_\_\_\_\_Date\_\_\_\_\_