



جامعة الملك سعود
وكالة الجامعة للدراسات العليا
والبحث العلمي
عمادة البحث العلمي
لجنة أخلاقيات البحوث

King Saud University
Vice Rectorate for Graduate
Studies & Scientific Research
Deanship of Scientific Research
Research Ethics Committee

For REC use only:
Full Board []
Expedited []
Proposal No.

**Request to Amend a Currently-Approved Project
Form # KSU-REC 012-E**

Part 1 – Administrative Information:

Proposal Information	
REC #	
Title:	
Contact Information	
Principle Investigator name	
Principle Investigator ID:	
Email address:	
College/Department	
Status	<input type="checkbox"/> Undergraduate <input type="checkbox"/> Graduate Student <input type="checkbox"/> Post-Doctoral Fellow <input type="checkbox"/> Faculty <input type="checkbox"/> Staff

Part 2 – Amendment Information

1. Please select ALL the categories of amendment(s) you are requesting:

- Change in Study Title.
- Change in Principal Investigator.
- Addition of/change in research personnel.
- Addition of/change in funding source.
- Change to research/study design.
- Addition of/change to study population.
- Addition of/change to survey(s), questionnaire(s), or other research tools (Please attach the original & the revised tool(s)).
- Addition of/change to the identifiers collected in the study, or any others that would impact the privacy and confidentiality of the study participants.
- Addition of/change to informed consent and/or procedures (Please attach the original & the revised documents).
- Other changes (specify)

2. For each category you have selected above, please describe the changes you are proposing:

3. Please state the reasons you are making amendments to the study:

4. Are any of these changes the result of something that occurred during human participant interaction or an unexpected event? Yes No

5. Will the proposed changes affect the risks or benefits to research participants?

- Yes No

If yes, please explain:

6. Do these changes involve information that might relate to a subject's willingness to continue to take part in the research? Yes No



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Signature

Principal Investigator	
I certify that the information I provide in this application is correct and complete. I also pledge that I will not change any of the procedures, forms, or protocols used in this study without first seeking review and approval from the KSU-IRB.	
_____	_____
Name/Signature of Principal Investigator	Date
_____	_____
Name/Signature of New PI	Date
_____	_____
Name/Signature of Co-Investigator	Date

For more information, please visit the website of the Research Ethics Committee in King Saud University http://dsrs.ksu.edu.sa/ar/comm_Policies