**Appendix G: IREC Protocol Amendment Form**

Use this form to amend any approved protocol.

This document should be submitted by the investigator as an e-mail attachment to IREC staff at resethics@nu.edu.kz. A signed cover sheet is not required. If there are attachments, submit them as another single Word file.

Project Title:

Principal Investigator:

Date:

Please check all categories in which changes are proposed:

[ ]  Research Team Personnel [ ]  Risks and/or Benefits

[ ]  Research Design and/or Method [ ]  Compensation

[ ]  Measures/Instruments [ ]  Subject Population

[ ]  Deception and/or Debriefing [ ]  Confidentiality

[ ]  Informed Consent and/or Recruitment

[ ]  Other:

Describe changes to the approved protocol/IREC application form. Explain in detail in the space below or as a separate attachment the reasons for requesting these changes and which part(s) of the approved document will be amended

Describe changes to the informed consent form/recruitment advertisement, etc. Explain which sections of these items are being changed in the space below or as a separate attachment.

**If the changes you intend to propose include collaborating with investigators at another institution, contact IREC before completing this form.**

A revised protocol with changes included and marked should be submitted if the changes are interspersed throughout the protocol. However, if the changes are discrete, such as new flyer, a closely related new study, or a change in compensation amount, it is not necessary to submit the entire protocol. If there are numerous discrete changes during an approval period, IREC may request that they are all incorporated into the protocol at the time of renewal. (If researchers want to submit a revised protocol with each change, discrete or not, because it is easier for them, that is fine.)

**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 Nazarbayev University Institutional Review Ethics Committee.

[ ]  Attestation of Principal Investigator

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Name / Signature of Principal Investigator Date

Sign below only if there are changes to the list of co-investigator(s). Please submit copy of their CITI diplomas

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name / Signature of New Co-Investigator(s) Date