

**TENNESSEE STATE UNIVERSITY
HUMAN SUBJECTS COMMITTEE**

AMENDMENT TO RESEARCH PROPOSAL FORM

This proposal is: (check where applicable) IRB Number: HS _____ - _____ Approved: _____
Date

Dissertation Research: _____ Grant Proposal: _____ Funding Agency: _____

Master's Thesis Research: _____ Faculty Research: _____

Undergraduate Research: _____ Other: _____

IDENTIFICATION INFORMATION: (Complete all items. Use "N/A" if necessary).

1. Date: _____
2. Title of Proposal: _____

3. Principal Researcher: _____ E-mail : _____
4. Department/Unit: _____
5. Campus Address: _____
6. Telephone Number: _____ Alternate Telephone Number _____
7. Other Researchers: _____
8. Faculty Advisor (if applicable): _____ E-mail: _____
9. Former Title of Proposal (if applicable): _____
10. Identify any other previous committee reviews, dates and results: _____

11. This proposal is a :
 - a. _____ Change of
_____ Project Title
_____ Principal or Other Investigator(s)
_____ Informed Consent
_____ Other (describe below)
 - b. _____ An Amendment
_____ Yearly Progress Report for Previously Approved Project (only include proposed changes)
_____ Sub-Study under an Umbrella (e.g. Research Center, Training, Grant, etc...)

