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| **AMENDMENT TO AN EXISTING SSA** |
| **PROJECT TITLE:**  |  |
| **AMENDMENT DATE:**  |  |
| **HREC/SSA** | **HREC:** **SSA:**  |
| **MyIP:** | **Existing SSA:****New Grant:**  |
| **PRINCIPAL INVESTIGATOR (New project):** | Name: Email: Phone: Department  Organisation: RAH |
| **PRINCIPAL INVESTIGATOR****(Existing project):** | Name: Email: Phone: Department  Organisation: RAH |
| **CHANGES FROM EXISTING PROJECT** | **DATES (New completion date):**  |
| **BUDGET (please attach new approved budget):** Tick yes or no. **Yes** **No** |
| **Changes to Project plan:**(Please give summary of changes/additions to the plan/protocol if applicable, and provide supporting documentation) |  |
| **Is further ethical review required?**Tick yes or no. | **Yes** **No**  |

**Principal Investigator**: **Name:** ............................................................... **Date:** ...............................................................

**Signature:** ...............................................................

**OFFICE USE ONLY**

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| **Declaration by the Research Governance Officer**The above project has been reviewed and is: Recommended Not Recommended**Name:** ...............................................................**Position:** ...........................................................**Signature:** ........................................................ **Date:** ..... / ..... / .....**Comments:** ....................................................... | **Final Authorisation**Noting the endorsement provided by the Research Governance Officer or authorised delegate above, I hereby recommend this project is: Authorised Not Authorised**Name:** ...............................................................**Position:** ...........................................................**Signature:** ........................................................ **Date:** ..... / ..... / .....**Comments:** ...................................................... |