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|  | **Research and Graduate Studies Committee**  **University Human Ethics Committee**  **College Human Ethics Sub-Committees**  [www.latrobe.edu.au/researchers/ethics/human-ethics](http://www.latrobe.edu.au/researchers/starting-your-research/human-ethics) |
| **Research Office** |  |

**MODIFICATION FORM – HUMAN RESEARCH ETHICS**

|  |  |  |
| --- | --- | --- |
| **1. Approval Number** |  | |
| **2. Project Title** |  | |
| **3. Chief Investigator / Supervisor:**  (academic staff members only) | Name:  Email address: | |
| **4. Student** (if applicable) | Name:  Email address: | |
| **5. Project Duration:**  (subject to annual review) | Project commenced:         /     / | Project concludes:         /     / |

PLEASE NOTE THAT THE MODIFICATIONS PROPOSED IN THIS FORM MUST NOT COMMENCE WITHOUT PRIOR WRITTEN APPROVAL FROM THE UHEC OR RELEVANT CHESC

## 6. MODIFICATIONS PROPOSED: modifications may include minor changes to the study, such as the aims, direction, procedures, personnel, duration, recruitment methods or numbers of participants, in addition to alterations of support documents. The UHEC or appropriate CHESC will review the proposed modifications and reserve the right to determine if a new application is required. Please itemise the changes you are requesting.

**7. REASONS FOR THE MODIFICATIONs:** please summarise your reasons for requesting the above changes and indicate whether to date, any ethically significant incidents have arisen or any complaints have been received in connection with this project.

For new personnel please complete an Investigator Template for each new investigator.

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| **NEW INVESTIGATOR**  For database purposes please ensure that all details are up to date and correct. | | | | |
| Name | Click here to enter text. | | Phone | Click here to enter text. |
| Email | Click here to enter text. |
| School/Institute  Position | Click here to enter text. | | Staff/  Student No. | Click here to enter text. |
| Academic Title / Qualification | Click here to enter text. | | Signature | Click here to enter text. |
| Position / Other affiliations. If Student provide details on Level and Course of Study | | Click here to enter text. | | |

*The report must be submitted electronically by the Chief investigator from the La Trobe University staff email account.*

**Low risk project please submit to either:**

**ASSC College Human Ethics Sub-Committee –** [**chesc.assc@latrobe.edu.au**](mailto:chesc.assc@latrobe.edu.au)

**SHE College Human Ethics Sub-Committee –** [**chesc.she@latrobe.edu.au**](mailto:chesc.she@latrobe.edu.au)

**Above low risk project please submit your form to** [**humanethics@latrobe.edu.au**](mailto:humanethics@latrobe.edu.au)