

**Changes and/or Project Termination Form
Approved Research Involving Human Subjects**

Research Compliance Services
Office of Research, Grants, and Contracts
The University of Tennessee at Martin
100 Hall Moody Administration Building
Martin, TN 38238

1. **IRB number:** **Termination Date**
2. **PI Name:**
3. **PI Address:**
4. **Project Title:**

PLEASE CHECK THE APPROPRIATE LINE(S) BELOW (Consult IRB Guidelines):

- Change of Project Title
- Change of Principal or Co-Principle Investigator(s), other Collaborators, Student Advisor
- Change(s) to Project Which Affect Participation of Human Subjects
- Change(s) in Informed Consent Form and/or Assent Form(s)
- Additional Locations of Conducting Project
- Unexpected Risks to Subjects
- UTM-IRB Approval Needed for Another Year
- Project Completed – Please Close IRB Files.

Details of Changes Requested: (attach additional pages if more detail is required)

Principal Investigator _____ Date _____

Faculty Advisor _____ Date _____

(if required)

ORGC Approval

New Expiration Date _____

Initials

Notification of Change _____