**Auckland Health Research Ethics Committee (AHREC)**

**Amendment Request Form, version 1.0**

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| **For Administrative use only:** |
| **Date received at RO:** | Click here to enter a date. |

# Section A: Protocol

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| **Protocol Number of the approved AHREC application to be amended:** Click here to enter text.Full project title: Click here to enter text.Current Principal Investigator: Click here to enter text.Auckland DHB Service Area (if relevant): Click here to enter text.University Department or School (if relevant): Click here to enter text. |

# Section B: Requested Amendments

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| **Are you requesting an extension to your approval?** |
| **Are personnel being added, removed or the PI changed as part of this Amendment?****If “Yes”, please name the researchers and clearly indicate whether they are to be added or removed from the study’s personnel.**Click here to enter text. |
| **Summary of all other changes – please provide a numbered list of the proposed changes and how these changes vary from the approved application.**Click here to enter text. |

# Section C: Supporting Documents Checklist

Please ensure that any modified supporting documents, with visible tracked changes, are included in the submission. And please indicate which documents have been included in the submission:

[ ] Participant information sheet

[ ]  Consent form

[ ]  Interview questions or topics

[ ]  Focus group questions or discussion topics

[ ]  Surveys or questionnaires

[ ]  Assent form

[ ]  Advertisement(s)

[ ]  email invitations

[ ]  Confidentiality agreement