This form should be used for all revisions of IBC protocols outside of revisions submitted with the annual report.

Section 1

|  |  |  |  |
| --- | --- | --- | --- |
| **IBC #** |  | **Principal Investigator Name** |  |
| **IBC Study Title** |  |
| **PI Signature** |  | **Date** |  |
| Please note, an edited version of the BAR with revisions highlighted is required for all revisions or a new BAR may be requested if there are substantial revisions. |

Section 2

|  |
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| **Revisions**  |
| [ ]  Administrative changes (changing titles, contact information, etc.) |
| [ ]  Study or funding source |
| [ ]  Addition of personnel (Attach the IBC Addition of Personnel form) |
| [ ]  Other |
| Please describe the revision/s below.  |
|  |

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| --- |
| [ ]  Removal of Personnel |
| Remove the following personnel: |  |
|  |  |  |
|  |  |  |
|  |  |  |