



UNIVERSITY of LIMERICK

OLLSCOIL LUIMNIGH

SCIENCE & ENGINEERING CHAIR'S DECISION RESEARCH ETHICS APPLICATION FORM

Title of Project	
Related Approval Code	
Period for which Approval is Sought	
Principal Investigator (and qualifications)	
Other Researchers (and qualifications)	Existing researchers:
Please provide a description of the proposed changes to the previously approved research under the following headings.	
1. Change to list of investigators Remove the following investigators: Add the following:	
2. Research Question/Hypothesis - change?	
3. Research Design – change?	
4. Data Collection Methods - change?	
5. Subject Number & Selection Procedures - change?	
6. Changes to Supporting Documentation Please attach any changed study documents – Information sheet etc	
7. Other Changes	
Signature of Principal Investigator:	Date:
Signature of Head of Department	Date: