

**Franklin Pierce University
Institutional Review Board
Addendum Application**

Principal Investigator Name:
Study Title:
Date of Prior Approval:

Changes requested to Approved Study:

Reason for Changes/Addendum to Approved Study:

Any new risks or benefits associated with this addition to the study?

Any other considerations?

_____ Approved ____ Not Approved ____
Chair-Signature Date

IRB Approval #: _____ Approval Expiration Date: _____