**Research Protocol Amendment Form**

**(For the modification of the protocol approved by**

**Ethical Review Committee for Human Research, Faculty of Public Health, Mahidol University)**

1.Project Title………………………………………………….…………………………………

2. Name of the Principal Investigator…………………………………………….………………

3.Research Sites…………………………………………………………………………………..

4. Protocol Number……………….…..COA. No.MUPH ………………(See the existing approval)

5. Number of Amendment .............................Date of Amendment Submission……..………………

6. Please explain the changing items, comparing existing contents/procedure with proposed/ intended changes and include reasons for changes *(Please submit the new protocol with underlined changes of approved protocol)*

**Research Protocol**

|  |  |  |  |
| --- | --- | --- | --- |
| **Changing items** | **Existing contents/procedure** | **The proposed/ intended changes** | **Reasons for changes** |
|  |  |  |  |

7. Modification of information sheet/informed consent

❒ No

❒ Yes

❒ Consent form addendum No..............For re-consenting

❒ New consent form No............

For ❒ New participants

❒ For re-consenting

Signature …………………………………….…

(………….………………………………...)

Principal Investigator

Date…………………………