REVIEW OF RESUBMITTED PROTOCOL FORM
(SJDEFIIRB FORM 4.1)

IRB Reference No.		**Protocol No.**	
Protocol Title			
Principal Investigator			
Date of Initial Submission			
Resubmission	☐2nd Review ☐3rd Review ☐4th Review		
Date of Resubmission			
Initial Review Date			
Last Review Date			
Comments			
Recommendation	☐Approve ☐Minor modifications required _____ _____ _____ _____ _____ ☐Major modifications required _____ _____ _____ _____ _____ ☐Disapprove		

Primary Reviewer Signature Date

IRB Final Action	☐Approve ☐Minor modifications required _____ _____ _____ _____ _____ ☐Major modifications required _____ _____ _____ _____ _____ ☐Disapprove

Member-Secretary	Signature	Date
Chair	Signature	Date